



*Agency of Human Services*

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

**GOVERNOR'S SFY2023 BUDGET TESTIMONY**  
JANUARY/FEBRUARY 2022

**HOUSE APPROPRIATIONS COMMITTEE**

**SENATE APPROPRIATIONS COMMITTEE**

**HOUSE HUMAN SERVICES COMMITTEE**

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### Department of Disabilities, Aging and Independent Living SFY2023 Budget Testimony 2022 Legislative Session

#### Department Overview

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

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

DAIL consists of approximately 300 employees working throughout the Commissioner's Office and the following five divisions:

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

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

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

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

- Grow the Economy.
- Protecting the Vulnerable.

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

- Reducing fall-related injuries.
- Reducing high-risk substance use and preventing suicide among older Vermonters.
- Preventing abuse, neglect and exploitation of vulnerable adults.
- Improving career paths for youths with disabilities as they transition into adulthood.
- Supporting employment of older adults and adults with disabilities.
- Ensuring that long-term care facilities follow federal and state licensing regulations.
- Ensuring the delivery of quality home and community-based services.

DAIL has embraced Results Based Accountability (RBA) and continues to focus on program performance measures and performance improvement. Throughout this document, we identify measures related to how much, how well and how people are better off because of our services and supports. For more information, please visit the [DAIL Performance Budget Scorecard](#).

### **Department Highlights**

#### Department Leadership

Monica White was appointed Interim Commissioner of DAIL in March 2021, following the departure of previous Commissioner Monica Caserta Hutt, who moved to the position of Chief Prevention Officer in Governor Scott's office in February 2021. Monica White was previously DAIL's Director of Operations, and she was appointed officially to the DAIL Commissioner role in July 2021.

Will Fritch, previously with the Vermont Department of Health, joined DAIL as Director of Operations beginning in September 2021.

DAIL's Developmental Disabilities Services Division Director position has been vacant since June 2021 when the previous incumbent left State government to accept a position in the private sector. Clare McFadden and then Jessica Bernard have held this role on an interim basis during the vacancy, and Jennifer Garabedian begins in this role on a permanent basis on January 24, 2022.

#### COVID Response

Since the onset of the COVID-19 pandemic, DAIL has maintained an active role in the State's emergency response to protect Vermonters who are at highest risk of getting sick or dying from the virus. Throughout SFY22, DAIL has continued to provide technical assistance to providers with support from the Vermont Department of Health, assisted in the State's efforts to roll out Vermont's vaccine program, maintained program flexibilities to better support consumers and families, awarded COVID Relief Funds (CRF) to a variety of providers in need of emergency financial stabilization, and actively participated in emergency outbreak response to long-term care facilities in need of emergency staffing, PPE and N95 fit-testing support.

#### Deaf, Hard of Hearing, DeafBlind Services

Laura Siegel, MBA was hired as the new Director of Deaf, Hard-of-Hearing, DeafBlind (DHHDB) Services in March, 2021. This new position acts as the single point of entry for information and works with a variety of stakeholders, including the Deaf, Hard of Hearing, DeafBlind Advisory Council, to identify service gaps and advise on program development to meet identified gaps. In her short time working for DAIL, Laura has created a new web page for DHHDB Services, created a guidance document describing how to use American Sign Language (ASL) interpreters and captioning services on different virtual platforms, created a guide on how and when to use clear masks at COVID vaccination clinics, encouraged the use of DMV Visor cards to help those who are Deaf or hard of hearing when pulled over while driving, completed twelve educational presentations to a variety of community members, provided technical assistance to several state agencies such as DMV, AOT, DPS, and DOL on how to improve communication access for DHHDB community members, and hosted community forums with the Agency of Education to bring in working professionals and community members to learn about the new vendors serving DHHDB school-age children.

#### Federal Home and Community-Based Services Rules

As Vermont embraces the intent and spirit behind the federal Home and Community Based Services (HCBS) rules, we ensure that Vermonters have access to settings that look and feel like "home" and value the inclusion and contributions of individuals with disabilities and older Vermonters within their communities. Both ASD and DDSD continue to work closely with AHS Medicaid Policy team to plan and implement one part of the federal HCBS rules following new guidance from the Centers for Medicare and Medicaid Services (CMS) specific to conflict-free case management. This work is expected to span five years and include collaboration with a wide variety of stakeholders creating a case management system that is separate and distinct from the delivery of direct services.

#### Vermont Action Plan for Aging Well

Act 156, the Older Vermonters Act, outlines core principles to guide the State's efforts to ensure that all Vermonters can age well. The Act also requires that the Secretary of Administration, in collaboration with the Commissioners of Disabilities, Aging, and Independent Living and of Health, propose a process for developing a Vermont Action Plan for Aging Well to be implemented across State government, local government, the private sector, and philanthropies. In April 2021, DAIL submitted a report to the Legislature describing the process that will be used to create the action plan, which will "provide strategies and cultivate partnerships for implementation across sectors to promote aging with health, choice, and dignity in order to establish and maintain an age-friendly State for all Vermonters." For more information about the plan, read the [legislative report online](#).

#### DAIL Diversity, Equity, and Inclusion Task Force

The DAIL Diversity, Equity, and Inclusion Task Force (DEITF) formed in October 2020 in service of Agency of Human Services' (AHS) commitment to equity and inclusion. The group, composed of staff representing each of the divisions of DAIL and the Commissioner's office, was tasked with providing recommendations to Departmental leadership for advancing equity across DAIL's internal and external policies, procedures, and programming. In 2021, the DEITF conducted a focused environmental scan of DAIL's internal operational efforts and workforce characteristics; this review revealed areas of strength and opportunity. In September 2021, the group brought forth a set of recommendations based upon evidence-based research and national best-practices regarding the recruitment and hiring of employees and equity-focused employee training and education. These recommendations have been taken up for review and implementation by DAIL's Operations unit. The DEITF expects to present a second phase of evidence-informed recommendations focused on the retention of employees and DAIL's organizational and workplace culture in early 2022.

In addition to the work of DAIL's internal DEITF, DAIL is actively engaged in equity-focused work across AHS and the State of Vermont. Our work in these efforts includes representation on the Health Equity Advisory Commission (HEAC), established by VT Act 33 of 2021 (18 V.S.A. §252).

### DAIL Workforce

DAIL has prioritized three important workforce needs within the Department that are reflected in the SFY23 budget presentation.

- Adult Protective Services - Despite increasing numbers of APS cases over the last decade, the number of APS Investigators has remained level-funded. Vermont APS Investigators on average require 15-25 hours to conduct a full investigation, with a goal of completing two (2) investigations per week. In SFY19, APS Investigators on average closed four (4) investigations per week. In SFY20, this number climbed to thirteen (13) average cases closed per week, which amounts to three (3) hours per investigation to meet statutory requirements to close investigations in a timely manner. Vermont APS is currently funded for ten (10) full-time investigators. The current number of annual investigations in Vermont is approximately 900. APS would need to maintain 12 investigators to dedicate the appropriate 15-25 hours needed for each completed investigation. This baseline of 12 full-time investigators should be considered a starting point in meeting statutory requirements to protect vulnerable adults in Vermont. DAIL is requesting two (2) positions in SFY23 to meet this critical need.
- State Long-Term Care Facility Oversight – Long-Term Care facilities are facing increasing challenges that DAIL’s Survey & Certification (S&C) unit must account for in its survey efforts, including greater levels of care for residents with increasing needs. Vermont currently has approximately 160 state licensed residential care homes, assisted living residences, and therapeutic care residences caring for many of the most vulnerable Vermonters. The nature and volume of the facilities’ work has grown in complexity over the past ten years, requiring additional support and oversight to maintain safe care and good quality of life for Vermonters residing in those facilities. Currently, S&C only has the capacity to survey state licensed facilities every two years. DAIL is requesting six (6) additional positions which will allow the Department to increase oversight with annual surveys for all state licensed facilities and provide additional quality support oversight for Enhanced Residential Care services.
- Office of Public Guardian - OPG currently consists of 28 staff serving well over 700 people. National standards for best practice indicate that public guardians should have caseloads of no more than 20 clients per guardian. Vermont’s current caseload is approximately 30 clients per guardian. Since 2006, the number of people appointed by the courts into OPG guardianship has increased by 8%, and the number of people assigned to OPG as Representative Payee has increased by 23% and yet, the DAIL public guardian and representative payee staff assigned to the work has declined by 11% during that period. To address this increasing caseload gap, DAIL is requesting two positions in SFY23.

### **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. Vermont Medicaid, the federal Older Americans Act and State General Funds are the primary sources of funds for these services.

### **Staff and Partners**

ASD operates with 35 employees located within the Central Office in Waterbury and regionally within district offices. Services are managed within four units: Long-Term Services & Supports Unit, Quality Management Unit, the State Unit on Aging, and the Money Follows the Person Project.

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

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

### **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.
- Brain Injury Program.



Older Americans Act (OAA) Services include:

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

Other initiatives, programs and services supported by ASD include:

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

Special projects include:

- Falls Prevention Coalition.
- Federal HCBS Regulations Assessment & Implementation Project.
- Governor's Commission on Alzheimer's Disease and Related Disorders.
- Reframing Aging in Vermont.
- Suicide Prevention among older Vermonters.
- Implementation of Act 156, the Older Vermonters Act.
- High Tech Nursing payment reform.
- Per member/per month nursing facility rate project.
- Electronic Visit Verification (EVV) Implementation.

### Recent Developments and Accomplishments

As the pandemic continued throughout 2021, ASD provided robust support to our network of providers.

- We administered \$12.5 million in new federal funds for services such as Adult Day, Meals on Wheels, Information & Assistance, Case Management, vaccine promotion, and innovative initiatives to combat social isolation.
- We continued flexibilities in Choices for Care, Moderate Needs, Attendant Services, and

the Brain Injury Program to allow for assessments and services to be delivered remotely as needed, for more funds to be used for assistive devices and home modifications, for additional categories of caregivers to be paid, and for care plans to be modified and funding shifted to different services and providers. We continued to provide policy guidance and technical assistance to providers across our network.

- We conducted a survey of Choices for Care and Brain Injury Program participants to understand their experiences during the early months of the COVID-19 emergency and analyzed results to address future service delivery planning.
- We supported the vaccination and booster rollout in a variety of ways, including staff volunteering time, providing vaccination information to participants, employers and employees in our self-directed services, administering funding to partners for vaccine promotion (see [Vaccine4Vermont](#)) and promoting in the media.

Additional ASD developments and accomplishments in SFY 2021 include:

- Following the passage of the [Older Vermonters Act](#) in 2020, we collaborated with the Agency of Administration and Vermont Department of Health to submit a [Process Proposal for the Development of a Vermont Action Plan for Aging Well](#) in May 2021 and launched an [Advisory Committee](#) in October 2021 to guide the planning process.
- We worked closely with colleagues across DAIL and AHS to develop a high-level plan for CMS to come into compliance regarding federal [conflict-free case management](#) rules for Choices for Care and the Brain Injury Program.
- We conducted Adult Family Care Homes Quality Reviews for each of our Authorized Agencies to ensure participants have successful transitions and live in safe residences that meet their needs.
- We secured an additional \$5 million in [Money Follows the Person](#) funding through a supplemental capacity building grant, from which we will be launching several innovative pilots to address unmet needs.
- We continued work on a Moderate Needs Program pilot to establish a standard methodology for an acuity-based waitlist to ensure those at highest risk are served first.
- We completed the third and final year of the TBI State Partnership Grant, having strengthened awareness and partnerships for supporting individuals with brain injury.
- We supported DVHA in the work to develop a proposed rate methodology for Assistive Community Care Services (ACCS) and Enhanced Residential Care (ERC), and this work continues.
- We worked closely with DVHA, VDH and stakeholders on High Tech Nursing payment reform.

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## Adult Services Division

- We continued to work with AHS and ARIS on the implementation of [Electronic Visit Verification](#) (EVV) for Medicaid funded in-home services and secured a new position on our Quality Unit to lead this work going forward.

### Future Directions

In 2022 ASD plans to:

- Develop the new State Plan on Aging for FFY 2023-2026, an expanded plan that will include goals, objectives and strategies related to Older Americans Act services as well as an evaluation of Choices for Care and the long-term care needs of Vermonters across settings.
- Conduct a Needs Assessment to inform the development of the Vermont Action Plan for Aging Well in collaboration with VDH, the Advisory Committee and community partners.
- In collaboration with AHS and community partners, implement strategies outlined in [Vermont's Enhanced FMAP Spending Plan](#) to strengthen the HCBS system, including efforts to improve workforce recruitment, retention and training, improve infrastructure, make capital improvements, expand services and focus on quality care.
- Work in collaboration with AHS, departments, contractors, and stakeholders to plan how Vermont will meet HCBS conflict-of-interest requirements and identify pathways forward for our programs.
- Strengthen quality oversight across all ASD programs and services through more structured and regular desk reviews and field surveys.
- Continue to work to implement EVV with a focus on increased adoption and compliance of employers and employees paid through ARIS.
- Implement innovative pilots through the Money Follows the Person supplemental grant, including enhanced psycho-social support, expanded use of volunteers, workforce mentoring, new promotion of Assistive Technology, expanded funds for home modifications, and launch of CAPABLE, an evidence-based falls prevention program.
- In collaboration with the Area Agencies on Aging, offer new services to older Vermonters and family caregivers to focus on health and engagement, including expansion of therapeutic meals to promote good nutrition for those with chronic conditions, piloting [Get Set Up](#), online learning opportunities for older adults, and launching [TCARE](#), an evidence-based family caregiver assessment tool.

