Designated and Specialized Service Agencies

Providing an indispensable community-based system supporting mental health, substance use, and intellectual and developmental disability needs across Vermont



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House Human Services



There are 16 agencies in the Vermont Care Partner Network:

AGENCY	TYPE	SERVICES
Champlain Community Services (CCS)	Specialized Service Agency	Developmental Services
Clara Martin Center (CMC)	Designated Agency	Mental Health, Substance Use Provider
Counseling Service of Addison County (CSAC)	Designated Agency	Mental Health, Developmental Services, Substance Use Provider
Families First in Southern Vermont (FFSV)	Specialized Service Agency	Developmental Services
Green Mountain Support Services (GMSS)	Specialized Service Agency	Developmental Services
Health Care and Rehabilitation Services (HCRS)	Designated Agency	Mental Health, Developmental Services, Substance Use Provider
Howard Center (HC)	Designated Agency	Mental Health, Developmental Services, Substance Use Provider
Lamoille County Mental Health Services (LCMHS)	Designated Agency	Mental Health, Developmental Services
Lincoln Street, Inc. (LSI)	Specialized Service Agency	Developmental Services
NFI Vermont, Inc. (NFI)	Specialized Service Agency	Children, Youth, and Family Mental Health Services
Northeast Kingdom Human Services (NKHS)	Designated Agency	Mental Health, Developmental Services, Substance Use Provider
Northwestern Counseling and Support Services (NCSS)	Designated Agency	Mental Health, Developmental Services, Substance Use Provider (Children/Youth)
Rutland Mental Health Services / Community Care Network (RMHS)	Designated Agency	Mental Health, Developmental Services, Substance Use Provider
United Counseling Service (UCS)	Designated Agency	Mental Health, Developmental Services, Substance Use Provider
Upper Valley Services (UVS)	Designated Agency	Developmental Services
Washington County Mental Health Services (WCMHS)	Designated Agency	Mental Health, Developmental Services, Substance Use Provider





An Indispensable Public Community-Based System

②	Created by statute (18 V.S.A. § 8907)	
	Designated Agencies are responsible for ensuring needed services are available through program/service delivery, local planning, service coordination, and outcome monitoring in each geographic region of the state (11 DAs all in the VCP network)	
	Specialized Service Agencies can operate in more than one geographic area of the state and provide a distinctive approach to service delivery and coordination (7 SSAs/5 in the VCP network)	
Ø	Grounded in the philosophy that everyone benefits when people receive community-based rather than institutional care	
S	A hallmark of our model is coordinated care in the community and integrated at the system, program, individual and family level	



AGENCY SERVICES



Children's Mental Health

Children's mental health programs provide therapeutic services to children and their familles. These services include individual, group and family counseling in addition to a variety of supports that promote children's stability in the communities, schools, and homes. The vast majority of these services occur in the homes, communities, public school, and independent school environments.



Adult Mental Health

Our Adult Outpatient Mental Health Programs offer a range of prevention and intervention services, to help individuals, families and groups cope during times of stress and crisis, as well as to address emotional and behavioral difficulties. For adults with serious mental illness, our CRT /CSP programs provide an array of therapeutic, day, and residential services. Our services promote community, independence and recovery to minimize the need for inpatient and custodial care. CRT Intake Contacts



Emergency Services

We are available 24 hours a day, seven days a week in every community in Vermont. Services are intensive and time-limited, focused on resolving or stabilizing adults, families and children who are in acute mental health crisis.



Intellectual and Developmental Disability

Community-based supports are provided for children and adults with intellectual and developmental disabilities, which occur before age 18. We provide residential, and vocational services as well as services that support stability in the community, respite and flexible family supports.



Substance Use Disorder

A variety of substance use disorder services are provided by eight of the network agencies. These services include prevention and education programs in the schools, outpatient counseling, intensive outpatient programs, family and group counseling services, and services that support stability in the community.



Community Outreach and Education

We provide communities with a variety of public awareness and training opportunities to increase their understanding of issues that are core to the network's mission, to reduce stigma and to improve care delivery



1/21/2025

Eldercare Program



Meeting the Mental Health Needs of Homebound Older Vermonters

The Eldercare Program serves older Vermonters facing mental health and substance use challenges who have limited access to services and supports and barriers to office-based care.

