

## Department of Disabilities, Aging and Independent Living

### A Message from the Commissioner



Welcome to the *Department of Disabilities, Aging and Independent Living's 2016 Annual Report*. We have a great deal to celebrate and to be proud of in our work together on behalf of and with Vermonters. Across all five of our divisions, we continue to prioritize choice, independence and meaningful inclusion in community as the cornerstones for the work we do. As we continue to mature in that philosophy, we recognize that honoring choice means that we must continue to adapt and respond to changing needs and be willing to take some risks, support new innovations and maintain a focus on outcomes.

We are honored this year that Vermont's Developmental Disabilities system was ranked 2nd in the nation by United Cerebral Palsy for our strengths in promoting independence and productivity, keeping families together and reaching those in need, and tracking health, safety and quality of life. Innovation is happening across the field- both in our community partners who continue to pilot new strategies to live independently- and within our own work. In the past year, we began initiatives to promote Supported Decision Making, explore the use of Personal Outcomes Measures and offered certification in Person Centered Thinking within the field- all areas in which we continue to strive to improve outcomes for individuals and their families.

We see the changing Vermont demographic as the median age of our population increases. Choices for Care continues to see significant success in ensuring that individuals can age at home, in their communities, making conscious and informed decisions about their care and supports. We are bending the curve on nursing facility stays and shifting, along with the industry, to define the appropriate role a skilled nursing facility plays in the rehabilitation of an individual or as a choice for longer term care. Within our partnerships with the aging network across the state, the Companion Aide Pilot and increasing use of the Oasis curriculum ensures that care for individuals with dementia is cutting edge. We also work to support a successful aging narrative- wellness, nutrition, engagement and a mature and skilled workforce are the jewels of our state and for all of us.

Our work in the employment of individuals with disabilities is unparalleled across the nation. We are a model for other states and our outcomes are among the highest in the

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country. Tried and true methods bear fruit, but the innovations continue- progressive employment, participation in federal grant opportunities to pilot new strategies, a focus on youth and concurrent approaches to education and career readiness. These are the strengths of Vermont's vocational rehabilitation system.

As the bottom line in safety and protection, DAIL works to ensure the protection of vulnerable Vermonters and to develop and promulgate licensing standards to ensure the health and wellbeing of any individual in care. In SFY 16, we continued to partner with the Adult Protective Services (APS) Subcommittee to support stakeholder voice in system improvements, we revamped the mandatory reporter training, and we continued our work to update the home health designation rules to bring them into alignment with the reality of the work of agencies today. These examples represent just some of our best thinking and guidance for future excellence.

None of this could be accomplished without the relationships we have with our community provider system and our many partnerships across state and federal government, and with the legislature and the Executive branch. Much would fall by the wayside without our self-advocates, our stakeholders, and the families who challenge us to rise above what we think is possible. And the work would grind to a halt without the dedicated, passionate staff that power DAIL daily- they are the creativity, the energy, the commitment that has built one of the strongest system of home and community based supports in the country, honoring each individual as the point of light that they are.

Ultimately, we believe that the work of the Department of Disabilities, Aging and Independent Living benefits all of Vermont because our communities are stronger and better when every member is included, when every member's gifts and strengths are utilized and appreciated and when we are able to see ourselves at every stage of our life and regardless of our abilities as part of a robust, vibrant and supportive community. That is truly the Vermont way.



Monica Caserta Hutt  
DAIL Commissioner

## Department of Disabilities, Aging and Independent Living

### **DAIL Mission Statement**

The mission of the Department of Disabilities, Aging and Independent Living is to make Vermont the best state in which to grow old or to live with a disability, with dignity, respect and independence.

We promote and support self-determination, respect for all, and full inclusion in the life of the community. Our principles:

- The individual will be at the center of all plans and services.
- Individuals, families, providers and staff are treated with respect.
- The individual's personal and economic independence will be promoted.
- Individuals will direct their own lives.
- The individual's services and supports will promote health and well-being.
- Individuals are able to work, volunteer, and participate in local communities.
- Individual needs will guide our actions, requiring flexibility.
- Individuals' needs will be met in a timely and cost effective way.
- Individuals will benefit from our partnerships with families, communities, providers, and other federal, state and local organizations.

### **Department Overview**

DAIL is a diverse department with a broad range of roles and activities. In our role as the State Unit on Aging and Disability, we support the Older American's Act services in Vermont. We manage individualized service programs that support choice, health, independence and quality of life including Choices for Care for older people and people with physical disabilities; Developmental Disabilities Services for people with intellectual and developmental disabilities; and services for people with Traumatic Brain Injuries. The Division of Vocational Rehabilitation and the Division for the Blind and Visually Impaired help people with disabilities in maintaining employment and self-sufficiency. Adult Protective Services seeks to reduce the rate and impact of abuse, neglect and exploitation of vulnerable adults while Survey and Certification safeguards the quality of care in licensed facilities and home health agencies. The Office of Public Guardian provides guardianship services to people who cannot represent themselves, and do not have family or friends to represent their interests. As a team, we try to represent the interests of older people and people with disabilities in pursuing full, inclusive lives in their chosen communities.