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

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

Supporting data for ASD services is located in the [DAIL Scorecard](#). Highlights include:

1. [Choices for Care](#): As of June 2021, 5,865 people were enrolled in all settings which is almost equal to last year. Of the total enrolled, 18% were in the Moderate Needs Group

and 82% were in the High/Highest Needs Groups. Of the total enrolled in the High/Highest Needs Groups, 44% were in a home-based setting, 12% were in an Enhanced Residential Care home, and 45% were in a nursing facility. This represents the following changes from last fiscal year:

- a) Moderate Needs enrollments decreased by 8%.
- b) Home-based (High/Highest) enrollments decreased by 2%.
- c) Enhanced Residential Care enrollments remained steady.
- d) Nursing Facility enrollments increased by 10%.

Vermont has participated in the National Core Indicators (NCI) Adult In-Person Survey over the years. DAIL's participation in the 2019/20 survey was cut short due to COVID-19, and there was no regular 2020/21 survey for the same reason. DAIL then made the difficult decision to not participate in 2021/22 because of the providers' workforce crisis, limited internal resources needed to manage the project, and ongoing pandemic-related concerns. Therefore, because the most current survey results are from 2018/19, the findings have not been republished here.

2. Adult Day Programs served a total of 241 people in SFY21 with Medicaid funded services (High/Highest Groups, Moderate Needs Group, and Adult Day Health Rehabilitation), a 52% decrease from the previous year. Note: Due to the COVID-19 restrictions Adult Days in Vermont were closed for in-person services for three quarters of the fiscal year (July 2020-March 2021).
3. Older Americans Act Home Delivered Meals
  - a. 7,725 people were served in FFY20 (33% increase from previous year).
  - b. 905,526 meals were served in FFY20 (16% increase from previous year).
  - c. 96% of consumers reported they had enough to eat (% unchanged from previous year).
  - d. 79% of consumers reported that meals helped manage or improve their medical condition (4.5% decrease from previous year).

### 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 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, Rutland, and Springfield. Each office has a Blind Services Rehabilitation Counselor and a Rehabilitation Associate who deliver individualized services. One Blind Services Technology Trainer covers the entire state teaching people how to use assistive technology. The Director of DBVI oversees the statewide program.

DBVI partners with several organizations to accomplish 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](http://www.dbvi.vermont.gov)

### Recent Developments and Accomplishments

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

This year included a new type of event in Burlington. The theme was "you're your own path" and it included a White Cane Awareness walk which led to a newly created sidewalk mural. Each line of the mural traces the actual strokes of the cane that a person uses while traveling

to check the path for objects. There was very good media coverage which can be found at the following link: <https://www.youtube.com/watch?v=MPFxaYyZTDc>

The Vermont Association for the Blind and Visually Impaired received a second round of \$100,000 of CRF funding to reduce social isolation of older Vermonters using smart phone technology with accessibility features. Ninety percent of all clients who completed services from July 1, 2021, to September 30, 2021, reported feeling less socially isolated and better off for having received SMART Services. Of those who did not report a change in their feelings of social isolation, the causes were due to extenuating circumstances not related to their vision or receipt of the training. Clients who received benefit were able to accomplish at least one or more tasks, such as video conferencing with their doctor, video/teleconferencing with the PALS Groups, communicating with family and friends through various modes of technology, having groceries delivered, and more.

The importance and impact of the SMART program might be best understood by one of the success stories. A client in Southern Vermont has been a life-long poet and creative writer. Throughout her life she had enjoyed being a member of writers' groups, attending poetry reads and writer's coffee hours. Around the time that COVID-19 hit she was in the process of losing much of her sight. She found it very difficult to read her handwriting and was not able to attend the public reads due to lock downs. These groups migrated to the virtual platforms. Our teachers worked with her to help her begin to type her poetry and connect with video teleconferencing systems online. She was grateful to feel connected to her peers, but still struggled to read her poetry independently during the reading sessions. Then she was shown how she could use Voiceover on her iPhone to read her poetry out loud. She now joins the groups and turns on her phone's ability to read her poetry aloud and the digital voice is part of her new form of art. She is independent, connected and creative! There are many more success stories like this.

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

DBVI has a commitment to ongoing training of staff to deliver services well. This year one staff member completed a certificate program at Mississippi State to gain a specialized credential for vocational counseling in the blindness specialty. Another staff member completed her master's degree to be promoted to a Blind Services Rehabilitation Counselor.

#### **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 help our customers achieve their



employment and independence goals. One recent new technology is a new electronic Braille display keyboard, called the Mantis, that is sold by the American Printing House for the Blind. This electronic Braille display can be paired with an iPhone, Mac Computer, or Windows computer. This allows users to get Braille output while using a variety of devices. It also has a built-in word processor, calculator, and a library for reading Braille books and documents. This device makes it possible for extra productivity and efficiency in the workplace.

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

#### **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; and
- Provide technology and training that allow people to access printed materials and complete work tasks.

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

[www.dbvi.vermont.gov](http://www.dbvi.vermont.gov).

##### **Services for High School Students**

DBVI's transition services provide high school students with opportunities for learning job readiness, self-advocacy, and independent living skills. DBVI collaborates with several partners including 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.

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 contract agreement with the Vermont Association for the Blind and Visually Impaired (VABVI). VABVI also administers the Older Blind Program to provide specialized vision rehabilitation services.

### **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 find employment, participate in their communities, and eliminate other barriers caused by vision loss.

### **Results (how much, how well, better off)**

#### **Performance Measures**

##### **How many we served (SFY2021):**

- 246 individuals received services to assist them to maintain or find employment because of their vision loss. 244 received services in FFY 2020.

Individuals previously served in the DBVI Homemaker Program are now being served in the DBVI IL and Older Blind program.

- 625 individuals over the age of 55 received specialized vision rehabilitation services.
- 94 individuals under the age of 55 were served by the Independent Living Program.
- 4 individuals served in the Business Enterprise Program.
- Total for SFY 2021= 969 (Includes DBVI VR; DBVI Independent Living; and Older Blind programs).

##### **How well we served them:**

Customer Satisfaction: The most recent results of the 3-year statewide random survey of all participants in the DBVI Vocational Vision Rehabilitation program (Conducted by Market Decisions in December 2021-preliminary results:

- 93% of respondents said they are satisfied with the DBVI vocational rehabilitation program.



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### Division for the Blind and Visually Impaired

- 93% of respondents said overall, they are better off as a result of the services they received from DBVI.
- 98% of respondents said that DBVI staff treated them with dignity and respect.
- 97% of respondents said that DBVI helped them achieve their vocational rehabilitation goals.
- 81% of respondents said that DBVI services met their expectations.
- 91% of respondents said that DBVI vocational rehabilitation services helped them become more independent.
- 94% 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 meet 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 people are better off:**

- 29 blind or visually impaired individuals closed their DBVI case in SFY 2021 with successful employment.
- 69% had a wage above 125% of the minimum wage.

Vermont’s DVR and DBVI programs also received data for the first time on all five WIOA Common Performance Measures and how we compared to national averages. This data shows that:

- Vermont VR consumers are achieving all outcomes at a higher rate than the national average on all five performance measures.
- The employment rate two quarters post exit improved continues to improve, moving from 49% in SFY 2019 to 51.1% in SFY 2020 to 53.5% in SFY 2021.
- The median earnings two quarters post exit increased jumped from being below the national average in SFY 2020 to being above it in SFY 2021, with an increase from \$3,901 in SFY 2020 to \$4,630 in SFY 2021.

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## Division for the Blind and Visually Impaired

MEASURE	NATIONAL AVERAGE SFY 19	VERMONT RESULTS SFY 19	NATIONAL AVERAGE SFY 20	VERMONT RESULTS SFY 20	NATIONAL AVERAGE SFY 21	VERMONT RESULTS SFY 21
MEASURABLE SKILLS GAINS	23.4%	54.9%	31.4%	49.3%	43.3%	49.0%
EMPLOYMENT RATE 2 QUARTERS POST EXIT	50.4%	49.0%	51.3%	51.1%	48.6%	53.3%
EMPLOYMENT RATE 4 QUARTERS POST EXIT	NA	NA	43.6%	46.7%	44.0%	48.3%
MEDIAN EARNINGS 2 QUARTERS POST EXIT	\$3,875	\$3,516	\$4,005	\$3,901	\$4,280	\$4,630
CREDENTIAL ATTAINMENT	NA	NA	NA	NA	23.2%	42.5%

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.

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

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

DBVI has been successful in expanding Pre-ETS services for students who are blind or visually impaired by providing work-experiences, internships, and job readiness training to build skills necessary for career development. Learn, Earn, and Prosper (LEAP) is a program developed by DBVI to achieve these goals. Students participate in a slate of different options year-round to learn job readiness and self-advocacy skills, and to engage in work-based learning experiences. The COVID-19 Pandemic offered LEAP a unique opportunity to rethink how we deliver

programming. Following guidance from the CDC and Vermont Department of Health, LEAP was excited to provide both virtual and in person to students year-round.

The pandemic pushed us to be more creative and more innovative. We are proud to say that we now offer programs both in person and virtual that allow for more flexibility to students and families. Before the pandemic, LEAP was primarily a summer residential program. Now we offer programming nearly every season, either in person or virtual.

All programs focused on work-based learning experiences, job readiness skills and self-advocacy skill training including but not limited to effective communication, independence, mobility, and time management.

With COVID regulations and precautions continuing through 2021, LEAP developed several unique virtual Work Based Learning programs throughout the year. And with increasing vaccination rates, LEAP organized in person day-time work experiences during the year at Business Enterprise Program (BEP) cafes, and summer work experiences in Burlington, Barre, and Norwich, Vermont.

For the first time in 2021, LEAP offered in person work experiences to students in their communities. A student in Norwich was placed at King Arthur Flour in a work experience in their bakery.

*SkillShops* was designed in 2021 for students who may not have been ready or willing to commit to a work experience but wanted access to daily training in soft employment skills, orientation and mobility, independent living, career development, and more.

LEAP included STEM opportunities in its programming, including a solar panel tracking summer curriculum, and a Coding Work Based Learning Program.

The Virtual Work-based Learning opportunities included:

1. Social Media Internship partnering with Vermont Center for Independent Living and Vermont Community Garden Network. Students developed strategies to improve their social media presence. Interns created a structured proposal to plan out posting schedules, content, and branding under the supervision of Sophia Rabe of *Olive and Milo Company*.
2. Coding Internship with Dr. Stephanie Ludi, Department of Computer Science and Engineering, *University of North Texas*.
3. Reporting with Becky Holt from *Vermont Story Lab*.
4. Storytelling with Sue Schmidt from *The Vermont Moth*; The participants produced either a recorded story, or a social media post about their interviewee for ReSOURCE.

5. Education and Facilitation Internship in which students coordinated and planned our weekly Friday Retreats.
6. Grant Writing supervised by Bethany Johnson, Director of HR with ReSOURCE. Students were trained in grant writing and applied for two grants for ReSOURCE and the LEAP Program.

#### **Total Training Hours, LEAP 2021**

Virtual Work Based Learning Programs: 1,477 hours.

In Person Work Based Learning Programs: 452 hours.

Friday Retreats: 86 hours.

Orientation and Mobility with a COMS: 57 hours.

Independent Living Skills with a CVRT: 45 hours.

Social, Leadership and Self Advocacy: 87 hours.

In 2021, our training hours in Virtual and In Person Work Based Learning Programs went up by 916 hours. This was due to a significant focus on placing students in hands on work-based learning experiences with community employers.

Our weekly virtual workshop (Friday Retreats, O&M, Independent Living Skills, Self-Advocacy, etc.) numbers went down as students were back in school in 2021 and had more in person after school activities. We scaled back our weekly workshops offerings as COVID restrictions were lifted and offered more in person opportunities.

DBVI has successfully expanded and maintained 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 27% of people served in SFY 2020 and remains substantial at 25% in SFY 2021.

In the ever-growing virtual world, LEAP had the opportunity to connect with people across the country. Students experienced meeting and engaging with professionals who are blind or visually impaired and succeeding in their careers.

- Molly Burke, professional blind YouTuber, and Advocate.
- Zhenya Pankova, Career Specialist.
- Sam Seavey, YouTube professional providing education about assistive technology for low vision users.
- David Tobin, developer of the AudioJack App.
- Marc Saffman, advocate for deaf-blind initiatives.
- Bryan Manning, a founder of the small business Two Blind Brothers.
- BEP cafe operators and blind business owners.
- Staci Mannella, paralympic skier.