- Older Vermonters' higher risk of anxiety, depression, and suicide can be caused by social isolation, financial stress, and loss of loved ones
- Rates of suicide in Vermonters ages 60-84 are consistently higher than the national average
- One in four Vermont residents are over the age of 60 making it the 4th oldest population in the country - DAIL
- We need to ensure we're supporting our aging population
- No increase in this program in over 20 years



THREE KEY AREAS OF OUR WORK:

Upstream
Supports for
Prevention and
Stabilization

Holistic Supports:
Effective
Intervention

Community Crisis Response

Network agencies provide services in people's homes and communities:

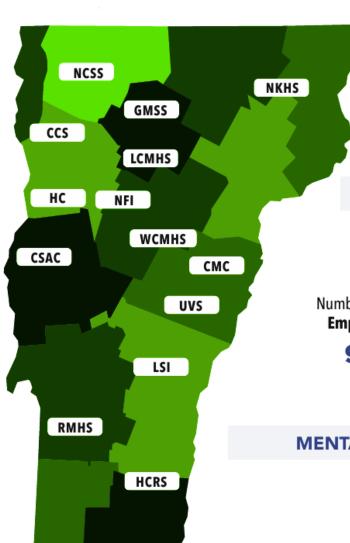
36% in office

64% in home & community

The majority of services that are provided to people are in home and community settings. Network agencies provide services in the community, at homes, schools, emergency rooms, inpatient hospitals, nursing facilities, etc.



1/21/2025



In FY24, network agencies provided

3,315,476

unique services.

DEVELOPMENTAL SERVICES

Total Number of **People Helped**:

3,856

Number of People Receiving Employment Services:

940 PEOPLE

Number of People **Living Independently**:

1,767 PEOPLE

1,527 HOME SUPPORTS SETTINGS

MENTAL HEALTH/SUBSTANCE USE SERVICES

Total Number of **People Helped**:

35,093

Number of **Crisis Responses**:

Number of **School-Based Services**:

12,253 PEOPLE

3,728 PEOPLE

164,764 SERVICES

266,474 SERVICES



1/21/2025

UCS

FFSV

CLIENT SATISFACTION OUTCOMES



reported
"I/we receive the
services that we
needed."



reported
"The services I/we
received made a
difference."



reported
"Staff treated me/us
with respect."





Developmental Services in Vermont are Provided through our Designated Agencies (DA) and Specialized Service Agencies (SSA)

Our Mission is to provide person-centered services designed to foster greater autonomy, inclusion, and quality of life for individuals with intellectual and developmental disabilities (I/DD and Autism) throughout their lifespan.



Services/Programs for Individuals with I/DD

- Flexible Family Funding
- Assessment for Children's Personal Care
- Bridge Program
- Adult Family Care (AFC)

- Developmental Services Home and Community Based Medicaid Waiver
- Targeted Case Management
- Family Managed Respite



Providing Support to the Whole Person

- Service Coordination: Provide person-centered program coordination based on individual needs.
- Residential Services: Community-based living options, including shared living providers (SLPs), in-home supports, supervised (living) apartments, and group homes.
- **Employment Services**: Support for competitive, integrated employment through job coaching, skill development, and vocational training.
- Community Supports: services that build life skills, foster community participation, and support social engagement.
- Respite Care: Relief for families and caregivers to reduce stress and maintain stability.
- Clinical and Behavioral Support: Access to nursing, mental health services, therapeutic supports, and intervention.
- Crisis Services: Community-based crisis intervention to provide de-escalation crisis response to prevent higher level of care



Residential or Home Supports

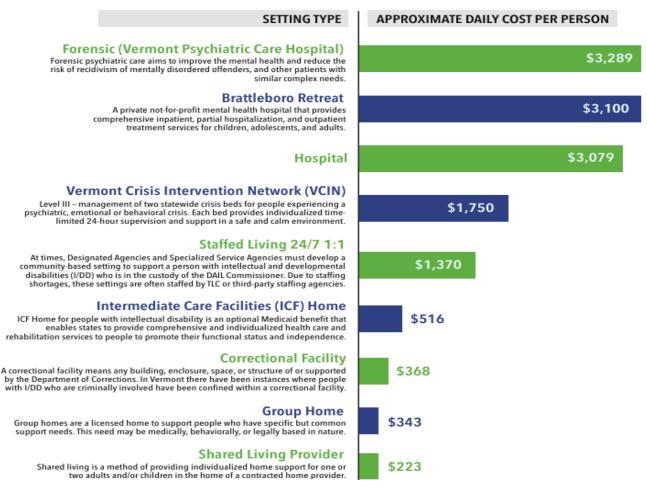
Vermont's Designated Agencies and Specialized Service Agencies are supporting over 1,500 individuals in a residential setting across the State