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### Staff and Partners

DAIL includes 281 staff positions across five divisions and in the Commissioner's Office. Our partners are numerous and diverse, representing the diversity of our funding and our roles:

1. People...also known as consumers or participants: the people served, whose choices we support and whose lives we work to improve. The people are the focus of what we do.
2. Advocates: Advocates, family members, caregivers, and guardians all help to support the people we serve.
3. Providers: Many our services are provided by community providers. Our community partners are the people who make a difference directly in people's lives.
4. State partners: DAIL collaborates with a variety of state partners, both within our Agency of Human Services and outside our agency, for example, the Department of Labor, the Green Mountain Care Board, and the Vermont legislature. This helps to make all our work more effective and efficient.
5. Federal partners: DAIL actively partners with several federal partners and funders including the Centers for Medicare and Medicaid Services, the Rehabilitation Services Administration, and the Administration for Community Living. Without federal funding, many of our services would shrink or disappear.

### Recent Developments and Accomplishments

DAIL's recent accomplishments include:

1. Vermont ranked #1 in Vocational Rehabilitation outcomes (Rehabilitation Services Administration), #2 in Senior Health (United Health Foundation), and #2 in serving people with intellectual and developmental disabilities as ranked by United Cerebral Palsy.
2. DLP Survey and Certification received a perfect score from the Centers for Medicare and Medicaid Services (CMS) on their annual performance review. This rating shows that the Vermont State Survey Agency is providing timely, appropriate, and balanced oversight to a wide range of facilities.
3. In March 2016, Governor Shumlin signed an Executive Order establishing a "Disability Employment Working Group" comprised of representatives from DAIL, the Department of Human Resources and members of the Governor's Workforce Equity and Diversity Committee. They are charged with developing a model to help State agencies recruit, train and retain workers with

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disabilities to both diversify and meet the needs of Vermont's "greying" workforce.

4. The DDSD Supported Employment Program has been recognized by the Zero Project, based in Vienna, Austria, for the ZERO PROJECT INNOVATIVE POLICY 2017 award. This award recognizes out transition from workshops to full community integrated employment.
5. The Vermont legislature approved support for the NFB-Newsline service. This service gives access to more than 400 local and national newspapers and magazines in an accessible format that can be accessed using a regular telephone or smartphone to individuals who are blind or visually impaired.
6. Linking Learning to Careers Project (LLC): In September 2016 DVR won a \$9M, 5-year Federal grant to implement and evaluate an innovative model for the transition of students with disabilities to early career success. This includes competitive employment, postsecondary school enrollment, and improved confidence to achieve career goals.
7. DAIL reached department-wide use of Results-Based Accountability Scorecards, increasing our focus on performance measurement and performance accountability.
8. DAIL implemented screening for substance use disorders and suicidality by all DAIL staff with direct service responsibilities.
9. We successfully expanded and strengthened the DAIL Advisory Board, ensuring representation across our diverse populations to more effectively contribute to our future progress.

### Future Directions

As in the past, DAIL will continue to be engaged in a wide variety of activities across our divisions. These will include:

1. Continued work on Supported Decision Making, which helps people with disabilities or cognitive impairments to make informed and meaningful choices about their own lives while reducing the pressure to pursue guardianship.
2. An increased focus in DVR and DBVI on transition age youth and relevant performance measures, under changes in federal rules (WIOA). Continued expansion in DBVI for the Learn, Earn, and Prosper (LEAP) program for high school students. This includes workforce readiness training during school vacations.
3. Active participation and partnering in Vermont health reform including alignment with the All Payer Model (APM) and the Vermont Model of Care.

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Key considerations include person-centered care and service integration, with the goals of improving outcomes while controlling costs.

4. DAIL will continue efforts to address limited federal funding. Level funding in the Older Americans Act has not kept pace with the increasing numbers of Vermonters over the age of 60. In Vocational Rehabilitation, federal re-allotment funds were decreased by 76% (\$4.4 million).
5. Work on compliance and alignment with recent federal HCBS (Home and Community Based Services) rules that affect Choices for Care, Developmental Disabilities Services, and the Traumatic Brain Injury Program.
6. Revisions to the Vermont Home Health Agency licensing regulations.
7. Work with our own staff, partners and stakeholders to focus on performance measurement and performance accountability.
8. DAIL will continue to work with partners and stakeholders to plan for the demographic changes in our state. These changes include an aging population, increasing numbers of people with dementia, increasing numbers of working age people with disabilities, and increasing demands for a limited workforce including challenges in ensuring an adequate health and human services workforce.

### Results

DAIL continues to develop and improve our use of performance measures and performance accountability. The DAIL Performance Measures Scorecard includes highlight measures that document our performance:

<http://app.resultsscorecard.com/Scorecard/Embed/8865>

DAIL also contributes to the Agency of Human Services Scorecard. This Scorecard addresses the population-level outcomes of well-being for Vermonters established by the legislature, with indicators that quantify these outcomes. The Agency of Human Services collects and reports this population-level data annually to the Legislature through the Chief Performance Officer.