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### Division for the Blind and Visually Impaired

- Dr. Stephanie Ludi, University of North Texas, Associate Chair for Undergraduate Studies, Co-Director of Research in Software Engineering Lab Dept. of Computer Science & Engineering.
- Belan Antensaye, Community Development Specialist, Burlington Community and Economic Development Office.
- Professor James Hauri and Professor Smriti Rao; Professors of Environmental Science and Economics at Assumption University.
- Pam Schirner, Business Enterprise Program director.
- Becky Holt, professional journalist, and owner of Vermont Story Lab.
- Katrina Alden, founder, and director of Rebels of the Moon empowerment coaching.
- Shelby Glass - Certified Orientation and Mobility Specialist.
- Dan Norris - Certified Vocational Rehabilitation Therapist.
- Frank Gibney, Gibney Family Foundation.
- Sue Schmidt, professional storyteller, and owner of The Vermont Moth.

In 2022, we will continue to offer in person community day programming, virtual programming, and a return to residential programming. These options will provide students more opportunities to engage in work-based learning experiences that meet their needs.

LEAP is no longer a summer residential program. It is a flexible, creative, and forward-thinking program that offers students and families flexibility year-round to learn self-advocacy, job readiness skills and hands on work-based learning opportunities.

We are proud to serve our students and look forward to 2022.

#### Quotes from 2021 LEAP Students

“I felt like I accomplished something that I haven't done before. I was able to put the timesheet in, interview a few people, learned how to ask questions more specifically, learned to manage my time so I could do a lot of things and work from home.” - LEAP summer 2021 Reporting Intern

“LEAP pushed me to be more open and brave about speaking out and interacting with other people.” - LEAP summer 2021 Coding Program Intern

“Seeing the results of my work was magical. Watching the engagement go up on LEAP's Instagram and seeing my webpage come to life made me feel like I was working towards something great and was learning along the way.” - LEAP summer 2021 Social Media Intern

“I loved every aspect of the program. I felt it was engaging. Because it was such a fun and interactive experience, it made all of the learning and research fun too. I appreciated the fact

## SFY2023 Budget Testimony

### Division for the Blind and Visually Impaired

that the team meetings provided us with the opportunity to socialize and get to know one another, in addition to learning and growing with one another... I felt a sense of pride and accomplishment when sharing and teaching others.” - LEAP fall 2020 Interview Project Intern

“I think my greatest accomplishment for the LEAP program was how to advocate more for myself. I have a hard time speaking for myself and speaking up. During this program I was able to share emails, speak up some more during classes and meetings, I also got the experience to lead a team meeting which helped me more.” - LEAP fall 2020 Interview Project Intern

“I want to thank all of you for a wonderful time here in the LEAP program with such wonderful friends and staff. The LEAP program is filled with the greatest happiest atmosphere. I really feel like I have come away from this summer program and this past fall program with new friends.” - LEAP summer 2021 SkillShops Participant

DBVI staff work towards continuous improvement by listening to the voice of customers and using that information and data to improve performance. An updated DBVI State Plan with new goals and strategies was completed and approved by the State Rehabilitation Council in February 2020 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](http://www.dbvi.vermont.gov) to see examples of people reaching their goals.

#### 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. With support as needed, everyone can make decisions for themselves, can live in typical homes, and can contribute as citizens to the communities wherethey 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 provide court-ordered public guardianship to adults with developmental disabilities and older Vermonters aged 60 and over on behalf of the Commissioner.

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

#### Staff and Partners

Our work is carried out by sixteen program staff including the Quality Management Unit, Services Specialists, administrators, and support staff, and twenty-eight (28) staff working within the Office of Public Guardianship, 24 of whom are full-time public guardians.

The Agency of Human Services contracts with fifteen private, non-profit developmental disabilities services agencies to provide or arrange for services to over 4,649 people with developmental disabilities and their families through Master Grant Agreements. In addition, a Supportive Intermediary Service Organization (ISO) assists individuals and families to manage their services and a Fiscal/Employer Agent provides the infrastructure and guidance to enable employers to meet their fiscal and reporting responsibilities. We emphasize the development of community capacities to meet the needs of all individuals, regardless of the severity of their disabilities.

DDSD works with a variety of people and organizations to ensure that 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.



#### Recent Developments and Accomplishments

##### **New Payment Model**

The Developmental Disabilities Services Division (DDSD) and the Department of Vermont Health Access (DVHA) have continued to work on a new payment model for Developmental Disabilities Home and Community-Based Services (HCBS). The goal of this payment reform project is to create a transparent, equitable and effective payment model for Developmental Disabilities Services that is manageable, supports our philosophy, and aligns with the broader payment reform and health care reform goals of AHS. The State has engaged stakeholders including people who receive services, families, advocacy organizations, and providers to participate in workgroups for the development and implementation of the new payment model. There is an advisory committee and workgroups focused on a new needs assessment tool and process; improvements to agencies ability to fully report on services delivered to individuals (encounter data); and the design of the future payment model.

Work on the project was paused until August 2020 to refocus on the response to the pandemic. At that point, work resumed in two areas: the needs assessment and encounter data. DAIL posted a Request for Proposal (RFP) for a standardized assessment tool and independent assessors in the fall of 2020 and initiated the contract with Public Consulting Group (PCG) in March of 2021. PCG is responsible for conducting individual assessments of need using the Supports Intensity Scale, a standardized assessment tool. March to early July was the initial planning phase which also included the training of the assessors. The next phase, for SFY2022, is conducting 500 assessments. The information from those assessments will be used as part of the future payment model design. The assessments will not be used at this time for determining individual budgets. There have been some challenges with the initial implementation of the new assessment process, however, DAIL has continued to solicit feedback from stakeholders and is working on addressing these issues.

In SFY2021, agencies began reporting encounter claims in the Medicaid Management Information System (MMIS) and are expected to be fully reporting on all services delivered starting SFY2022. The purpose of reporting of encounter claims in the MMIS is increased transparency and accountability of service delivery. The data is also a building block for the design of the future payment model. Agencies

Ongoing work will be required for designing the payment methodology, informed by assessment data, encounter data, and stakeholder input.



#### **Home and Community-Based Services (HCBS) Rule Implementation**

DDSD continues to work on implementing the HCBS rules to ensure compliance with all requirements by 2023. 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.

DDSD completed site visits to validate survey information submitted by providers in September 2019 regarding compliance with federal rules for HCBS settings. Most providers are in compliance with the setting requirements with minor changes being required. It is anticipated that all providers will be able to comply with the setting requirements and none will need to transition recipients to other settings. This information was included in the Vermont's State Transition Plan in February 2020. In addition, DDSD has incorporated oversight of HCBS rule requirements into their overall quality review process and continues to provide policy guidance, to ensure ongoing compliance with the rules. With the completion of the site visits and information incorporated in the Vermont State Transition Plan, the DDSD Quality Management Team verified the status of each provider agency and the noncompliant areas with any progress made toward bringing the agency into compliance. Any new areas identified requiring a plan of correction to address the areas of non-compliance by the 2023 deadline are documented in the agency's Quality Services Report.

The HCBS rules also require that case management be provided by an organization that is separate from the organization that provides the rest of a person's direct services to address conflict of interest. In January of 2020, DAILE presented CMS information about a "choice model" as the means of addressing conflict of interest in HCBS case management. The choice model would have allowed HCBS participants to choose between maintaining their case management with agency that provides their direct service or having case management provided by an independent agency. The option of having a choice model was based on the broad stakeholder feedback received in 2019 in which some people wanted independent case management and others wished to maintain case management at their provider agency. Work on conflict of interest was suspended in the 4<sup>th</sup> quarter of FY20 due to the state of emergency and required pandemic response. In 2021, meetings with CMS resumed to discuss whether Vermont could pursue the choice model in the renewal of the Global Commitment to Health Waiver. In October 2021, CMS informed that state that they would not approve the choice model and requested that a plan be submitted to CMS regarding how Vermont would come into full compliance with Conflict-of-Interest Rules over up to the next five years. That plan is currently being developed. Case management will need to be separated from the current providers of direct service. This is a significant shift in the system and interested stakeholders will be invited to participate in designing and implementing independent case management.

#### **Response to COVID-19**

Fiscal year 2021 continued to be dominated by responses to the coronavirus pandemic both at the state and provider level. Primary goals were protecting the health and safety of service recipients, staff, and those around them; financially sustaining the provider network and providing essential services to recipients. Actions taken included:

- Suspension of non-essential face to face services to reduce the risk of infection. Non-essential services, such as community supports, were considered to be those not essential to protect the health and safety of service recipients.
- Changes to service delivery requirements supporting health and safety, including but not limited to; personal protective equipment requirements, new allowances for telehealth services, transportation guidelines, home-visiting requirements, signature requirements, and redeployment of support staff.
- Temporary changes to the DDSD HCBS daily rate payment model to a monthly case rate to improve predictability and sustainability of payment to providers during the pandemic. Setting a minimum threshold of service delivery to earn payments.
- Regular calls with providers to troubleshoot issues and offer support. Stakeholder calls and town-halls to share and solicit information and feedback regarding pandemic related impacts.
- Difficulty of Care stipends for unpaid family caregivers who were providing care in lieu of typically available support services.
- Difficulty of Care stipends for shared living providers who were providing additional care in lieu of typically available support services.

COVID-19 vaccinations became available in early 2021, beginning with availability to health care workers, older citizens, and those with compromised health. By the end of the FY, vaccines were widely available to all, except children. The Governor lifted the state of emergency in June 2021. There had been a significant reduction in the rate of infection during the mid-summer, only to see a significant increase with the arrival of the Delta variant.

The many months of the pandemic have resulted in a workforce shortage. The workforce shortage is impacting all sectors of business but is hitting HCBS service providers particularly hard. Providers are reporting vacancy rates of direct support workers in the range of 30-60%. They are also losing service coordinators. Providers are needing to prioritize who receives services and remaining staff are working overtime to provide essential services to maintain health and safety.

#### Future Directions

**Workforce:** The Division convened a stakeholder group that included representatives from service providers, consumer and family advocacy organizations, Vocational Rehabilitation, and others to explore creative and multifaceted solutions to chronic provider workforce issues. The group identified a variety of short-term and long-term solutions to the ongoing challenge of recruiting and retaining direct support workers. COVID-19 brought the work of the group to a halt. However, the pandemic further aggravated and highlighted issues regarding hiring and retaining direct support workers. The Division will continue to work with providers and others to explore solutions to this increasingly challenging issue. In the short-term, additional funding sources are being sought to be able to increase staff wages to allow for more competitive recruitment and retention.

#### Office of Public Guardian (OPG) Caseload

OPG currently consists of 28 staff serving well over 700 people. National standards for best practice indicate that public guardians should have caseloads of no more than 20 clients per guardian. Vermont's current caseload is approximately 30 clients per guardian. Since 2006, the number of people appointed by the courts into OPG guardianship has increase by 8%, the number of people assigned to OPG as Representative Payee has increased by 23% and yet, the DAIL public guardian and representative payee staff assigned to the work has declined by 11%. Addressing caseload in OPG is a top priority for the Department this year.

**Payment Reform & Home and Community Based Services Rules:** DDSD will continue work on payment reform and compliance with the HCBS rules, as described above. In combination, these two complex initiatives represent changes to the current DDSD system of care that are likely to be quite broad in scope and impact. Understandably, changes of this magnitude create anxiety about the impact on the DDSD system. DAIL will need to continue to work closely with stakeholders to achieve change while preserving our commitment to our philosophy and improving individual outcomes, while meeting the federal requirements and needed improvements.

**Promotion of Residential Initiatives:** DDSD is partnering with designated agencies and community members in supporting the development of new housing options for adults with developmental disabilities. Several DDS agencies are exploring small scale transitional living models for young adults coming out of high school. There is a need for the development and expansion of supported apartment settings where services are individualized and teach skills needed for independent living, enhance community participation and support employment for adults whowish to live in their own homes. Collaborative efforts with local schools, DD service agencies, housing developers and families, help lay the groundwork for adults with developmental disabilities to make meaningful choices about which communities and settings they which to live in while accessing needed and familiar supports.

**Community of Practice on Cultural and Linguistic Competence:** Vermont completed another year of participation in a national multi-year initiative building a Community of Practice (CoP) on Cultural and Linguistic Competence in Developmental Disabilities. Georgetown University received approval to extend the project for another year. The project aims to advance and sustain cultural and linguistic competence in developmental disabilities service systems. The state leadership team receives technical assistance from the Georgetown University National Center for Cultural Competence to consider changes to policies, structures, and practices; assess and respond to educational and training needs; and develop initiatives to foster dialogue and information sharing. The CoP is making linkages with other VT organizations working to promote equity in education, healthcare, and workforce development.

The work of the CoP in FY 2021 was curtailed by the COVID 19 pandemic. The Vermont team continued to meet via virtual meetings although some members had less availability. The following are accomplishments and areas of discussion:

- Nearing completion of the work to simplify and adapt an organizational self-assessment tool for use by a wide range of organizations.
- Drafted and sent a letter of support for Vermont House bill 210 promoting the creation of a Health Equity office within state government.
- Updated the CoP's vision statement for launch of Georgetown's CoP project, phase II.
- Made recommendations to DAIL/DDSD for language changes in the Vermont State System of Care Plan for DD Services.
- Discussion of the concept of Learning Communities (modeled on a Michigan initiative) and how we might create these in Vermont.
- Planning for a presentation at the statewide VT Care Partners health equity conference in March 2022.

#### Programs and Services

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

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

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

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

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

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

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

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

##### In SFY21:

- 3281 people were served in Home & Community-Based Services (HCBS).
- 977 people served by Flexible Family Funding.
- 243 people served by Family Managed Response.
- 382 people served in Bridge program.
- 734 people received guardianship services.
- 323 people received representative payee services.

