



Good morning.

My name is Gloria Quinn, and I am the Executive Director of Upper Valley Services (UVS). We are the Designated Agency (DA) serving individuals with intellectual and developmental disabilities (I/DD) for Orange County and surrounding areas such as Washington and Lamoille Counties. We also support over 140 individuals who qualify for nursing home level of care through our community-based Adult Family Care (AFC) services program, Vermont Comforts of Home.

Thank you for the opportunity to testify today on housing. I am here as a member of the Act 69 Committee and to represent the developmental services (DS) system. I would like to describe what the housing crisis looks like for people with developmental disabilities and for the provider organizations that support them.

The housing crisis in Vermont affects people across the state. For Vermonters with intellectual and developmental disabilities, housing stability is essential to maintaining health, safety, and participation in community life. Housing is not an abstract issue for the people we serve. ***Housing is the foundation that is needed for all Vermonters to function well.***

The people with I/DD that we support live in a range of settings. Individuals may live with minimal staffing and sometimes family support. Others live in their own homes with round-the-clock staff support. Many live with family, while the majority of those served through our agency rely on provider supported housing models to live within their communities.

Without stable housing and support, individuals cannot maintain employment, engage consistently in services, manage their health needs, and/or avoid crisis. For people with I/DD, losing housing is destabilizing, resulting in higher costs, poorer outcomes, and preventable harm.

What happens when housing fails? The developmental services system becomes the point of immediate support. UVS currently supports 10 people who are in temporary housing. However, the VCP network's DS Crisis Survey indicates that just this past October, there were 144 Vermonters with I/DD at risk for homelessness. With scarce housing resources, vouchers, funding, viable housing stock, and skilled support staff, this becomes an impossible task. What are the alternatives? Transitional housing and support, emergency respite (also temporary), statewide crisis programs (that are very limited), hotels, hospitalization, emergency rooms, or worse. And what happens is that providers step in to manage risk, absorb disruption, and respond to crises, often without the tools or funding necessary to do so sustainably. That is the environment we are operating in today.

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I was pleased to participate on the Act 69 Housing Committee which focused on the statewide housing needs for people with I/DD. This committee appropriately recognized the need for coordinated cross system approaches to address housing shortages. Developmental services providers want to be part of these efforts. At the same time, current policy and funding conditions need to be reshaped to make this more viable.

Developmental services providers are not housing developers. We do not have access to capital markets, financing structures, or balance sheets that allow us to take on long term housing risk in the same way as traditional developers. Providers are also operating during a period of payment reform, uncertainty with funding, and limited availability of additional operating or capital funding tied to housing initiatives.

This combination matters.

Payment reform requires providers to absorb financial risk related to workforce shortages, service delivery variability, reimbursement changes and waning resources. Under these conditions, pursuing long-term housing initiatives becomes even more challenging, even when there is strong interest and commitment to participating. When providers explore involvement in housing solutions, financial constraints are often significant, making these efforts unsustainable. This is not a lack of interest or willingness. It is a question of feasibility under current conditions.

What is also true is that many individuals with developmental disabilities are living in difficult and unstable housing situations already. Some remain in family homes that are no longer sustainable. Some are in arrangements with caregivers that are aging out. Others cycle through temporary arrangements that increase instability. In some cases, individuals enter crisis settings not because they require that level of care, but because appropriate housing and ongoing support is unavailable.

Housing instability does not occur in isolation. At Upper Valley Services, approximately 60 percent of the individuals we support have co-occurring mental health needs. For these individuals, housing stability plays a critical role in preventing crisis. When housing is unstable, mental health symptoms can escalate. Crisis service utilization increases. Emergency departments and law enforcement may need to be overly relied upon. Costs rise across multiple systems.

Stable and appropriate housing is one of the most effective supports for people we serve and remains one of the most difficult resources to secure and sustain.

The central point I want to leave you with is this.

People with developmental disabilities rely on stable housing to live safely and meaningfully in their communities. When housing options are limited or unstable, their choices narrow and risks increase for them and everyone involved.

People rely on coordinated support, predictable environments, and continuity. When those elements are disrupted, stability, autonomy and independence are harder to sustain.

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Housing policy must clearly account for the needs of people with developmental disabilities within broader housing efforts, such as the ones our agency has had the privilege of enacting through the Act 186 Housing initiatives. These housing initiatives are underway and will provide an opportunity for 6-9 people to live in stable, accessible and affordable housing with built in support by May of this year. However, one of the initiatives is at risk without the necessary housing vouchers that will ensure affordability for the residents. This is at a time that even more options are needed statewide for Vermonters with I/DD.

Finally, solutions must be coordinated across systems. Housing, mental health, developmental services, and policy must align in order to support stable outcomes.

Without these conditions, providers will continue to respond to crisis rather than help create and sustain long term solutions. Upper Valley Services is here to be a part of the solution as are other providers. Our participation must be grounded in practical realities. The bottom line is that we need both housing and staffing resources for people to be able to live their best life.

Housing instability for people with developmental disabilities is not hypothetical. It is occurring now and affects individuals, families, providers, and state systems.

Current housing initiatives present an opportunity to improve stability and outcomes, particularly if the developmental services perspective is integrated into policy and funding decisions.

Thank you for the opportunity to testify. I am happy to answer any questions.



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