<https://app.resultsscorecard.com/Scorecard/Embed/8131>

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### Success Stories

#### Adult Services Division

##### *When at first you don't succeed....*

Judy (not her real name) was determined. When she first enrolled with the Money Follows the Person program (MFP) she had been in and out of nursing facilities multiple times. Unfortunately, the first time MFP helped Judy return home, after only two days back home with her husband, it was determined that Judy was in renal failure. She was immediately admitted to the hospital for treatment and went back into a nursing facility for rehabilitation. During her seven month stay in the nursing facility, Judy was educated about her new medical condition, learned how to manage a renal diet, lost several pounds of fluid and gained some of her strength back.

After Judy's last readmission to the nursing facility, Judy was determined to try returning home again. However, this time was different. With help from the MFP team and partner agencies, not only did her husband become more involved in her discharge planning process, he was educated about Judy's care plan and they modified their home so she could enter her own bedroom in her wheelchair. This also gave her a private space to store her medical equipment and personal belonging. This was very important to her and she now feels like she's "home".

Judy is very happy to be home. She is enrolled on the Choices for Care program and manages her own Flexible Choices budget. This allows her to hire and supervise her own caregivers. Judy also attends dialysis three times a week and her short-term goal is to attend the adult day center just down the street from her home. There she will be able to socialize and meet other people under the supervision of a nurse and trained caregivers. Judy's long-term goal is to someday move to Florida near her sister. Her determination shows that if you keep trying, your goals can be achieved!

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### ***Fulfilling a Promise...***

Joellen Valley, a long-standing member of the Attendant Services Program (ASP) Eligibility Committee, DAIL Advisory Board and vocal advocate for people living with disabilities, recently passed away surrounded by her caregivers, Hospice folks, and neighbors. Just prior to her passing, an ASD clinical coordinator nurse had the privilege of visiting with Joellen and shared her story.

“I had an opportunity to sit and visit with Joellen before she died. When I arrived, she said “Oh Maura, I’m so glad you’re here!” But she didn’t smile – instead she wrinkled her eyebrows and forehead.

Joellen didn’t have much energy at that point, and she stopped and closed her eyes periodically. She asked that I make sure to say “thank-you” to all her ASP friends. She wanted to make sure that I didn’t forget Mary Collins, Gordon Bullard, as well as all the nurses who had visited her, or whom she had met at Committee meetings over the years. I just sat and held her hand for a while. After a moment or so, Joellen opened her eyes again, and said “Now you make sure you tell them, OK?” I said “I absolutely will Joellen.” At that point, I noticed that her eyebrows were no longer wrinkled and she relaxed and smiled. It was as if she had checked off a box on a list of important things to do. When it appeared as though she had drifted back to sleep, I got up to leave. She squeezed my hand and said “Thank you so much”.

So, I’m fulfilling my promise to Joellen. I sometimes think we underestimate how much we mean to the people we work with. It’s times like these that remind me now and again...”

Joellen, you will be missed and remembered for all of your valuable contributions to Vermonters.



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### Success Stories

#### Division for the Blind and Visually Impaired

##### *Sherry's Story....*



Sherry has been blind since birth, wears prosthetic eyes and is hearing impaired. She is a Braille reader, a JAWS user and an expert white cane user.

Sherry came to Vermont from Missouri in April of 2013 with nothing but two suitcases and a broken ankle. She had followed her ex-husband who had custody of her children, so she could establish and execute visitation rights.

While staying at Jen's motel, Sherry was referred to and applied for DBVI services. She enrolled in the Homemaker program and received services and aids to further her goal of managing her household and caring for herself and her children. Those services included hearing aids, Rehabilitation Teaching, Low Vision aids and Orientation and Mobility services.

After reaching her goals in the homemaker program, which included moving into an efficiency apartment and receiving treatment for chronic back pain, Sherry decided that she was ready for gainful employment. She had limited work experience and wanted to move forward in her life, so she enrolled in DBVI's VR program in July of 2015.

Since then, she has worked in partnership with her DBVI Rehabilitation Counselor and VABIR job development services in preparation for her first work experience. In December of 2015, Sherry moved from her efficiency into a one bedroom apartment to make visitation from her children easier.

In her new program, Sherry received many services with which to increase her independence and enable her to work toward employment. She received an assistive technology evaluation, a refurbished computer through Resource, an updated JAWS program, a bar code reader, a Braille, Open Book Optical Character Recognition software and a Pearl camera. She also received iPhone training from DBVI's technology trainer who helped Sherry download several helpful apps.

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With the help of the DBVI, VABVI and VABIR teams, Sherry began a work experience in May of 2016 with Goodwill Industries of the Berkshires, Inc. in Rutland. The VABVI Orientation & Mobility (O&M) instructor provided an orientation to the workplace and support to access public transportation. Sherry's job was hanging clothes. She did so well that they hired her. However, she needed a Vermont Nondriver ID. After a great deal of red tape navigation, Sherry received her ID just in time for her hire date.