- **In-Home Supports** Typically individuals that live with unpaid caregivers and agency provides staff in their home.
- **Supervised Living** Individuals who live in their own home and the agency provides staffed support. DAs and SSAs are supporting up to 200 individuals in their own home or apartment across the state.
- Staffed Living Individuals live in their own home or an agency home that is staffed. Das and SSAs are supporting up to 75 individuals across the state in a 1 or 2-person home staffed 24/7
- **Group Living** Individuals live in a home with others and the home is staffed. Das and SSAs are supporting up to 66 individuals across the state in a 24/7 staff arrangement of 3-6 individuals in a licensed home
- **Shared Living** the most common residential model where an individual is supported in someone else's home who provides the home supports. Approximately 1,075 individuals supported by the DAs and SSAs supported across the state in a Shared Living model



Investing in Community-Based Solutions: Reducing Costs and Maximizing ROI for Affordable, Effective Care

Vermont's residential services for people with developmental disabilities mainly rely on the community-based Shared Living Provider model, where people live with community members who receive a stipend. While effective for many, a variety of residential options is needed, including higher-level care like Intermediate Care Facilities (ICF). Vermont Care Partners invests in community-based, less-restrictive options, giving people greater choice and stability. This approach reduces reliance on costly institutional care, delivering strong Return on Investment (ROI) through cost savings and better outcomes, while supporting sustainable care provided by high-quality direct service professionals.







1/21/2025

Crisis Data from Vermont

- Number of individuals with co-occurring mental health diagnosis 47%
- Number of individuals with chronic health conditions- 39%
- Number of individuals with a trauma and/or abuse- 38%
- Number of people with a recent history of or are at risk of homelessness. (*This includes anyone living in a hotel or living as a guest or respite recipient with no feasible options to move to permanent housing within 14 days*) **7% or 203 individuals**



Causes for Individuals Experiencing Crisis with I/DD

- Co-occurring and/ or individuals with significant trauma
- Lack of Mental Health Services for individuals with I/DD
- Loss of supports (natural and paid) and homes
- Lack of skilled and adequate staff who understand the signs and/ or mental health needs of individuals with I/DD
- Lack of clinical and psychiatric providers



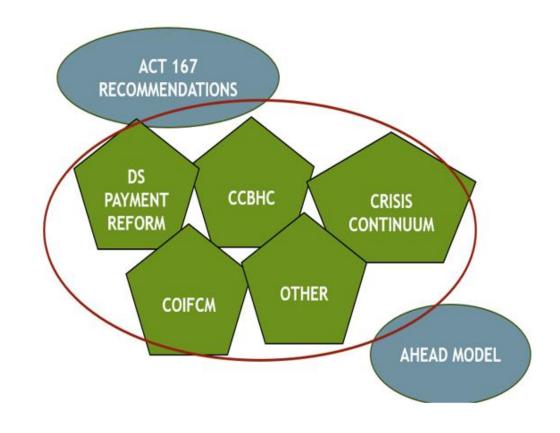
Crisis Services for Individuals with I/DD

- Vary across the DAs and SSAs
- Local/ agency crisis line
- After-hours pager system
- Phone response
- In-person response
- Assessment
- Stabilization
- Collaborative Crisis Program
- Vermont Crisis Intervention Network (VCIN)



Vermont's Largest System Changes in Developmental Services Since VT Deinstitutionalized

- Conflict of Interest Free Case
 Management a Federal mandate
 from CMS; how will this be funded?
- **DS Payment Reform-** not a mandate and will it ensure that individuals who are accessing supports, especially housing support models remain stable in the new payment model.





1/22/2025

System Challenges

Multiple, concurrent DDS system changes

- COI
- SIS A
- Payment Reform
- Funding to continue to expand and maintain integral supports and services to individuals with disabilities and vulnerable Vermonters
- Aggressive Timeline and concerns with how realistic this is and the impact for unintended consequences

Staffing

- Funding to remain competitive and attractive
- Aging workforce
- Recruitment and retention



System Challenges - Continued

Housing

- Lack of housing for potential staff to move into the state
- Lack of affordable accessible housing for individuals with disabilities

Resources

- Lack of clinical/psychiatric providers
- Increased acuity levels

Aging Caregivers

- 22% of UVS SLP survey respondents indicate they will leave the role within 5 years
- Aging parents and siblings



VCP 2025 LEGISLATIVE PRIORITIES

Increase Medicaid Rates for DA/SSA Providers to **Support for the DA/SSA Supporting Older Ensure Adequate** Vermonters through a **Network During System Compensation and** Comprehensive Reform **Improve Healthcare Continuum of Care Outcomes Working Collaboratively to Support Kids and Families** Investment in the crisis Housing in Community Based continuum **Settings**





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