**Quality Service Reviews:** The DDS Quality Service 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 determine the quality of these services provided by the Designated Agencies and Specialized Service Agencies and to ensure that standards are met with respect to DAIL and DDS guidelines and policies.

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

**National Core Indicators (NCI):** Vermont has participated in the National Core Indicators (NCI) Adult In-Person Survey over the years. DAIL's participation in the 2019/20 survey was cut short due to COVID-19, and there was no regular 2020/21 survey for the same reason. DAIL then

made the difficult decision to not participate in 2021/22 because of the providers' workforce crisis, limited internal resources needed to manage the project, and ongoing pandemic-related concerns. Therefore, because the most current survey results are from 2018/19, the findings have not been republished in the FY21 DAIL Annual Report.

**Employment Services:** The employment rate for all working age adults with developmental disabilities who receive HCBS continues to be sustained at a high rate of 45% (FY 20). This compares favorably to the national average of individuals participating in ID/DD employment services. A 2018 Data Brief from National CoreIndicators reported nationally that 20% of adults with IDD receiving services were engaged in paid employment in the community, including both individual and/or group supported jobs. Additionally, the US Bureau of Labor Statistics (2019) reported a 39% employment rate among all working age adults with disabilities.

**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 assist them in achieving their college goals. Participating colleges include the University of Vermont, Castleton University, and Northern Vermont University – Johnson and Lyndon Campuses. For the 2021 academic year, the employment rate for those participating in the Post-Secondary Education Initiative was 77%.



# SFY2023 Budget Testimony

## Division of Licensing and Protection

### Division Philosophy

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

### 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 currently 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 and state regulations and procedures developed by the Centers for Medicare and Medicaid Services (CMS).

APS currently has 20 employees, including 9 home-based investigators who travel throughout the state to investigate allegations of maltreatment of vulnerable adults. APS frequently partners with law enforcement agencies and human service providers in the performance of their investigations.

Like many current employers, DLP has struggled this year to recruit and hire staff. At the time of this writing, DLP is actively trying to fill nine open positions (five in S&C and four in APS), most of which have had to be reposted multiple times. This is a significant vacancy rate for a division of 41 staff.

### Recent Developments and Accomplishments

S&C continues to adapt to the recent changes of Act 125, which in 2018 transferred the review process for Nursing Facility Transfers of Ownership from the Green Mountain Care Board to the Agency of Human Services. S&C has taken on additional and ongoing duties to shoulder this



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### Division of Licensing and Protection

body of work since 2018. Transfers of ownership have occurred with regularity during this interim period.

Residential Care Homes and Assisted Living Facilities are facing increasing challenges that S&C must account for in its survey efforts, including greater levels of care for residents with increasing needs. Vermont currently has 160 licensed skilled nursing facilities, residential care homes, and assisted living residences, totaling over 5,300 licensed beds, caring for many of the most vulnerable Vermonters. The nature and volume of the work has grown in complexity over the past ten years, requiring additional support and oversight.

A new challenge is the shift in ownership of some facilities from family or community ownership to larger, multi-level corporate ownership. These changes add complexity to the licensing and monitoring of these facilities.

Currently, S&C surveys state licensed facilities approximately every two years. Unannounced visits are made more often when complaints warrant onsite investigations.

In 2019, S&C absorbed the work of approving and monitoring nurse aide training programs. The Office of Professional Regulation (OPR) had overseen this work from 2002 until 2019, but as demands on their time grew, they could no longer oversee these programs.

Vermont APS has followed the national trend with reporting decreasing in the final quarter of SFY20 and continuing into SFY21 because of COVID-19. As a result of the decrease, the number of reports in SFY21 decreased by 5% from SFY20. Lower reporting resulted in a 3.6% decrease in investigations initiated as compared to SFY20. Similarly, investigations completed were down 7.4% from SFY20. Lower numbers of reports, fewer initiated and completed investigations, as well as staff vacancies with fewer hours and resources to complete investigations all contributed to a 51% decrease in the number of individuals placed on the Adult Abuse Registry as compared to SFY20.

Though the pandemic has had a concerning effect on recent reporting trends, APS case trends over the last decade have significantly climbed while the number of APS Investigators has remained level funded. Vermont APS Investigators on average require 15-25 hours to conduct a full investigation, with a goal of completing two (2) investigations per week. Due to rising caseloads and limited staff, APS Investigators on average closed four (4) investigations per week in SFY19. In SFY20, this number climbed to thirteen (13) average cases closed per week. This amounts to three (3) hours per investigation to meet statutory requirements to close investigations in a timely manner. Vermont APS is currently funded for ten (10) full-time investigators. The current number of annual investigations in Vermont is approximately 900. Even when fully staffed, APS would need to maintain 12 investigators to dedicate the appropriate 15-25 hours needed for each completed investigation.





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### Division of Licensing and Protection

The DAIL Advisory Board continues the APS Committee to advise the department on matters pertaining to APS. The APS Committee makes recommendations on APS operations to the DAIL Commissioner, the DLP Director, and the APS Director. As part of its advisory role the APS Committee participates in a quarterly file review, here a random sampling of APS screening decisions and investigations are reviewed as part of APS' continuous quality improvement plan.

Adult Protective Services was awarded a one-million-dollar grant in 2020 by the HHS Administration for Community Living (ACL) to provide Restorative Justice case services towards lowering the re-victimization rates of vulnerable adults, as well as lowering the recidivism rates of perpetrators of maltreatment. The Restorative Justice pilot program in APS has demonstrated success, and in 2021, ACL has offered to fund the pilot program for one additional year, awarding a supplement of \$204,750 additional funds to extend the performance period through late 2023 with the option for a no-cost extension beyond that. Additionally, APS received notice from ACL regarding two other awards received earlier in 2021: \$704,000 through Coronavirus Response and Relief Supplemental Appropriations Act (CRRSA) and \$645,000 through the American Rescue Plan Act (ARPA). ACL provided notice that the same award could be anticipated again in late FFY 2022 with a project period ending in late 2024. These additional award amounts are expected to be equal to this year's CRRSA and ARPA awards. These awards fund APS Service Navigators to help better identify vulnerable adults in Vermont and connect them to needed services, the building of a new data library, purchase of remote work equipment, PPE and training opportunities for staff.

#### COVID-19 Response

On March 4, 2020, the Center for Medicare and Medicaid Services suspended routine survey activities nationally due to the Coronavirus pandemic. The Vermont State Survey Agency limited activity to complaints alleging severe harm or death, allegations of abuse or neglect, and infection control concerns. On March 23rd, 2020, CMS issued further guidance to specify that state survey agencies were to concentrate on targeted infection control in certified health and long-term care facilities. The Vermont State Survey Agency (DLP-S&C) resumed recertification surveys in March 2021 and continue to date. S&C concurrently began investigating the complaint intakes that we were unable to conduct during the work stoppage.

S&C continues to adapt to the recent changes of Act 125, which in 2018 transferred the review process for Nursing Facility Transfers of Ownership from the Green Mountain Care Board to the Agency of Human Services. S&C has taken on additional and ongoing duties to shoulder this body of work since 2018. Transfers of ownership have occurred with regularity during this interim period.

APS operations have altered in response to COVID-19. APS implemented a COVID-19 protocol which provided direction on when to conduct in-person interviews, PPE use, and other necessary precautions. Remote contact has been mandated except in cases where in-person contact is required to ensure the safety of the vulnerable adult.

#### Future Directions

Since the APS statute was established, Vermont demographics and service delivery have changed dramatically. When the statute was passed over 40 years ago, 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 by a range of different service providers and family caregivers. APS is also seeing an increasing number of complaints that involve financial exploitation. In partnership with the APS Committee (a subcommittee of the DAIL Advisory Board), multiple review efforts examined whether any changes should be made to the statutory measures to ensure that APS is able to achieve its goal to protect vulnerable adults whose health or welfare is at risk due to abuse, neglect, or exploitation. Throughout SFY21, monthly stakeholder meetings were held to review the APS statute at 33 V.S.A. Chapter 69 and identify potential areas for change. This group of stakeholders plans to make recommendations for change in SFY22 and determine whether these recommendations should be brought to the Vermont Legislative Assembly in the next biennium.

Early in SFY20, S&C began the process of updating the Assisted Living Facility and Residential Care Home regulations. The goal is to include a separate, more stringent section for homes that care for residents with a higher level of care. Input from residents, stakeholders, providers, and the public will be an important step in this process. This project will resume when facilities are able to take on the additional work of learning new regulations. The COVID pandemic and subsequent staffing crisis statewide has precluded rolling the new regulations out at this time.

#### Programs and Services

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

- S&C conducts unannounced, regular surveys at health care facilities, and investigates complaints made about the care received in these facilities. These surveys and investigations can result in fines and other corrective action, including bans on admissions or revocation of operating licenses.
- 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 prior to hiring.

## SFY2023 Budget Testimony

### Division of Licensing and Protection

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

- S&C conducted 201 onsite investigations looking at 417 combined complaints and self-reports across all state and federal provider groups. This represents an increase of 6% from the previous year.
- 49% of Nursing Homes had no deficiencies, isolated deficiency with substantial compliance, or no onsite survey performed during this period.
- 5.7% of Nursing Homes had a deficiency reflecting the potential for minimum harm.
- 34% of Nursing Homes had a deficiency reflecting the potential for more than minimum harm.
- 11.4% of Nursing Homes had a deficiency reflecting actual harm or immediate jeopardy of residents.
- APS received 3461 reports alleging abuse, neglect, or exploitation of vulnerable adults, a decrease of 5% from the previous year.
- APS initiated 616 investigations from these reports, a decrease of 3.6% from the previous year.
- APS completed 637 investigations, a decrease of 7.4% from the previous year.
- APS placed 55 individuals on the Adult Abuse Registry, a decrease of 51% from the previous year.

### 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 employer outreach work.

### Division Overview

DVR 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 assessment, counseling, and guidance. We use our extensive networks in the employer community to create job opportunities, match employer needs with jobseeker skills, and help employers retain staff with disabilities. We invest our financial resources within Vermont communities to support consumers as they transition to stable employment, and employers as they try out new workers.

### Staff and Partners

DVR collaborates with other service providers to reach people with disabilities facing challenges to employment. DVR has created partnerships to serve youth, offenders, veterans, people receiving public benefits, and those who need ongoing support.

### Developments and Accomplishments

**Creating Career Pathways for DVR Consumers:** In 2014 the US Congress reauthorized the Rehabilitation Act via the Workforce Innovation and Opportunity Act (WIOA). WIOA is the first legislative reform of the public workforce system in more than 15 years. WIOA introduced new Common Performance Measures (CPM) that core partners including DVR are evaluated on. The measures are:

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

## SFY2023 Budget Testimony Division of Vocational Rehabilitation

Prior to WIOA, DVR was measured primarily on how many people the program assisted in getting a job. This change from quantitative to qualitative measures required a major paradigm shift in our service delivery system. DVR implemented the Careers Initiative, a series of strategies to align program services with the new Common Performance Measures:

- **Post-Secondary Education and Training:** DVR realigned case service resources to promote engagement in post-secondary education and training, both of which will help consumers achieve credentials in high-demand, high-wage fields.
- **Career Assessment:** DVR is using modern career assessment tools that help consumers see beyond entry-level employment and identify potential career paths.
- **Teaming:** DVR encourages counselors to pull in other team members like an employment consultant, benefits counselor, or assistive technology specialist, to support consumers in achieving their employment goals.
- **Follow-Up:** DVR requires regular follow-up with consumers after placement and post-exit from the program, to promote job retention and career advancement.

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

SFY 2021 Dashboard data indicates DVR's Careers Initiative has had a positive impact on practices, services, and outcomes:

- A 5 percentage-point increase in DVR consumers participating in post-secondary education and training.
- A 28 percentage-point increase in follow-up services for employed participants.
- A 4 percentage-point increase in DVR consumers with higher wage employment plan goals.
- An 8 percentage-point increase in DVR consumers earning over 125% of minimum wage at program exit.

**The Summer Career Exploration Program (SCEP):** In 2021 DVR launched the Summer Career Exploration Program (SCEP). The SCEP was designed to provide high school students with disabilities paid summer work experiences combined with a career exploration curriculum. This is the first time DVR has implemented a summer employment program for students and we had some reservations about launching it statewide in the first year. DVR also started planning SCEP before COVID vaccines were available so we didn't know for sure if we would be able to conduct it in person. Despite these challenges, district DVR teams created amazing opportunities for youth, while engaging employers who were facing their own challenges amid the pandemic. DVR saw a need and committed to creating what became an outstanding experience for all involved. The following is a brief summary of the outcomes:

- SCEP provided 144 students with a paid work experience with a local employer.
- SCEP engaged 110 employers in providing work experiences for students.
- SCEP included all students with disabilities, regardless of the level of support required for them to be successful.
- 34 students were offered competitive employment after completing the SCEP program (23.6% of participants).

DVR has already begun planning a SCEP for 2022. DVR will use lessons learned in the first year to enhance and improve the experience for future participants.