In an email received from Thomas Kessop Jr. (TJ), Rutland Goodwill manager in July of 2016, he had this to say; "I would like to take the opportunity to thank you and your staff for placing Sherry with our organization. Sherry fits right in, extremely hard working and an excellent team player. We are proud that we can call her one of our employees. The truth is we are here to change lives, but Sherry has changed many of ours. She is an asset to us."

To help his staff better understand blindness, TJ invited the VABVI O&M instructor and DBVI Rehabilitation Counselor to present a training on human guide technique and blind etiquette.

Since her hire, Sherry's job has expanded to cleaning up the sales floor, sorting donations, matching shoes, greeting at the door and bagging. She received an award as Employee of the week in September of 2016 and will be receiving a more formal award for outstanding work ethic.

Amidst all this, in July of 2016, Sherry underwent corrective surgery to better align her prosthetic eyes. Then in the early part of October of 2016, Sherry's daughter moved in with her and they are now searching for larger accommodations.

Sherry's new status amongst the employed now enables her to afford the comforts of life that before were out of reach!

This successful placement has inspired TJ to offer a work experience to another DBVI client!

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### Success Stories

#### Developmental Disabilities Services Division

JOEL'S STORY - About 10 years ago, Joel came onto guardianship through the Office of Public Guardian (OPG). He was just 18 years old and a new world opened to him. Prior to guardianship Joel lived with his birth mother and had had few opportunities for new experiences. Joel has thrived with the support of his guardian and home providers. He's learned how to make good choices, sound decisions and gained the skills he needs to plan for his future.

Some of Joel's accomplishments include:

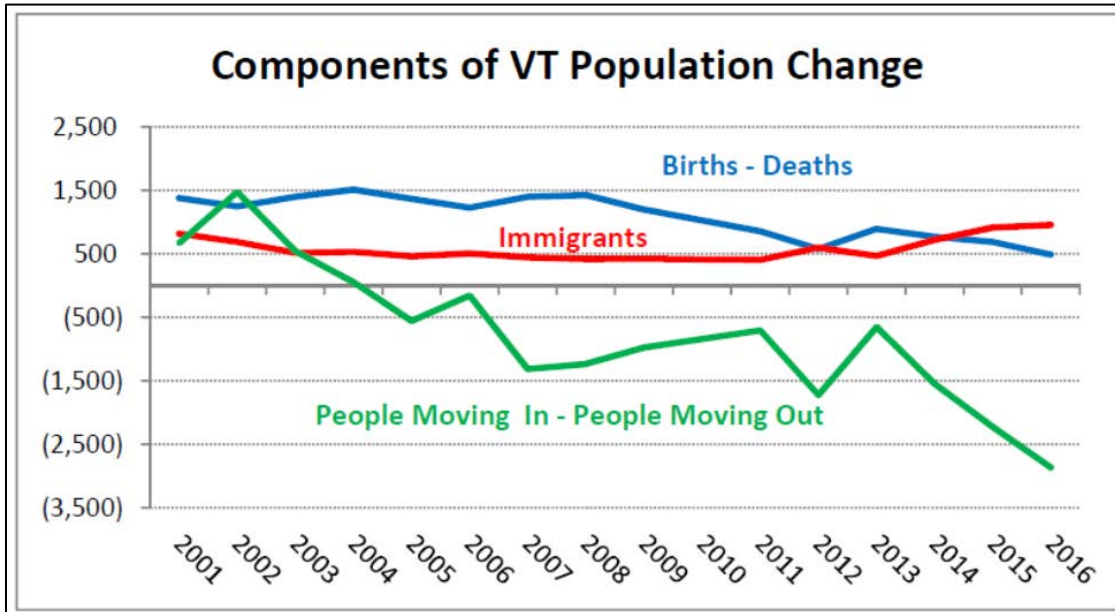
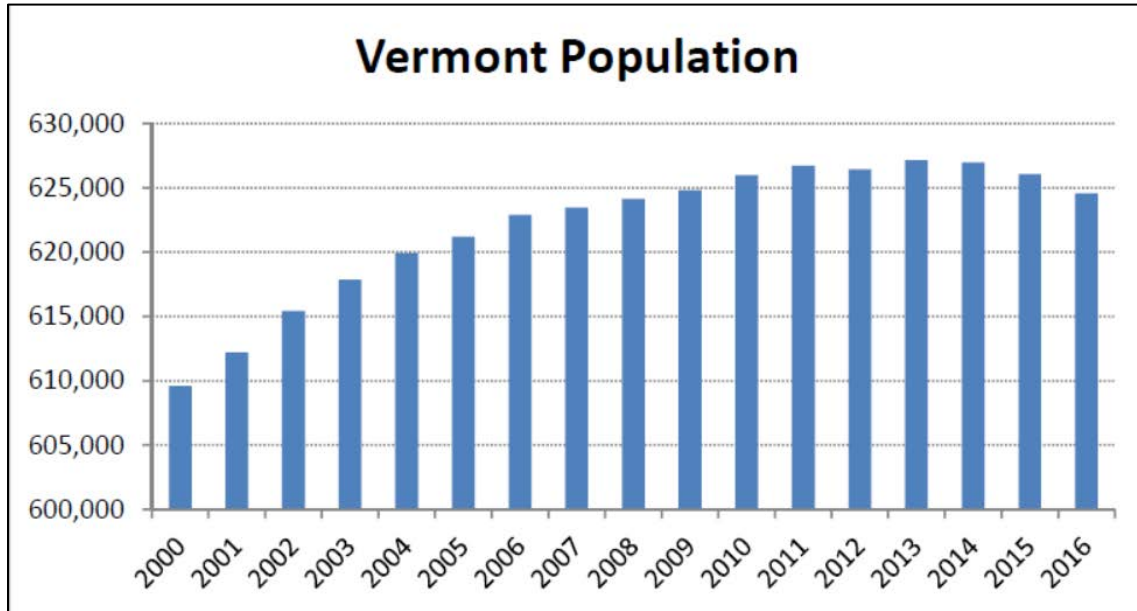
- Obtaining his high school diploma.
- Entering the workforce and maintaining successful employment.
- Graduating from Castleton State College's College Steps program with a 2-year degree in business.
- Passing his driver's test, obtaining his license and becoming an experienced driver. His home provider was a patient teacher, spending many hours teaching him how to become a safe driver.
- Becoming a seasoned traveler with a national non-profit sponsor of travel opportunities for people with disabilities. He's even become a leader within the organization helping plan and organize a pinball tournament.
- Giving back to his community as a volunteer, including serving as an usher at a local theater.

