TABLE OF VERMONT AGENCY SERVICES ON AGING

AGENCY	ACTIVITIES	STAFF similar to community nurse	FUNDING SOURCE	GRANTS GIVEN?
AREA AGENCY ON AGING (VT4A)	Umbrella for regional councils on aging like Senior Solutions in Southeastern VT. General advice on wellness and nutrition and navigating Medicare and medical benefits. Help line. Case management for some individuals. Meals on Wheels and home visits.	To the extent Community Nurses guide on the available benefits of Medicare or Medicaid or other public benefits, this would be an overlap. Case management can help with nutrition and home safety like a community nurse. Do not reconcile medications.	Funding Senior Solutions: Federal Older Americans Act 34%; State General fund 23%; Medicaid 16%; other state funding 22%. Town contributions 1%. Donations 1%	Yes, limited. Annual report of Senior Solutions, for example, says 40 clients received grant assistance.
CAPSTONE COMMUNITY ACTION	Supports individuals and families in Central Vermont to achieve stability and rise out of poverty. Links them with • Food access • Transportation • Housing support	21 employees. At least half are administrators of programs which are independently funded and run	Community Services Block Grant (CSBG) which channels federal funds through the state	no

BLUEPRINT FOR	14 health service areas each with a	CHT: 118 FTE for 131 primary care	State of VT through all	Not for
HEALTH	Community Health Team (CHT) linked to a primary care practice including comm. health centers (CHC). • CHT does outreach to residents targeted by PCP- addresses mental health, substance abuse, chronic disease screening, food insecurity, transportation. • Services: care coordination, social work, substance abuse counseling, brief MH intervention, community referrals, self -management programs training for chronic disease management by	practices. Includes SW, RN, comm, health workers, dieticians, panel managers, MH counselors. Example of one HSA: 693 pts through Gifford CHC and one private Peds practice: 4.8 FTE on CHT + 2.2 FTE substance abuse, 0.5 FTE women's health (separate initiatives) Coordinates with SASH	payors (Medicare, Medicaid and private insurance) \$10,054,402 for CHT	community
REGIONAL PLANNING	individuals. Not a priority of Planners. Need to develop awareness.			
AGESTRONG VERMONT	Created by Older Vermonters Act. Responsible for creating a plan, which will be released in November and will be open for public comment.	No community nurse functions. Input is sought from organizations and the public.	State DAIL administers	NO
SASH	Closest overlap. Like the name: "Support and Services at Home" Nursing and wellness care for eligible for Medicare	Big staff throughout the state. Community coordinators can work with community nurses	Federal funding, donations	NO

	recipients. Expanding to include low-income housing populations.			
PARTNERS FOR	DHMC	No apparent community nurse function;		YES
COMMUNITY	Advance Directives and community health.	role of liaison with community		
WELLNESS	Network of advocates for improving			
	community health			
	Geared to helping DHMC serve the			
	community better			
VNA	Provides direct clinical care to VT residents	VNA (RN)	Medicare or private	NO
	when ordered by MD/NP. Time limited		insurance	
	and residents must be home bound.			
	Links to community services when possible			
EMT	Direct care of VT residents for emergency services	180 ambulance and first responder agencies in the state, and most of 3,000 licensed EMS personnel are volunteers (includes EMT,EMR, paramedics)	Medicaid, Medicare, Additional \$1M requested of state in 08/23 for increased Medicaid funding to keep system solvent	
Clinics – Federal Qualified (FQHC) and VT Free and Referral	Range of primary care primarily for uninsured and underinsured. Includes care coordination and transportation. vtfreeclinics.org			