**Kessler Foundation Grant/WorkVT2.0:** DVR was selected by the Kessler Foundation to receive a grant designed to improve employment prospects for DVR consumers who receive Social Security disability benefits (SSI and SSDI). Vermont was one of only 6 projects to be selected out of over 70 applications. The project provides an innovative combination of services and financial incentives to help beneficiaries obtain income enough to end their benefits. The project has two sites, one in Burlington and one in Rutland.

DVR named the project WorkVT2.0 and began recruitment in March 2021 after a one-year delay due to COVID. As of September 30, 2021, over 50 beneficiaries have signed up to receive WorkVT2.0 services. The project is already showing some early successes with four participants working full time and no longer receiving SSI/SSDI benefits. Another sixteen participants have started working part time with the goal of increasing their hours and income over time.

### Future Initiatives

DVR is making a major effort to support consumer participation in post-secondary training leading to industry recognized credentials in high demand fields. This is the most effective and efficient route to consumers achieving high quality and high wage employment. It also aligns with employers' needs for skilled workers. The following are major initiatives we are embarking on in 2022 to support this effort.

## SFY2023 Budget Testimony

### Division of Vocational Rehabilitation

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

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

**The Career Training Offset (CTO):** DVR has long recognized that many of our consumers cannot participate in industry recognized credential training programs because they cannot afford to stop working. As a result, they remain in entry level employment without the training and skills to move up the career ladder. To address this issue, DVR implemented the Career Training Offset (CTO). DVR consumers participating in trainings that leads to an industry recognized credential, are paid minimum wage for classroom and unpaid instruction time. For example, an HVAC (Heating, Ventilation, and Air Conditioning) program has approximately 144 hours of unpaid training time. DVR will pay the consumer minimum wage for these hours, to ensure they have a steady source of income while they get trained. The CTO was launched October 4<sup>th</sup> of 2021 and we expect it to have a significant impact.



## SFY2023 Budget Testimony

### Division of Vocational Rehabilitation

**New Partnerships with Training Providers:** DVR has always referred consumers to workforce training programs and provided financial support. This year DVR is entered into partnerships with of the following training providers to enroll cohorts of DVR consumers in credentialed training programs:

- Resource Inc will provide 72 DVR consumers access to the following training programs:
  - Construction 101 which will lead to NCCER (National Center for Construction Education and Research), and OSHA 10 (Occupational Safety and Health Administration) certifications.
  - HVAC (Heating, Ventilation, Airconditioning) which will lead to Natural Gas/LP EPA Class 1 and OSHA 10 certifications.
  - CLT (Certified Logistics Technician) which will lead to CLT and OSHA 10 certifications.
- Vermont Adult Learning (VAL) will provide DVR consumers training and certifications in weatherization and green energy.

DVR also plans to create new workforce training partnerships with CCV and VT Technical College during 2022 and 2023.

### Programs and Services

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

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

**Creative Workforce Solutions (CWS):** CWS is the employer outreach arm of the DVR program. DVR oversees 12 Business Account Managers (BAMs) who have active relationships with 2,500 employers statewide. The BAMs convene local teams of Agency of Human Service providers who deliver employment services across multiple populations. These CWS teams coordinate local employer outreach across programs to better serve employers.



## SFY2023 Budget Testimony

### Division of Vocational Rehabilitation

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

**Benefits Counseling Program:** DVR benefits counselors provide information and expertise to Social Security disability program beneficiaries about the impact employment will have on their benefits.

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

**Rehabilitation Counselor for the Deaf (RCD):** RCDs provide a wide range of services for Vermonters who are services Vermonters are Deaf, hard of hearing, or late deafened.

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

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

##### Number of People Served:

- A total of 5,606 individuals were served in SFY 2021. 6,610 were served in SFY 2020.
- 4,957 people were served in the core DVR program in SFY 2021. 5,709 were served in SFY 2020.
- 1,189 high school students were served through the Pre-Employment Transition Services program in SFY 2021. 1,583 were served in SFY 2020.

**How Well We Served Them:** The DVR Consumer Experience Survey is conducted every three years to determine consumers' overall satisfaction with the program. The survey is conducted by a third-party research firm, Market Decisions Research (MDR), who has an extensive background working with VR agencies nationwide. Seven hundred consumers were contacted for our 2019 survey. DVR has a contract in place to conduct a survey in late 2021 or early 2022, so we will have results reflecting consumers' experiences during COVID. This will be very valuable in assessing consumers' reactions to remote and hybrid services.

The following are highlights from the 2019 results:

- 81% of consumers reported they were satisfied or very satisfied with DVR.
- 96% said that they would recommend that their friends or family members seek help from DVR.
- 92% of consumers responded that they are satisfied with their experience working with DVR staff and DVR counselors. This is a two percent increase from our 2016 survey.
- 98% felt they were treated by DVR staff with dignity and respect.

## SFY2023 Budget Testimony Division of Vocational Rehabilitation

- 91% of consumers were satisfied with their ability to contact their counselors, compared to 88% in 2016. This is an all-time high and represents the largest improvement in customer experience.

**Employer Satisfaction with DVR Creative Workforce Solutions (CWS):** In 2019 DVR contracted with MDR to develop a survey that would determine employer satisfaction with DVR services. From April 10, 2019, through May 15, 2019, MDR surveyed 200 employers that had contact with a CWS team member(s) within the last 18 months. The survey found that 77% of employers were satisfied with CWS services, and 94% would be open to working with the CWS team in the future. One area of improvement that was identified, is that employers would like to be contacted more frequently.

The survey results provided invaluable information that will help us continue to improve our services to employers, develop more connections, and better serve DVR customers. DVR has contracted with MDR to repeat the survey in 2021/2022. We anticipate that COVID and the recent labor shortages will affect the results.

**Youth and School Staff Satisfaction with DVR:** In 2020 DVR contracted with Market Decisions Research (MDR) to develop two electronic surveys. One was designed to determine the satisfaction of youth with DVR transition services, and the other to evaluate school and partner staff satisfaction.

The youth survey was distributed to 639 consumers; 104 completed the survey. Consumers included in the sample were youth who were currently receiving or had received transition services within the last year. Over 75% of youth respondents stated that they were satisfied with services, and 78% of youth reported that they found working with their transition counselor helpful.

The school and partner surveys were sent to 502 school and partner staff; 189 responded. 96% reported they were familiar with DVR transition services and 93% reported they felt confident they know how and when to refer a student for services.

Both surveys overwhelmingly found high satisfaction with transition services. However, one area for improvement that was identified is to increase the number of counseling staff that serve transition age youth. This would allow youth to have more regular contact with their counselors and for school staff and partners to collaborate more frequently to provide the most comprehensive services.

## SFY2023 Budget Testimony

### Division of Vocational Rehabilitation

**How People are Better Off:** The most apparent measure of successful consumer outcomes is their employment status when they leave the program. In SFY 2021, 444 individuals closed their DVR cases with successful employment. This means they met their individual employment goals and were stably employed for at least 90 days. In addition, 241 of these individuals or 54%, had a wage above 125% of minimum wage.

Vermont's VR programs also received data for the first time on all five WIOA Common Performance Measures. The SFY 2021 results data shows Vermont VR consumers are achieving outcomes at a higher rate than the national average on all five performance measures.

The employment rate two quarters post exit continues to improve, starting at 49% in SFY 2019, increasing to 51.1% in SFY 2020 and increasing again in SFY 2021 to 53.5%. Vermont's median earnings two quarters post exit jumped from \$3,901 in SFY 2020, which was below the national average, to \$4,630 in SFY 2021, both an increase and above the national average.

MEASURE	NATIONAL AVERAGE SFY 19	VERMONT RESULTS SFY 19	NATIONAL AVERAGE SFY 20	VERMONT RESULTS SFY 20	NATIONAL AVERAGE SFY 21	VERMONT RESULTS SFY 21
MEASURABLE SKILLS GAINS	23.4%	54.9%	31.4%	49.3%	43.3%	49.0%
EMPLOYMENT RATE 2 QUARTERS POST EXIT	50.4%	49.0%	51.3%	51.1%	48.6%	53.3%
EMPLOYMENT RATE 4 QUARTERS POST EXIT	NA	NA	43.6%	46.7%	44.0%	48.3%
MEDIAN EARNINGS 2 QUARTERS POST EXIT	\$3,875	\$3,516	\$4,005	\$3,901	\$4,280	\$4,630
CREDENTIAL ATTAINMENT	NA	NA	NA	NA	23.2%	42.5%

# SFY2023 Budget Testimony

## Budget Fact Sheet

- SFY2023 TOTAL DAIL PROPOSED BUDGET - \$585,299,735
  - General Fund – 5.15%.
  - Global Commitment – 87.98%.
  - Federal Fund – 6.17%.
  - Special and Interdepartmental Funds-less than 1%

### SFY2023 DAIL PROPOSED BUDGET BY DIVISION

DIVISION	TOTAL	% of	Fund Split		
			GF	GC	Federal/Other
<b>Developmental Disabilities Services Division</b>	\$272,897,079	46.07%	1.8%	97.2%	1%
(includes DS Waiver)					
<b>Adult Services Division</b>	\$272,101,635	46.90%	3.9%	91.43%	4.67%
(includes AAA, Attendant Services Programs, Day					
<b>Vocational Rehabilitation</b>	\$ 24,428,075	4.25%	21.87%	0.00%	78.13%
<b>Blind and Visually Impaired</b>	\$ 3,037,835	0.52%	33.68%	10.05%	56.27%
<b>Licensing and Protection</b>	\$ 6,537,535	1.13%	48.19%	0%	51.81%
<b>Commissioner's Office</b>	\$ 6,297,576	1.13%	87.13%	0%	12.87%
<b>Totals</b>	<b>\$585,299,735</b>	<b>100%</b>			

# SFY2023 Budget Testimony

## Summary of Changes from SFY2022 Base Budget to SFY2023 Proposed Budget

<b>Total Change SFY2022 to SFY2023 Recommended Budget</b>	<b>\$16,885,087</b>
<b>(All Gross Dollars)</b>	
<b>DAIL Administration &amp; Support Section</b>	
Total SFY2022 Base Appropriation	\$39,860,011
SFY2023 net increase in Administration & Support	\$ 3,047,843
DAIL LTC Oversight Initiative (6 positions)	\$ 671,807
Division of Licensing & Protection – Adult Protection Services (APS- 2 positions)	\$ 189,554
Division of Disabilities, Aging and Independent Living – Office of Public Guardian (OPG 2 positions)	\$ 200,000
<b>SFY2023 Recommend</b>	<b>\$43,969,215</b>
Positions: Current and Proposed positions = 302 (305 employees as 3 positions are shared)	
<b>Adult Services Division Grants - Sec. B.330</b>	
Total SFY2022 Base Appropriation	\$19,352,893
Proposed Changes:	
1) Annualize AFSCME Collective Bargaining Agreement (CBA) min. Wage increase 1/1/22 from \$12.05 to \$12.80	\$ 75,450
2) 3% Rate increase to Providers	\$ 57,000
Total Changes	\$ 132,450
<b>SFY2023 Recommend</b>	<b>\$19,485,343</b>
<b>Blind and Visually Impaired Grants – Sec. B.331</b>	
SFY2022 Base Appropriation	\$1,661,457
No Proposed Changes	
<b>SFY2023 Recommend</b>	<b>\$1,661,457</b>
<b>Brain Injury (TBI) Program - Sec. B.334</b>	
SFY2022 Base Appropriation	\$ 5,564,689
1) Utilization increase (BAA Item)	\$ 150,000
2) 3% Rate increase to providers	\$ 165,090
Total changes	\$ 315,090
<b>SFY2023 Recommend</b>	<b>\$ 5,879,779</b>

# SFY2023 Budget Testimony

## Summary of Changes from SFY2022 Base Budget to SFY2023 Proposed Budget

<b>Choices for Care (CFC)</b>	
This includes estimated expenditures for nursing homes, home and community-based services and other Medicaid acute/primary care costs for Choices for Care participants.	
SFY2022 Base Appropriation	\$230,505,916
1) Statutory Nursing Home inflationary increase (net of reduction due to decrease in Medicaid bed day utilization)	\$ 2,893,750
2) Home and Community Based caseload pressure 132 x \$32,004	\$ 4,224,528
3) AFSCME Collective Bargaining Agreement (CBA) annualization of min. wage increase 1/1/22 from \$12.05 to \$12.80	\$ 781,430
4) 3% Rate increase to providers	\$ 2,659,247
Total Changes	\$ 10,558,955
<b>SFY 23 Recommend</b>	<b>\$241,064,871</b>
<b>Developmental Services Grants Appropriation - Sec. B.333</b>	
SFY2022 Base Appropriation	\$253,129,050
Proposed Changes	
1) DS Caseload – 341 individuals @ 43,051 = \$14,680,391 less Equity Fund (\$7,658,127) = \$7,022,264	\$ 7,022,264
2) DS Public Safety/Act 248 Caseload 13 @ \$68,978=\$896,714	\$ 896,714
3) Budget to Actuals realignment	\$ (4,336,456)
4) Annualize AFSCME Collective Bargaining Agreement (CBA) due to min. wage increase 1/1/22 from \$12.05 to \$12.80	\$ 1,051,929
5) Commercial Policy WC premium increase	\$ 16,274
6) 3% Rate increase to providers	\$ 8,434,927
Total changes	\$ 13,085,652
<b>SFY2023 Recommend</b>	<b>\$266,214,702</b>
<b>Vocational Rehabilitation Division - Sec. B.332</b>	
SFY2022 Base Appropriation	\$7,024,368
No proposed changes	
<b>SFY2023 Recommend</b>	<b>\$7,024,368</b>