Joel is a social guy and makes friends wherever he goes. He's an active participant in the local Italian Club, dining there once a week. He enjoys events sponsored by his local agency, especially the social gatherings where he and his girlfriend meet up to dance. Joel has also reconnected with his mother and maintains a good relationship with her. Becoming independent has always been Joel's most important goal. It is his dream that he no longer has a guardian. Working with his guardian and home providers he has petitioned the Court to do just that. It is expected that the Court will grant Joel's petition sometime this fall. Joel deserves full credit for persevering and making it happen!

## Facts and Figures

### Vermont's Population is Not Growing...But Growing Older...

As recently observed by Art Woolf in the Burlington Free Press, Vermont's population has decreased each year since 2013. This is the result of a low birth rate, increased migration from Vermont to other states, and modest migration from other states to Vermont. Immigration from other countries has helped to offset this decrease.



<http://www.burlingtonfreepress.com/story/money/2016/12/29/vermont-population-declining-out-migration-art-woolf/95886408/>



## Facts and Figures

At the same time, the number of older Vermonters has increased, and is expected to continue to increase. A recent AARP report predicts that the number of Vermonters over the age of 85 will increase dramatically, from about 14,000 people in 2012 to about 47,000 people in 2050. Because this age group is most likely to need support services, partly due to a high prevalence of dementia, this can be expected to lead to increased demand for support services and a caregiving workforce.

Population & Projections	Year	State Pop. (1,000s)	% of Total Population	Rank	U.S.	% Change from 2012	Rank	U.S.
All ages	2012	620		50	315,311			
	2032	722		51	376,660	+16%	36	+19%
	2050	803		51	434,447	+29%	38	+38%
Age 50-64	2012	144	23.2%	1	19.2%			
	2032	114	15.8%	36	16.4%	-21%	50	+2%
	2050	161	20.0%	2	16.6%	+12%	39	+19%
Age 65+	2012	99	15.9%	4	13.6%			
	2032	172	23.8%	1	19.8%	+74%	18	+74%
	2050	175	21.8%	5	20.4%	+77%	44	+107%
Age 65-74	2012	55	8.9%	4	7.4%			
	2032	85	11.8%	2	10.1%	+53%	31	+64%
	2050	73	9.1%	26	9.1%	+32%	49	+69%
Age 75-84	2012	29	4.7%	7	4.2%			
	2032	62	8.6%	1	6.8%	+111%	13	+94%
	2050	55	6.9%	7	6.6%	+89%	31	+116%
Age 85+	2012	14	2.3%	10	2.0%			
	2032	25	3.5%	3	2.9%	+77%	19	+69%
	2050	47	5.8%	2	4.8%	+230%	20	+224%

Ari Houser, Wendy Fox-Grage, and Kathleen Ujvari. *Across the States: Profiles of Long Term Services and Supports, 2012: Vermont*. AARP Public Policy Institute. Washington DC  
[http://assets.aarp.org/rgcenter/health/state\\_ltc\\_b\\_09\\_vt.pdf](http://assets.aarp.org/rgcenter/health/state_ltc_b_09_vt.pdf)

