

# Vermont Care Partners Testimony on H.703 April 13, 2022

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### **OVERVIEW**

The House Health Care Committee and then the House Health Care Workgroup for the Commerce Committee included \$6 million for tuition assistance and loan repayment as part of H.703. Unfortunately, this funding was dropped from the Bill due to a misconception that unspent funds would be sufficient. We request that the Senate Economic Development, Housing and General Affairs Committee reinstate this funding.

Vermont Care Partners represents 16 designated and specialized service agencies serving 36,000 clients and touching the lives of over 50,000 Vermonters experiencing mental health crisis and in need of community supports annually. We should have 5,000 employees, in addition to shared living providers and other contractors. But due to years on underfunding leading to compensation rates at least 20% below the market (including state employees, health care professionals, fast food workers) we have a vacancy rate of over 20%. Furthermore, with a turnover rate of over 30%, the result is that 50% of our staff serving children, youth and adults with highly complex needs are either new to their job or simply don't exist. The result is hundreds of children and adults are left waiting for necessary mental health services and people with developmental disabilities are not receiving the services and residential supports they need. This is not the way Vermont's safety net was intended to work.

Several years ago, the legislature awarded funds from the tobacco settlement for tuition assistance and loan repayment specifically for mental health and substance use disorder staff. The process required collaborative work by several agencies which simply wasn't workable. Last session, the process was adjusted to enable Vermont Care Partners to administer the funds. It took a little time but using volunteer effort of DA/SSA Human Resource Directors and guidance from VSAC, Vermont Care Partners has developed the infrastructure to responsibly manage the tuition assistance and loan repayment funds with no administrative funding.

The grant was signed in October, the required forms and processes were ready to go in January, and in February the DA/SSAs started to announce the program to staff. The response has been terrific. In exchange for a commitment to work at agencies for one year, staff receive up to \$3,000 for tuition assistance or loan repayment. This benefit helps address the pay differentials with competing employers and serves to improve the stability

and expertise of our staff. It would be a shame to see the program run out of funds in less than a year, but that's where we are heading.

The current program could be improved in two ways.

- 1. The Developmental Disability staff, who have the highest vacancy rates, were left out because of the original source was the tobacco settlement fund. That could be corrected by using ARPA or other funding sources
- 2. The amount of funding is insufficient. Higher awards would be more effective. The current awards were limited based on the funding available. Some staff are refusing the funds because \$3,000 is not sufficient to prevent them from seeking employment that pays \$10,000 to \$20,000 more.

Please consider returning this \$6 million in one-time funds to the Bill. It would make such a difference to the staff who are struggling to make ends meet to have the opportunity to advance their education. Most importantly, it will strengthen our developmental, mental health and developmental disability services for Vermonter whose needs have never been higher.

### **DEVELOPMENTAL SERVICES**

Vermont Developmental Services, which represents half of the funding in DA/SSA system of care, is both a system in transition and in crisis. We are requesting the tuition assistance and loan repayment program be extended with new funding, and expanded to include our staff providing developmental services. As you well know, the mental health needs of Vermonters have never been greater. This includes Vermonters with I/DD; (2022 Complexity of Care Survey, VCP)

- 53% have Mental Health Diagnosis
- 7% have Substance Use Disorders
- 45% have other physical health problems
- 46% have Histories of Trauma
- 12% are either homeless or at risk of homelessness

We have seen increases in acuity of people in services and people coming into services because of both policy and trauma, while at the same time our workforce challenges – both turnover and vacancy - have worsened. At the end of FY21 DS has a staff turnover rate of 45%. Many staff have left, many staff are new and learning their positions, and seasoned staff are exhausted. Sometimes we arw the only ones who know what can happen (RS)We are concerned about how to keep people safe.

In the Fall of 2021, CCS faced a **Sixty percent** vacancy rate of front-line staff, raising concerns about quality and safety, even as it was awarded Best Places to Work in Vermont for the 4<sup>th</sup> year in a row. People want to work at CCS, but they can't afford it. In a bold and necessary move the CCS Board of Directors approved a pay increase of \$3/hour to all direct support professionals with compression increases for service coordinators. Let me be clear, our agency

is not currently funded to sustain this increase, but acted because of the critical needs of people in services. We need the Legislature and State to support this necessary decision. The effect was quick and profound. The departures due to low pay stopped, people came back to work at CCS and in 5 months the vacancy rate was cut in half. Demonstrating – perhaps at the financial risk of the agency - that it is about both about the pay and how we take care of and show that we value our staff. CCS and other agencies need the legislature's support for a 10% Medicaid rate increase and for targeted educational support for our staff. We can begin to restabilize our system with fairly paid and well-trained staff.