# SFY2023 Budget Testimony

## Administrative Appropriations by Division

### DEPARTMENT OF DISABILITIES, AGING, & INDEPENDENT LIVING ADMINISTRATION BUDGET BY DIVISIONS SFY23

	TOTAL	VR	DBVI	DDSD	ASD	L & P	Com office	TOTAL
<b>PERSONAL SERVICES DETAIL</b>								
Classified Salary	21,278,374	8,574,895	716,622	3,438,673	3,109,054	3,861,863	1,577,267	21,278,374
Exempt Salary Total	689,417	-	-	-	-	-	689,417	689,417
Salary Total	21,967,791	8,574,895	716,622	3,438,673	3,109,054	3,861,863	2,266,684	21,967,791
FICA	1,659,667	655,979	54,822	263,058	236,749	295,416	153,643	1,659,667
HEALTH	5,028,836	2,167,874	180,558	748,140	547,198	891,042	494,024	5,028,836
RETIREMENT	5,518,650	2,186,598	182,739	876,862	792,811	984,776	494,864	5,518,650
DENTAL	261,007	108,716	11,241	39,885	32,706	44,543	23,916	261,007
LIFE	108,762	42,961	3,590	17,228	15,576	19,348	10,059	108,762
LTD	5,015	1,726	164	170	309	393	2,253	5,015
EAP	10,107	4,389	396	1,551	1,188	1,683	900	10,107
Fringe Benefits Total	12,592,044	5,168,243	433,510	1,946,894	1,626,537	2,237,201	1,179,659	12,592,044
Unemployment	135,418	11,151	696	66,630	53,467	1,925	1,549	135,418
WC/ Other Ins	257,138	-	-	-	-	-	257,138	257,138
Emp room allowance	15,470	-	-	8,583	6,887	-	-	15,470
Tuition	40,000	36,000	4,000	-	-	-	-	40,000
Overtime	50,000	20,999	2,080	6,965	9,583	5,754	4,618	50,000
Temp Employee	268,310	243,918	0	8,125	6,520	9,747	0	268,310
Contracts	3,385,973	1,501,091	30,483	854,708	685,862	168,686	145,143	3,385,973
Vacancy Savings	(921,817)	(426,787)	(26,245)	(131,581)	(98,519)	(109,452)	(129,233)	(921,817)
Sub-Total Misc Personal Services	3,230,492	1,386,372	11,013	813,430	663,801	76,660	279,215	3,230,492
<b>TOTAL PERSONAL SERVICES</b>	<b>37,790,327</b>	<b>15,129,510</b>	<b>1,161,145</b>	<b>6,198,997</b>	<b>5,399,392</b>	<b>6,175,724</b>	<b>3,725,558</b>	<b>37,790,327</b>
<b>Proposed # of employees by Division</b>	<b>305</b>	<b>133</b>	<b>12</b>	<b>47</b>	<b>36</b>	<b>51</b>	<b>26</b>	<b>305</b>
<b>OPERATING DETAIL</b>								
	TOTAL	VR	DBVI	DDSD	ASD	L & P	Com office	TOTAL
Repair & Maint - Buildings	27,000	15,172	1,458	1,798	1,442	2,000	5,130	27,000
RENTALS	1,624,046	1,366,395	103,845	113,519	-	-	50,287	1,624,046
Rentals - Auto & Other	35,036	12,992	1,414	1,744	1,399	3,667	13,820	35,036
Fee for Space	696,646	172,247	28,102	70,081	105,996	99,930	220,290	696,646
Insurance other than Emp Bene	0	0	0	-	-	0	0	0
Insurance	120,912	0	0	-	-	0	120,912	120,912
Dues	44,000	2,984	2,376	2,929	2,351	25,000	8,360	44,000
Advertising	50,000	27,800	2,700	3,329	2,671	4,000	9,500	50,000
Communications	221,528	88,475	6,963	54,158	30,842	4,000	37,090	221,528
data circuits, Internet	43,000	23,348	2,322	2,863	2,297	4,000	8,170	43,000
ADS App Support GOV Emp Exp	327,006	0	0	-	-	0	327,006	327,006
DII Assessment/SLA Charges	554,440	-	-	-	-	-	554,440	554,440
ADS Allocation Exp	355,721	-	-	-	-	-	355,721	355,721
Printing and Binding	200,000	102,200	10,800	16,089	12,911	20,000	38,000	200,000
Registration for Meetings&Conf	60,000	29,760	3,240	3,994	3,206	8,400	11,400	60,000
Postage	79,641	26,397	5,705	7,033	5,644	14,790	20,072	79,641
Travel - Total	578,127	198,987	15,006	161,008	65,227	117,034	20,866	578,127
Other Purchased Services	89,421	21,491	12,650	12,902	12,638	14,370	15,370	89,421
Evaluations	20,000	9,920	1,080	1,332	1,068	2,800	3,800	20,000
Office Supplies	120,000	58,520	6,480	10,763	8,637	12,800	22,800	120,000
Other General Supplies	16,000	7,936	864	1,065	855	2,240	3,040	16,000
Food	5,000	2,480	270	333	267	700	950	5,000
Educational Supplies	18,000	8,928	972	1,198	962	2,520	3,420	18,000
Subscriptions	14,500	7,192	783	965	775	2,030	2,755	14,500
Data Processing Supplies	8,000	3,968	432	533	427	1,120	1,520	8,000
Electricity	6,500	3,224	351	433	347	910	1,235	6,500
Furniture & Fixtures	33,000	16,368	1,782	2,197	1,763	4,620	6,270	33,000
Other Equipment	20,000	4,920	1,080	1,332	1,068	2,800	8,800	20,000
Information Technology Equip	81,000	33,780	670	6,990	5,610	5,000	28,950	81,000
Inf Tech Purchases-Software	63,000	37,720	3,780	4,660	3,740	6,800	6,300	63,000
Vision Assessment	420,889	-	-	-	-	-	420,889	420,889
HR Services	244,475	-	-	-	-	-	244,475	244,475
Other Operating	2,000	992	108	133	107	280	380	2,000
<b>TOTAL</b>	<b>6,178,888</b>	<b>2,274,197</b>	<b>215,232</b>	<b>483,380</b>	<b>272,250</b>	<b>361,811</b>	<b>2,572,018</b>	<b>6,178,888</b>
<b>TOTAL ADMINISTRATION</b>	<b>43,969,215</b>	<b>17,403,707</b>	<b>1,376,378</b>	<b>6,682,377</b>	<b>5,671,642</b>	<b>6,537,535</b>	<b>6,297,576</b>	<b>43,969,215</b>



# SFY2023 Budget Testimony

## Administrative Appropriations by Division

ADMINISTRATION - RECEIPTS	Total	VR	DBVI	DDSD	ASD	L & P	COMM	TOTAL
<b>FEDERAL FUNDS</b>								
TITLE 18 SURVEY & CERT; 93.777	1,793,576					1,793,576		1,793,576
TITLE 19 SURVEY & CERT; 93.777	845,652					845,652		845,652
IND LIVING PART B; 84.169	120,000	120,000						120,000
TITLE III E; 93.052	433,000				433,000		0	433,000
SECTION 110; 84.126	8,630,695	8,630,695						8,630,695
SSA - Promoting Opportunity Demonstration	60,000	60,000						60,000
SECTION 110 DBVI; 84.126	593,909		593,909					593,909
Senior Employment; 17.235	20,447			20,447				20,447
ASSISTIVE TECH. GRANT; 84.224	178,000	178,000						178,000
SHIP; 93.779	17,000				17,000			17,000
Money Follows the Person; 93.971	700,000				700,000			700,000
Social Services Block Grant; 93.667	380,107			380,107				380,107
SIMS Grant; 93.624	35,594						35,594	35,594
WIPA; 96.008	110,000	110,000						110,000
Medicaid 93.778	5,458,279	0	123,742	1,662,594	2,179,702	472,608	1,019,632	5,458,279
Linked to Learning Careers 84.421	2,045,424	2,045,424						2,045,424
<b>Total Federal</b>	<b>21,421,683</b>	<b>11,144,119</b>	<b>717,651</b>	<b>2,063,148</b>	<b>3,329,702</b>	<b>3,111,836</b>	<b>1,055,226</b>	<b>21,421,683</b>
<b>Special Funds</b>								
VR FEES (EAP & AT)	1,318,889	1,318,889	0					1,318,889
VENDING	24,568	0	24,568					24,568
CONFERENCE FEES	47,000	3,000	0	24,411	19,589			47,000
<b>Total Special</b>	<b>1,390,457</b>	<b>1,321,889</b>	<b>24,568</b>	<b>24,411</b>	<b>19,589</b>	<b>-</b>	<b>-</b>	<b>1,390,457</b>
<b>Interdepartmental Transfers</b>								
SNAP; 03440	946,284	946,284						946,284
Welfare to Work; 03440	20,000	20,000						20,000
DOH Hospital Surveyor; 03420	100,000					100,000		100,000
<b>Total IntraUnit</b>	<b>1,066,284</b>	<b>966,284</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>100,000</b>	<b>-</b>	<b>1,066,284</b>
<b>GC Admin for indirect costs on MQO's</b>	<b>35,000</b>						<b>35,000.00</b>	<b>35,000</b>
<b>Vacancy Savings within Vantage</b>								
General Fund	20,055,791	3,971,415	634,159	4,594,817	2,322,352	3,325,699	5,207,350	20,055,791
<b>TOTAL RECEIPTS</b>	<b>43,969,215</b>	<b>17,403,707</b>	<b>1,376,378</b>	<b>6,682,377</b>	<b>5,671,642</b>	<b>6,537,535</b>	<b>6,297,576</b>	<b>43,969,215</b>

# DAIL Program Summary

\*All data is for SFY2021 unless otherwise noted

Commissioner's Office			
<p>People age 60 and over and adults with disabilities.</p>	<p><b>Support and Services at Home (SASH):</b> Statewide Residential-based coordination of health and other services for older Vermonters and/or people with disabilities. Services include case management, health care coordination, nutrition assistance, and disease and falls prevention activities.</p>	<p>Performance (SFY2021): SASH operates 54.5 active 'panels' in affordable housing communities, with the capacity to serve over 5,400 participants. Performance: <u>Improve Identification of Social Isolation</u>: 5/2017: 41%. 5/2018: 52%. 5/2019: 54%. 5/2020: 61%. 5/2021: 72%. <u>Improve Identification of Suicide Risk</u>: 5/2017: 22%. 5/2018: 26%. 5/2019: 61%. 5/2020: 65%. 5/2021: 68%. <u>Substance Use Screening</u>: 5/2017: N/A. 5/2018: 25% (baseline). 5/2019: 62%. 5/2020: 62%. 5/2021: 63%.</p>	<p>\$974,023 GC/MCO all inclusive</p>
<p>People with disabilities.</p>	<p><b>Home Access Program (HAP):</b> DAIL transfers \$100,000, to the Vermont Housing and Conservation Board (VHCB) to support VCIL's HAP Program which provides information, assistance, and referral services to help people with physical disabilities locate and secure funding for home modifications.</p>	<p>Performance (SFY2021): VHCB manages the Home Access Program grant and performance measures.</p>	<p>\$100,000 GF</p>

## DAIL Program Summary

\*All data is for SFY2021 unless otherwise noted

<p>People age 60 and over and adults with disabilities.</p>	<p><b>Homesharing:</b> DAIL supports an innovative Homeshare Program in Vermont: HomeShare Vermont is active in Addison, Chittenden, Franklin, Grand Isle, Washington, Lamoille, Orange, Caledonia and the Town of Brandon. "Homesharing" arranges live-in 'matches' between Vermonters who have a living space to share and others who need a place to live. The Homeshare Program have been successful in helping people stay in their own homes, as well as in helping people find affordable housing.</p>	<p>Performance (SFY2021):</p> <ul style="list-style-type: none"> <li>• 216 Vermonters in "matches."</li> <li>• 95 Vermonters provided affordable housing.</li> <li>• 96% of people matched reported perceived benefits in at least one quality of life measure such as sleeping better, feeling safer, eating better, happier, get out more and call family for help less often.</li> <li>• 46% of matched home providers reported they would be unable to remain safely and comfortably at home without a home sharer.</li> </ul>	<p>\$280,000GC/MCO</p>
<b>Adult Services Division</b>			
<p>People age 60 and over.</p>	<p><b>Older Americans Act funds</b> services for people age 60+ to help them live as independently as possible and to support family caregivers. Services include nutrition programs, information/referral/ assistance, family caregivers support, case management, health promotion &amp; disease prevention, volunteer outreach and legal services. Federal law-42 U.S.C 3001, et. seq.</p>	<p>Performance (FFY2020): (NOTE: FFY2021 data will not be final/confirmed until early 2022.)</p> <ul style="list-style-type: none"> <li>• Overall, 55,381 people served (9% decrease).</li> <li>• Home delivered Meals: <i>Note: the significant increases/decreases noted below are due in large part to the shutdown of congregate meal programs during FFY20, expanded eligibility for home-delivered meals, and increased federal funding for meals.</i> <ul style="list-style-type: none"> <li>○ 7,725 people served (33% increase).</li> <li>○ 905,526 meals served (16% increase).</li> <li>○ 92% of meals served</li> </ul> </li> </ul>	<p>Approx. \$12M Total approx. \$5M GF</p>