### ...With Increasing Rates of Disability Among Working Age Vermonters

Vermont has high rates of disability among working age adults. The Vermont Legislative Joint Fiscal Office (JFO) reported that in 2013, New Hampshire, Vermont, and Maine had the highest rates of adults under age 35 enrolled in the Social Security Disability Insurance (SSDI) program among all the states. Between 2000 and 2013 the shares of people on SSDI under age 35 and ages 35 to 44 in northern New England rose almost four times as fast as the increase in the national average. The share of the population on SSDI among people ages 45 to

## Facts and Figures

54 rose twice as fast as the national average. The JFO report concluded: “Recognizing the relatively high rates of young people on the SSDI program may provide more reasons to invest in enhancing job opportunities and work supports as well as strengthening educational opportunities and policies that will alleviate drug abuse and keep people off the program. In addition, policymakers may want to ask whether more can be done to help people already on the SSDI program move beyond that reliance and return to the work force.”

[http://www.leg.state.vt.us/jfo/issue\\_briefs\\_and\\_memos/SSDI\\_Prevalence\\_Issue\\_Brief.pdf](http://www.leg.state.vt.us/jfo/issue_briefs_and_memos/SSDI_Prevalence_Issue_Brief.pdf)

### Senior Health: Strengths and Challenges

The United Health Foundation produces an annual senior health ranking report, with data for each state. While Vermont was ranked #2 overall, ‘headline’ facts from the 2016 report show a mixture of strengths and challenges for older Vermonters:

#### Strengths:

- Low prevalence of smoking
- High Supplemental Nutrition Assistance Program (SNAP) enrollment
- High health status

#### Challenges:

- Low hospice care use
- High prevalence of excessive drinking
- High prevalence of falls

#### Highlights:

- In the past year, smoking decreased 22% from 7.4% to 5.8% of adults aged 65+.
- In the past year, food insecurity increased 24% from 12.3% to 15.3% of adults aged 60+.
- In the past 2 years, geriatrician shortfall increased 40% from 43.6% to 61.2% of needed geriatricians.
- In the past 2 years, hip fractures decreased 25% from 6.9 to 5.2 hospitalizations per 1,000 Medicare beneficiaries.
- In the past 3 years, hospice care use increased 46% from 23.5% to 34.4% of decedents aged 65+.

[http://www.americashealthrankings.org/explore/2016-senior-report/measure/overall\\_sr/state/VT](http://www.americashealthrankings.org/explore/2016-senior-report/measure/overall_sr/state/VT)

## Facts and Figures

### Increasing Rates of Dementia...with a Growing Need for Family Caregivers

The Alzheimer's Association estimates that 12,000 Vermonters over the age of 65 had Alzheimer's disease in 2016- and that this number will increase about 42% to 17,000 Vermonters by 2025. In 2013, Alzheimer's disease was the fifth leading cause of death in Vermont. People with dementia often rely on friends and family to provide care. An estimated 30,000 caregivers provided about 34,000,000 hours of unpaid care to people with dementia in 2015. Support provided to family caregivers helps improve the quality of life for both people with dementia and their family members; this support can also delay the need for costly publicly funded services including nursing home care. AARP estimated that in 2015, 34 million adults in the United States had been a caregiver to an adult age 50 or older in the prior 12 months- thus about 14% of all American adults were caregivers to someone age 50 or older.

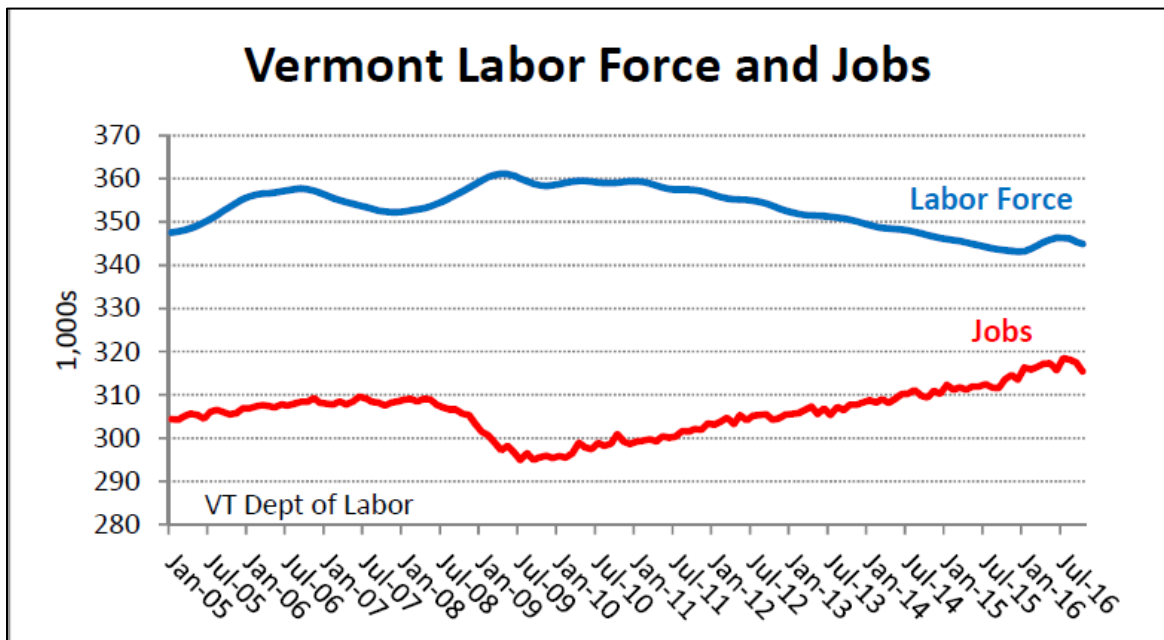
[http://www.alz.org/documents\\_custom/facts\\_2016/statesheet\\_vermont.pdf](http://www.alz.org/documents_custom/facts_2016/statesheet_vermont.pdf)