A recent internal poll of CCS staff shows that over 40 percent of the direct support professionals and service coordinators would take advantage of a tuition assistance or loan repayment program, and that it would increase their likeliness to stay. This is likely representative of the system. Please include \$6 million for tuition assistance and loan repayment for DA/SSAs in H.703 and when you do, please make sure to include the incredible staff who provide developmental services.

## THE NEED TO EXPAND AND EXTEND DA/SSA TUITION ASSISTANCE AND LOAN REPAYMENT

For many years the Designated Agency & Specialized Services System of care has not received adequate annual funding increases that allow us to compensate our direct care and administrative staff at competitive levels. The impact can be seen in growing turnover & vacancy rates across the service system. Here is information from the Clara Martin Center to give you a picture on the staffing issues the system is experiencing and the value of the tuition assistance and loan repayment.

Fully staffed, Clara Martin Center would employ roughly 190 - 200 people. In calendar year 2021, 75 staff left the Agency, with the vast majority citing a job offer with higher wages. They are projected to have over 35% turnover for this fiscal year. When positions turn over, client relationships are interrupted, the burden of training new staff increases, and the team members who remain take on more work to help fill the void. They are in a cycle of positions turning over, with minimal tools in the toolkit to strengthen retention options. The safety net is fraying, and Vermonters who need mental health treatment, substance use disorder treatment and developmental services are suffering the impact.

The Clara Martin Center currently has nearly 40 open positions, many of which have been open for months, and some for over a year. They simply cannot fill these positions, almost exclusively due to wage gaps with other local Vermont employers. The impact of so many open positions means that the Agency has been able to accept fewer referrals for their independent school. It means it cannot provide necessary one-on-one behavioral interventionists to support students in public school classrooms. It means the Agency has been unable to provide support and recovery-based services to clients who need them. It means they have many staff who have picked up additional responsibilities, extra shifts including overnights and weekend work, and who are exhausted by working longer hours with no end in sight. It means clients need to wait longer to access necessary care, and it means they are facing closure of emergency crisis beds on the weekends because they no longer have the staff to keep it open 24/7. This has

already occurred at other Agencies.

Clara Martin Center have lost 80% of the Counseling staff from its Medication Assisted Treatment program, leaving the remaining Counselors with caseloads of 150+ adults, all of whom are addicted to opiates, and in dire need of both medication and counseling. One recent applicant turned down an offer of employment as their current position at the Vermont Department of Child and Family Services pays them \$23,000 more than the Agency was offering, for a comparable position. This is not an uncommon situation, as Agencies continue to experience a widening gap between the salaries offered, and what applicants are able to receive elsewhere in Vermont.

In January, Clara Martin Center launched the initial Tuition Assistance and Loan Repayment benefit that was funded by the Legislature from Tobacco Settlement funds. They had 31 out of 106 eligible staff apply, with several more asking to be included after the posted deadline for applications. They awarded funds to all the eligible applications (30 out of the 31), and effectively committed 100% of funds immediately. 9 staff applied for Tuition Assistance to support their coursework, representing 8 different colleges & universities. 22 applied of loan repayment, with many staff showing evidence of significant student loan balances they are working to pay off. They anticipate that more staff will be interested in this program as awards are applied & word spreads.

This program strengthens the net of support to staff who choose to stay working for DA/SSAs, while forgoing higher salaries at other employers. To make this program an ongoing benefit to retain staff year to year, and to expand the program to include developmental services staff, would require far more than the amount received in this initial offering. Vermont Care Partners would like to report back in a year, on the impact on this new benefit on retention and hopes you will support funding this program at \$6 million for the 5,000 DA/SSA staff going forward.

As you consider all the competing funding demands before you, please also consider the recent Department of Health statistics for both rising opioid overdoses, and suicides in Vermont, as well as rising needs of Vermont's children and youth. The needs of Vermonters for mental health, substance use disorders and developmental disabilities has never been higher. They need a system of care that is adequately funded, and adequately staffed. We must serve those in need when they need us. Thank you for your consideration.

### **STATE DATA**

2021 opioid & suicide rates in VERMONT

https://www.healthvermont.gov/sites/default/files/documents/pdf/ADAP Monthly Opioid Update.pdf

https://www.healthvermont.gov/sites/default/files/documents/pdf/HSVR\_Injury\_Monthly\_Suicide\_Rep\_ort.pdf