## DAIL Program Summary

\*All data is for SFY2021 unless otherwise noted

		<p>were provided to OAA eligible Vermonters.</p> <ul style="list-style-type: none"><li>○ 96% of home delivered meals consumers reported they had enough to eat (no change from last year).</li><li>○ 79% of home delivered meals consumers reported that meals help manage or improve their medical condition (4.5% decrease from last year).</li><li>● Congregate Meals:<ul style="list-style-type: none"><li>○ 8121 people served (36% decrease).</li><li>○ 105,923 meals served (61% decrease).</li><li>○ 77% of meals served were provided to OAA eligible Vermonters.</li></ul></li><li>● Case Management:<ul style="list-style-type: none"><li>○ 7,210 people served.</li><li>○ 86% of survey respondents report living in the setting of their choice.</li><li>○ 77% of survey respondents report their unmet needs were addressed.</li></ul></li></ul>	
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## DAIL Program Summary

\*All data is for SFY2021 unless otherwise noted

<p>People age 60 and older.</p>	<p><b>Self-Neglect</b>                  The Self-Neglect Initiative is for the ongoing effort to help and coordinate support for individuals age 60 years and older who are self-neglecting. The focus of this effort is to enhance a coordinated community response through a combination of training and education, outreach, assessment, service provision and community engagement. Service provision includes information and assistance/referral and case management (including assessment, identifying goals, working towards those goals, and engaging with additional community providers for other relevant services such as clinical therapy, meals, housecleaning, money management, etc.). Funds are distributed to the five (5) Area Agencies on Aging (AAAs) designated through the Older Americans Act to serve those age 60 and older in greatest economic</p>	<p>Performance (SFY2021):</p> <ul style="list-style-type: none"> <li>• 100% of people served had complete assessments (25% increase).</li> <li>• 92% of people served had goals (18% increase).</li> </ul> <p>82% of people had goals with provider engagement (25% increase).</p>	<p>\$265,000 GC</p>
<p>Older Vermonters and Vermont farms.</p>	<p><b>Senior Farmers Market</b>                  The Northeast Organic Farmer’s Association (NOFA) recruits congregate housing sites and farms to participate in Community Supported Agriculture (CSA). The goal is to support local farms while bringing fresh local food to older residents in congregate housing. “Farm to Family” coupons are also distributed to older adults via Community Action Agencies to be used for fresh produce at participating farmers’ markets.</p>	<p>Performance (SFY2021):                  Note: Significant increases below reflect that this data now includes both the CSA program and coupon program combined, whereas past years only included CSA data.</p> <ul style="list-style-type: none"> <li>• 2027 people served (91% increase).</li> <li>• 240 farms participated (1500% increase).</li> </ul> <p>70 housing sites participated (8% increase).</p>	<p>Approx. \$40-70K FF</p>

## DAIL Program Summary

\*All data is for SFY2021 unless otherwise noted

<p>Adults living in licensed long-term care facilities and all Choices for Care participants.</p>	<p><b>The Vermont Long Term Care Ombudsman Project of Vermont Legal Aid</b> protects the safety, welfare and rights of older Vermonters who receive services in licensed nursing facilities, residential care homes, assisted living residences and to CFC participants of any age receiving services in any of the settings above as well as in home- and community-based settings. 33 V. S. A§ 7501 et. seq.</p>	<p>Performance (FFY2021):                  Note: Decreases below are due to the suspension of visits to LTC facilities for much of the FFY.</p> <ul style="list-style-type: none"> <li>• 240 complaints were opened (39% decrease).</li> <li>• 96% of open complaints were verified.</li> <li>• 140 complaints were closed (61% decrease).</li> <li>• 227 complaints were resolved (24% decrease).</li> <li>• Provided 462 consultations to individuals in long-term care facilities (25% increase).</li> <li>• Provided 101 consultations to people receiving HCBS (0% change).</li> <li>• Provided 84 consultations to long term care facility providers (34% decrease).</li> <li>• Provided 80 consultations to HCBS agencies/providers (25% decrease).</li> <li>• Approximately 87% of complaints were fully or partially resolved to the satisfaction of the individuals receiving services which is well above the 75% target and national average. Only 2.7% of all long-term care facilities were visited; visits were suspended in 3/20 and not regularly resumed in SFY21.</li> </ul>	<p>\$900K                  Approx. Various funds                  Total</p>
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## DAIL Program Summary

\*All data is for SFY2021 unless otherwise noted

<p>People age 60 and over, adults with physical disabilities, and their families.</p>	<p><b>Choices for Care</b> provides a range of services to support people living at home, in an Enhanced Residential Care Home, Adult Family Care or in a nursing facility.</p> <p>Vermont Global Commitment (GC) Medicaid Regulations &amp; Vermont Choices for Care regulations.</p>	<p>Performance (SFY2021) as of July 2021:</p> <ul style="list-style-type: none"> <li>• 5,865 people enrolled all settings High/Highest/Moderate (0% increase).</li> <li>• 4780 enrolled in High/Highest (3% increase).</li> <li>• 44% of all high/highest enrollments in home-based setting (4% decrease).</li> <li>• 12% of all high/highest enrollments in ERC setting (no change).</li> <li>• 45% of all high/highest in nursing facilities (7% increase).</li> <li>• 90% of clinical determinations (high/highest) were completed within 30 days or less (target 95%). The clinical team experienced more fluctuations in the workload for clinical determinations than normal due to leave of staff, COVID deployments of staff, and conducting assessments remotely.</li> </ul> <p>Moderate Needs as of July 2021:</p> <ul style="list-style-type: none"> <li>• 1,085 people enrolled (8% decrease). Reduction in enrollments primarily in Homemaker Services, due to workforce demands.</li> </ul>	<p>Over \$230M</p>
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## DAIL Program Summary

\*All data is for SFY2021 unless otherwise noted

<p>People transitioning from nursing homes to the community.</p>	<p><b>Money Follows the Person (MFP)</b> Grant is a special program supplementing the CFC program who choose to transition: \$2,500 per person to help overcome barriers for returning to the community (rent, mortgage, etc.), and enhanced FMAP on all HCBS for each person enrolled and transitioned to approved housing. The period of enrollment is 365 days.</p>	<p>Performance (CY2021): MFP’s goal was to transition 44 people out of nursing facilities in CY2021. As of 12/15/21, 80 people had been transitioned (increased from 22 in CY20) with 5 nursing facility readmissions.</p>	<p>MFP expenses in the DVHA budget. Administrative expenses in DAIL (100% Federal Funds)</p>
<p>Adults with physical and/or cognitive impairments.</p>	<p><b>Adult Day Services</b> is a community-based non-residential service that assists individuals to remain active in their communities by maximizing health, independence and optimal functioning. Vermont Global Commitment to Health regulations; Vermont Choices for Care regulations.</p>	<p>Performance (SFY2021):                      Note: Adult Days were closed in March 2020 and did not reopen until April-June 2021. 3 Adult Days closed in 2020 and have not been replaced.</p> <ul style="list-style-type: none"> <li>• 241 people total were served, a 52% decrease from SFY20.</li> <li>• 46% of people served were CFC Moderate Needs.</li> <li>• 25% of people served were CFC Highest/High needs.</li> <li>• 29% of people served were Day Health Rehabilitation Services.</li> </ul>	<p>Approx. \$4M Gross Choices for Care, and Day Health Rehab Services</p>

## DAIL Program Summary

\*All data is for SFY2021 unless otherwise noted

<p>Adults with disabilities.</p>	<p><b>Attendant Services Program (ASP)</b> provides physical assistance with activities of daily living to adults with severe and permanent disabilities, allowing people to remain in their own homes and communities. General Funds option has been frozen since July 2014.</p> <p>33 V. S. A. § 6321; Vermont program regulations.</p>	<p>Performance (SFY2021): Unduplicated served throughout the entire year.</p> <ul style="list-style-type: none"> <li>• 104 people served (5% decrease).</li> </ul> <p><u>Medicaid Option</u> - Serves people eligible under State Plan Medicaid and are able to self-direct:</p> <ul style="list-style-type: none"> <li>• 62 people served (7% decrease).</li> </ul> <p><u>General Fund Option</u>: Serves people who are not Medicaid eligible and are able to self-direct. This option has been frozen since July 1, 2014.</p> <ul style="list-style-type: none"> <li>• 38 people served (3% decrease).</li> </ul> <p><u>Personal Services (SSBG)</u>: Serves people who are Medicaid eligible but are not able to self-direct and use an agent to manage caregivers.</p> <p>4 people served (no change).</p>	<p>\$2.5M approx.</p>
<p>Adults who rely on medical technology.</p>	<p><b>High Technology Home Care</b> provides skilled nursing care to adults 21 and older who are Medicaid eligible and depend on technology. Services include RN oversight, treatment coordination, medical supplies and sophisticated medical equipment. (High Technology services for people under the age of 21 are managed by the VT Department of Health.) Benefits are covered within the Medicaid State Plan.</p>	<p>Performance (SFY2021):</p> <ul style="list-style-type: none"> <li>• 22 people were enrolled at end of SFY21 (29% increase).</li> </ul> <p>Home Health Agencies continue to struggle with recruiting RNs to fill the need. DAIL is working with DVHA to create a high-tech family-managed option and allowing parents who are RNs to be paid to provide care.</p>	<p>DVHA appropriation Approx. \$4M GC</p>

## DAIL Program Summary

\*All data is for SFY2021 unless otherwise noted

<p>People with moderate to severe traumatic brain injuries.</p>	<p><b>Traumatic Brain Injury Program (Brain Injury Program)</b> diverts and/or returns individuals from hospitals and facilities to community-based settings. Services are rehabilitation-based and driven by participants goals and choices, intended to help people achieve their optimum independence and return to work.</p>	<p>Performance (SFY2021):</p> <ul style="list-style-type: none"> <li>• 82 people served (9% decrease).</li> <li>• 0% of people receiving rehabilitation services were employed through the 3<sup>rd</sup> quarter of CY2021 (target was 25%).</li> <li>• 0 people graduated from the rehabilitation program to independence (target was 7).</li> </ul> <p>DAIL worked with providers to shift more long-term participants to the Choices for Care program when possible, reducing the need to fund their services with TBI program dollars.</p>	<p>Over \$5M GC</p>
<p><b>Division for the Blind and Visually Impaired</b></p>			
<p>People who are blind or visually impaired.</p>	<p><b>DBVI Vocational Vision Rehabilitation Program:</b> Federal law - 29 United States Code (U. S. C), chapter 16.</p> <p>The DBVI Vocational Rehabilitation Program offers free, flexible services to people who are blind or visually impaired with assistance to build adaptive blindness skills and secure or maintain employment. DBVI partners with employers across Vermont to help people who are blind or visually impaired realize their full potential.</p>	<p>Performance (FFY2021):</p> <ul style="list-style-type: none"> <li>• 246 people served.</li> <li>• 29 individuals successfully achieved their employment goals. Individuals who did not achieve their goals will continue to receive services in FFY 22.</li> </ul> <p><b>Statewide Survey</b>--Statewide Survey Results FFY 2021 (Conducted by Market Decisions)</p> <ul style="list-style-type: none"> <li>• 93% of DBVI consumers are satisfied with the DBVI vocational rehabilitation program.</li> <li>• 93% of DBVI consumers feel they are better off as a result of the services received from DBVI.</li> </ul>	<p>\$988,612 Gross</p>
<p>People who are blind or visually impaired.</p>	<p><b>Independent Living Services</b> helps people who are blind or visually impaired learn skills to remain independent in their homes and communities.</p>	<p>Performance (FFY2021):</p> <ul style="list-style-type: none"> <li>• 94 people were served.</li> </ul>	<p>\$74,395 Federal</p>

## DAIL Program Summary

\*All data is for SFY2021 unless otherwise noted

<p>People who are blind or visually impaired and over age 55.</p>	<p><b>Older Blind Program</b> helps people who are blind or visually impaired and over the age of 55 learn skills to remain independent in their home and communities. Services are provided through a grant with the Vermont Association for the Blind and Visually Impaired.</p>	<p>Performance (FFY2021):</p> <ul style="list-style-type: none"> <li>625 people were served.</li> </ul>	<p>\$225,000 Federal</p>
<p>People with the most significant visual impairments.</p>	<p><b>Randolph/Sheppard Program</b> assists blind business owners to successfully run cafeterias and vending programs on state and federal property. 21 V. S. A. § 501 et seq.; federal law (20 U. S. C. § 107 et seq.)</p>	<p>Performance (FFY2021):</p> <ul style="list-style-type: none"> <li>4 individuals who operate small café and vending businesses on state and federal property.</li> <li>Gross earnings for blind business owners increased 1%.</li> </ul>	<p>\$223,450 Gross</p>
<p>People with disabilities.</p>	<p><b>IL Part B</b> is a grant to the Vermont Center for Independent Living to provide independent living services to people with disabilities through their Peer Advocacy Counseling Program and assistive technology through the Sue Williams Freedom Fund.</p>	<p>Performance (SFY2021):</p> <ul style="list-style-type: none"> <li>Peer Advocacy Counseling Program (overall, including federal funds): 183 individuals served.</li> </ul> <p>Sue Williams Freedom Fund: 45 individuals served.</p>	<p>\$150,000 Gross</p>