<http://www.aarp.org/content/dam/aarp/ppi/2015/caregiving-in-the-united-states-2015-report-revised.pdf>

### Workforce: A Demographic Challenge

Recent data from the Vermont Department of Labor suggests that we face an increasing demographic challenge. While the labor force has decreased, the demand for workers has increased. This is particularly acute in health and human services, because the demand for workers in these jobs is increasing faster than for most other jobs. In March 2016, the Vermont Department of Labor projected new job openings for the occupations with the most new job openings in Vermont between 2015 and 2017. The projected openings include registered nurses (n=268), personal care aides (n=224), nursing assistants (n=102), and social and human service assistants (n=82). Combined with a limited labor force, level funding, low wages, and sometimes difficult working conditions, we are likely to face an increasing workforce crisis across our systems of care. Art Woolf in the [Burlington Free Press](#).

## Facts and Figures



<http://www.vtلمي.info/projst.pdf#page=2>

<http://www.burlingtonfreepress.com/story/money/2016/12/29/vermont-population-declining-out-migration-art-woolf/95886408/>; <https://www.scribd.com/document/332801654/Comparison-of-Vermont-s-job-force-and-employment-trends>

### Employment of Older Workers

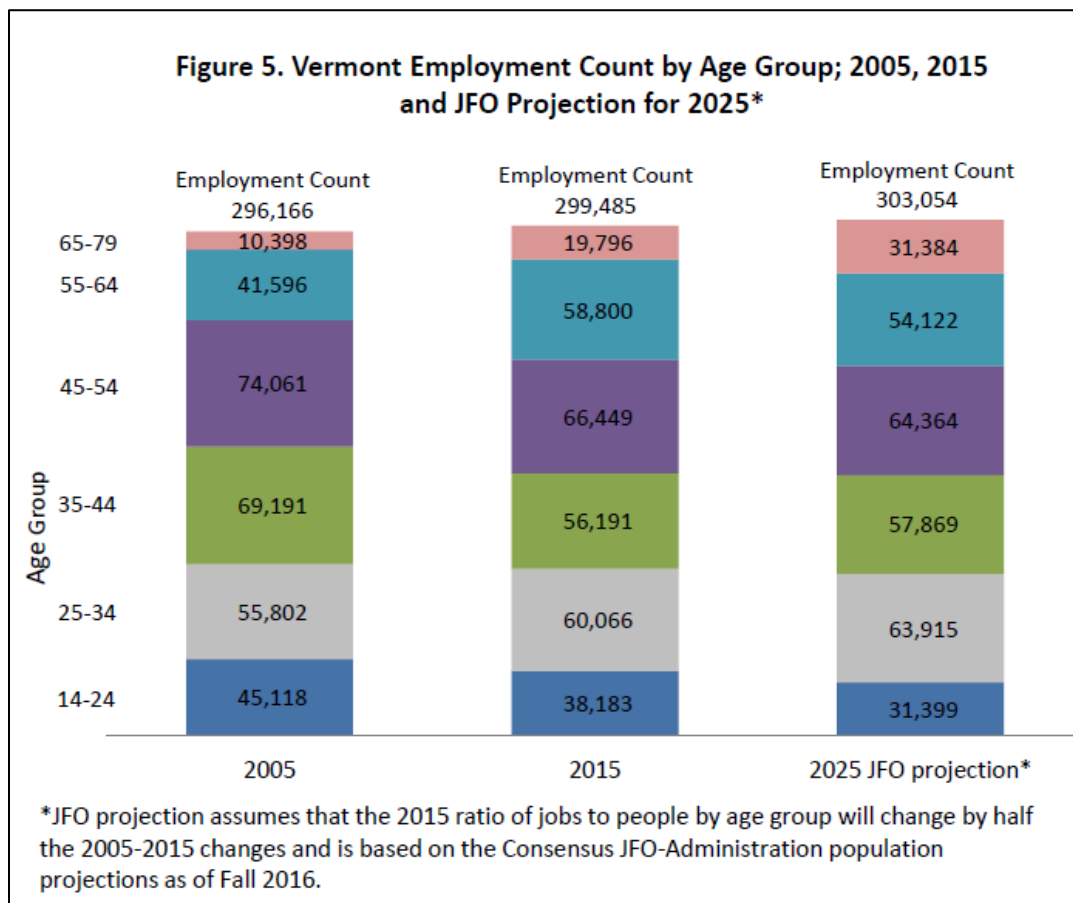
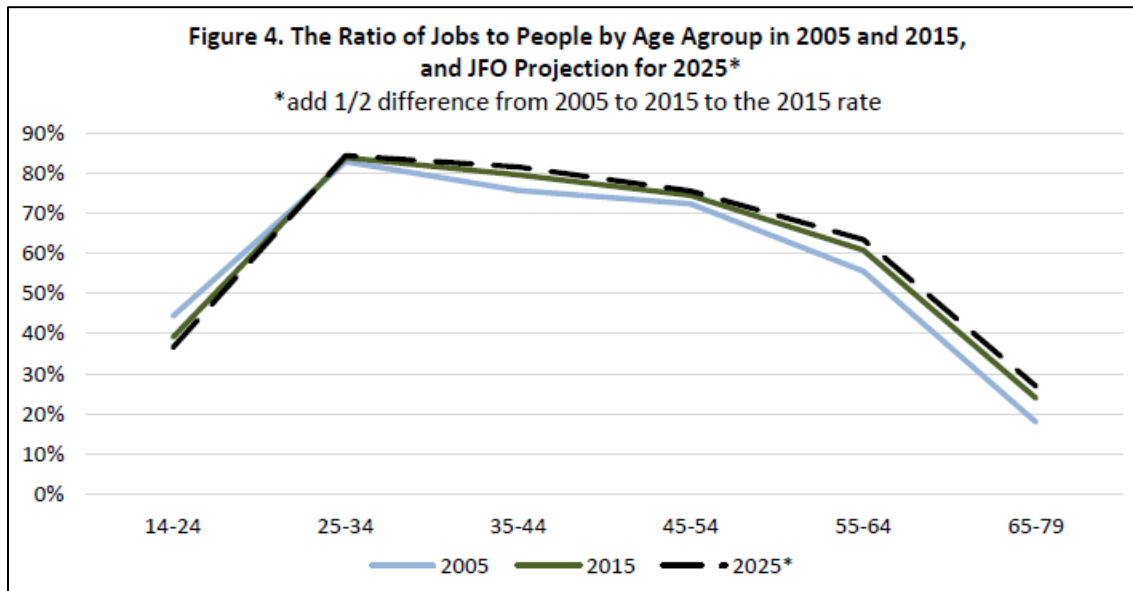
Vermont places great value on the many positive contributions of our older citizens. When older Vermonters maintain their health, and remain active in their communities, it has a positive impact on the State's economic sustainability and improves their physical, mental and financial well-being. This also helps to address our state's workforce challenges.

