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Comments on S.192 (forensic facility) to House Human Services Committee Marie Lallier, Developmental Disabilities Services Director for Vermont Care Partners

Thank you for having me, I'm pleased to share the work we have been doing across the Vermont Care Partners network to address these important issues.

Forensic facility beds are one option across a spectrum of needed services. Since the pandemic there has been anecdotal information about people receiving developmental services, around increased acuity, Emergency Department visits, and lack of resources, but difficult to find and examine data. We needed to get a handle of the situation statewide so formed the DS Crisis Supports workgroup (made up of agency directors, crisis managers and VCIN staff) in 2022. That same year the workgroup developed the DS Crisis Supports survey. In its second year, the survey has given us better information with which to work and plan. Here are some significant points:

- 46% of people with I/DD have a co-occurring mental health diagnosis.
- 287 people with I/DD or autism across the state were homeless or at risk of homelessness.
- 610 people with I/DD or autism were in or at risk of crisis.
- There were 28 people waiting for a Vermont Crisis Intervention Network (VCIN) bed in October 2023
- The top two reasons for crisis were health, mental/neurological health or substance use and finding or retaining housing.
- Technological solutions, IDD/autism informed healthcare, and nursing support are vital to maintain stability in a person's life and well-being.
- A livable wage remains a major priority across all workforce solutions around staff retention, skills and relationships.

Immediately apparent was the need for upstream services around IDD/autism informed healthcare and housing options. In the VCP position statement on Act 27/S192 referenced by Rutland DS Director Mary-Graham McDowell, which is in support of the beds but with conditions, one of conditions reads:

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"The state of Vermont ensures less utilization of restrictive settings by investing in therapeutic resources and a range of step-down or interim services so that people are not forced into an institutional environment for lack of less restrictive community-based settings."

Using the above information and guidance, the DSCS workgroup drafted written recommendations for the entire DS system of care, also in the context of forensic facility beds, including 2 recommendations for:

- Expansion of VCIN (delivers stabilization services, not treatment) or similar agency-based collaborative crisis services. DS Crisis Support survey data for October 2023 shows that 28 people were waiting for one of three VCIN beds.
- Expansion of local resources (at provider agencies) that offer varying levels of stabilization and support in less restrictive settings. For example, enhanced respite, transitional, stabilization/step-down, crisis)

Ongoing issues that impact development of the above services are workforce and housing.

Note: Recently, a state department and VCP network agency task force has convened to address similar issues for children and youth with IDD in DCF custody. It is clear that the same types of services and resources are needed for children and youth, so work around both priorities must be balanced and coordinated. The VCP network has and will continue to work closely with DDSD on the crisis care continuum.

Thank you for considering this bill so carefully. The VCP network is in support of the bill with conditions as written in the position statement, especially around I/DD-informed treatment. I have submitted the Crisis Survey results and VCP position statement in addition to this testimony. We don't foresee a legislative ask for alternate options at this moment, but we will know more as we work through the recommendations process with community and state partners. I'm happy to answer any questions now or later.

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