## DAIL Program Summary

\*All data is for SFY2021 unless otherwise noted

Developmental Disabilities (DD) Services Division			
<p>People with developmental disabilities and their families.</p>	<p><b>Home and Community-Based Services (HCBS)</b> consist of a range of services to support individuals with DD and their families, increasing independence and supporting participation in their local communities. Priorities are to prevent imminent risk to the individual’s personal health or safety; prevent an adult who poses a risk to public safety from endangering others; prevent or end institutionalization; maintain employment upon graduation from high school; and provide training in parenting skills for a parent with developmental disabilities to help keep a child under the age of 18 at home.</p> <p>18 V. S. A. chapter 204A; Vermont Developmental Disabilities Act Regulations; Vermont Global Commitment to Health regulations.</p>	<p>Performance (SFY2021):</p> <ul style="list-style-type: none"> <li>• 3,281 people served.</li> <li>• In SFY2020 (most current data), 45% of working age people were employed.</li> </ul>	<p>\$245M approx. GC</p>

## DAIL State Fiscal Year 2023 Program Summary

\*All data is for SFY2021 unless otherwise noted

<p>People with developmental disabilities and their families.</p>	<p><b>Flexible Family Funding (FFF)</b> provides funds to be used flexibly, at the discretion of the family, to purchase goods, services and supports that benefit the individual and family. 68% (705) of the people served were children under the age of 18. (18 V. S. A. chapter 204A; Vermont Developmental Disabilities Act Regulations).</p>	<p>Performance (SFY2021):</p> <ul style="list-style-type: none"> <li>• 977 people served.</li> <li>• The number of family members reporting that they anticipated using funds for:             <ul style="list-style-type: none"> <li>○ Respite: 227.</li> <li>○ Assistive Technology: 242.</li> <li>○ Individual needs: 827.</li> <li>○ Household needs: 677.</li> <li>○ Recreation: 467.</li> <li>○ Other: 252.</li> </ul> </li> <li>• The number of families reporting that funds would address the following outcomes:             <ul style="list-style-type: none"> <li>○ Health and safety: 460.</li> <li>○ Improve quality of life: 532.</li> <li>○ Avert crisis placement: 87.</li> <li>○ Increase communication skills: 352.</li> <li>○ Increase independent living: 494.</li> <li>○ Enhance family stability: 557.</li> <li>○ Maintain housing stability: 456.</li> </ul> </li> </ul>	<p>Approx. \$1.1M GC</p>
<p>Children and youth with a mental health or developmental disability and their families.</p>	<p><b>Family Managed Respite (FMR)</b> provides respite for children up to age 22 with a mental health or developmental disability diagnosis who do not receive home and community-based services funding. Respite can be used as needed, either planned or in response to a crisis.</p>	<p>Performance (SFY2021):</p> <ul style="list-style-type: none"> <li>• 243 children and youth with a diagnosis of developmental disability received FMR. This does not include children with only a mental health diagnosis, or children receiving integrated services with bundled payments.</li> </ul>	<p>Approx. \$1.6M GC</p>

# DAIL State Fiscal Year 2023 Program Summary

\*All data is for SFY2021 unless otherwise noted

<p>Children and youth with a developmental disability and their families.</p>	<p><b>The Bridge Program</b> provides care coordination to families to help them access and/or coordinate medical, educational, social and other services for children up to age 22.</p>	<p>Performance (SFY2021):</p> <ul style="list-style-type: none"> <li>• 382 children served. This does not include children receiving integrated services with bundled payments.</li> <li>• 88% of goals were being met (based on agencies reporting service goals and the service goal outcomes achieved).</li> </ul>	<p>Approx. \$800K GC</p>
<p>Adults with developmental disabilities and older Vermonters who have been found to lack decision making abilities concerning basic life decisions.</p>	<p><b>Office of Public Guardian (OPG)</b> provide public guardians to assist and empower people under guardianship in making decisions and taking actions in critical life areas. Courts assign a public guardian when an individual need a guardian to protect his or her rights or welfare, no friend or family member is available to serve as guardian, and the individual needs a public guardian. OPG facilitates guardianship evaluations for new private and public guardianship applicants. OPG also provides representative payee services and case management services to a limited number of people. 18 VSA 9301-9317; 14 VSA 3093.</p>	<p>Performance (SFY2021):</p> <ul style="list-style-type: none"> <li>• 734 adults received guardianship services including:                             <ul style="list-style-type: none"> <li>○ 606 people with developmental disabilities.</li> <li>○ 128 adults over age 60.</li> </ul> </li> <li>• 323 people received representative payee services.</li> </ul>	<p>Approx. \$4M</p>
<b>Division of Licensing and Protection</b>			
<p>People receiving services from Vermont health care facilities and agencies.</p>	<p><b>Survey and Certification (S&amp;C)</b> provides regulatory oversight of health care facilities and agencies under state and federal regulations. 33 V. S. A. § 7101 et seq.; state regulations for each type of Long-Term Care facility; federal regulations for nursing homes.</p>	<p>Performance (SFY2021):</p> <ul style="list-style-type: none"> <li>• S&amp;C conducted 201 onsite investigations across all state and federal provider groups. This represents an increase of 6% from the previous year.</li> </ul>	<p>\$3.3M Gross approx.</p>



# DAIL State Fiscal Year 2023 Program Summary

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<p>Vulnerable adults.</p>	<p><b>Adult Protective Services (APS)</b> investigates allegations of abuse, neglect and/or exploitation, raises awareness of adult maltreatment in all of its forms, and provides information about alternatives and services for vulnerable adults who are the victims of maltreatment. (Chapter 69 of Title 33 of the Vermont Statutes Annotated).</p>	<p>Performance (SFY2021):</p> <ul style="list-style-type: none"> <li>• APS received 3,461 reports alleging abuse, neglect, or exploitation of vulnerable adults, a decrease of 5% from the previous year.</li> <li>• APS initiated 616 investigations from these reports, a decrease of 3.6% from the previous year.</li> <li>• APS completed 637 investigations, a decrease of 7.4% from the previous year.</li> <li>• APS placed 55 individuals on the Adult Abuse Registry, a decrease of 51% from the previous year.</li> </ul>	<p>\$1.7M Approx. GF</p>
<p><b>Division of Vocational Rehabilitation</b></p>			
<p>People who are deaf or hard of hearing.</p>	<p><b>Vermont Interpreter Referral Service (VIRS)</b> was operated by Vermont Center for Independent Living through March 2021 and then by VANCRO.</p>	<p>Performance (SFY2021):</p> <ul style="list-style-type: none"> <li>• VCIL and VANCRO filled over 700 requests for interpreters for 3,836 hours of interpreter services.</li> </ul>	<p>\$55,000 Gross</p>
<p>People with disabilities.</p>	<p><b>Assistive Technology Program</b> helps people of all ages and abilities to achieve greater independence, efficiency and control over their environment using assistive technology. Required by federal statute: Federal Assistive Technology Act.</p>	<p>Performance (SFY 2021):</p> <ul style="list-style-type: none"> <li>• 571 people were provided information and assistance about AT and how it might help them.</li> <li>• 37 people were provided assistance in securing funding for AT equipment.</li> <li>• The AT program conducted 151 device demonstrations for individuals who might benefit from AT.</li> </ul> <p>The AT program made 470 device loans for individuals to allow them to try out an AT tool before making a purchase.</p>	<p>\$300K approx. Gross</p>

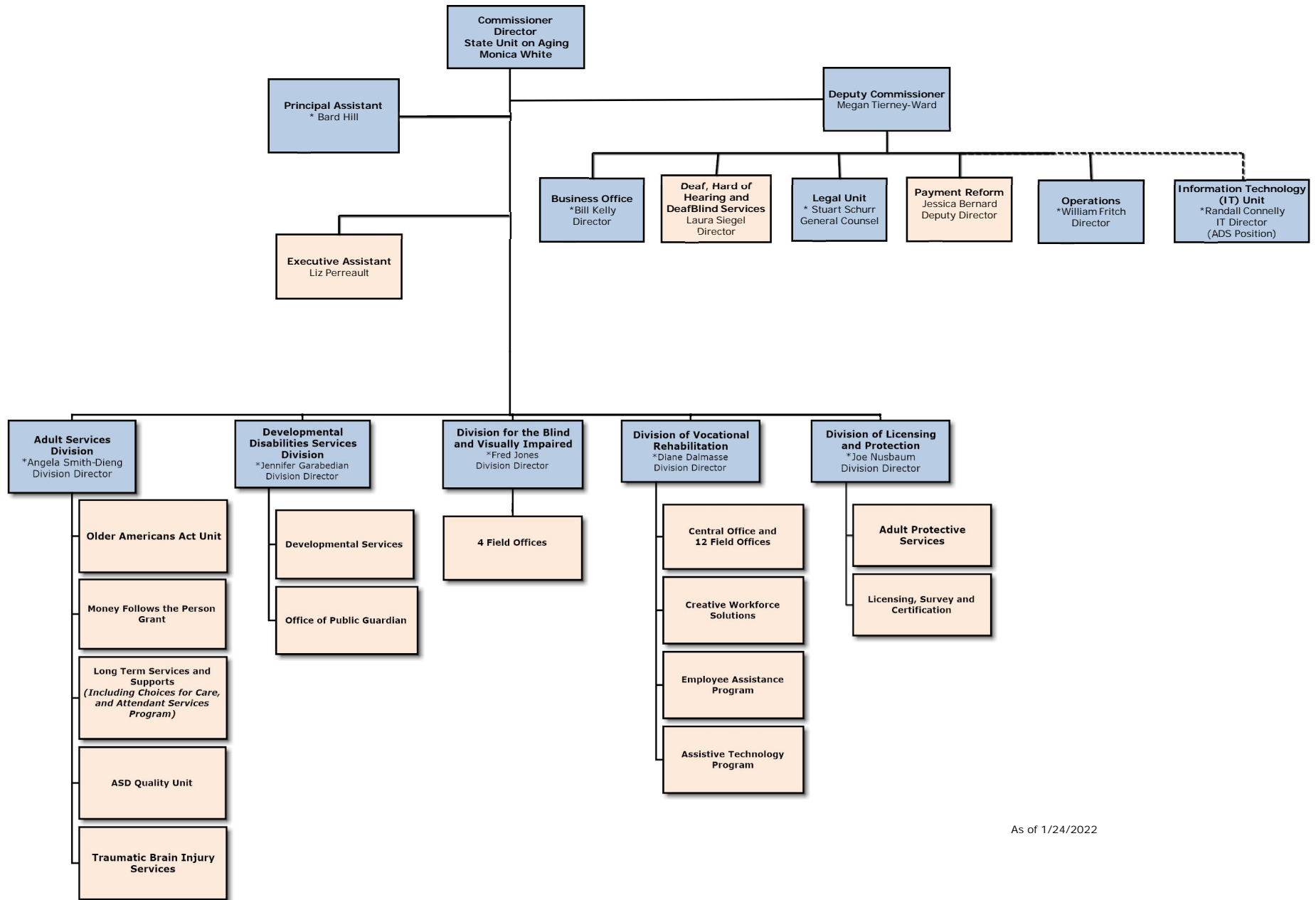
# DAIL State Fiscal Year 2023 Program Summary

\*All data is for SFY2021 unless otherwise noted

<p>People with disabilities</p>	<p><b>General Vocational Rehabilitation (VR)</b>          offers free, flexible services to any person or employer dealing with a disability that affects employment. Partner with human service providers and employers across Vermont to help people with disabilities realize their full potential.</p>	<p>Performance (SFY2021):</p> <ul style="list-style-type: none"> <li>• 5,606 total people served.</li> <li>• 4,957 people served in the core VR program.</li> <li>• 1,189 high school students served through Pre-Employment Transition Services only.             <ul style="list-style-type: none"> <li>• 444 individuals closed their VR case with successful employment. This means they had met their individual employment goal and had been employed for at least 90 days and were stable.</li> <li>• 54% had a wage above 125% of the minimum wage.</li> <li>• The employment rate two quarters post exit improved from 51.1% in SFY 2020 to 53.3% in SFY 2021.</li> <li>• The median earnings two quarters post exit increased from \$3,901 in SFY 2020 to \$4,630 in SFY 2021.</li> </ul> </li> </ul> <p>Results from the most recent customer survey (2019):</p> <ul style="list-style-type: none"> <li>• 98% of customers felt they were treated with dignity and respect.</li> <li>• 96 % of customers would tell their friends with disabilities to go to DVR for help with employment.</li> <li>• 92% of consumers reporting that they are satisfied with their experience working with DVR staff and DVR Counselors provided by DVR.</li> </ul>	<p>\$6,669,368 Gross</p>
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# Department of Disabilities, Aging, and Independent Living (DAIL) Organizational Chart

## State Unit on Aging (SUA)



As of 1/24/2022

\* = Identifies contacts for DAIL Senior Leadership