Joyce Manchester from the Vermont Legislative Joint Fiscal Office recently published an issue brief regarding employment by age. Between 2005 and 2015, the share of jobs held by people age 55 to 64 rose from about 14 percent to almost 20 percent, and the share for people age 65 or older almost doubled from 3.5 percent to almost 7 percent. Employment among older people rose for two reasons: an increase in the number of older people, and a greater likelihood of an older person having a job. The report predicts that the number of jobs held by people age 65 and older will continue to increase, and that this will help to offset a decrease in the number of younger workers. Without the older workers,



## Facts and Figures

Vermont’s employment count would shrink significantly. This illustrates the importance of people age 65 or older in the Vermont labor market.



[http://www.leg.state.vt.us/jfo/issue\\_briefs\\_and\\_memos/Vermont's%20Jobs%20Filled%20By%20Age%20Group%20ofinal.pdf](http://www.leg.state.vt.us/jfo/issue_briefs_and_memos/Vermont's%20Jobs%20Filled%20By%20Age%20Group%20ofinal.pdf)



## Facts and Figures

The Agency of Commerce and Community Development (ACCD) and the Vermont Department of Labor (VDOL) co-sponsored the Governor's Award for Business Excellence in Supporting Mature Workers. In partnership with the Governor's Commission on Successful Aging, the award recognizes Vermont employers who demonstrate exceptional commitment to employment practices that benefit and support the inclusion and retention of mature workers. Seven Vermont businesses earned this award in 2016. Three businesses received plaques: Bond Auto Parts, Inc. for its recruitment and retention policies, the Visiting Nurse Association of Chittenden and Grand Isle Counties for its training and skill development opportunities, and Biebel Builders, Inc. for its work schedule flexibility and accommodation. Four businesses that received certificates of recognition are: Home Instead Senior Care, Vermont VA Federal Credit Union, Hanover Consumer Cooperative and the Vermont Student Assistance Corporation.

### Employment of People with Disabilities

Vermont has been highly successful in supporting community employment for people with developmental disabilities. The employment rate among people age 18 to 64 who are served by Developmental Disabilities Services Home and Community Based Services (HCBS) is nearly 50%. National Core Indicator interviews of consumers found that over 40% of the people served by Developmental Disabilities Services HCBS have a paid job in the community, the highest rate in the United States. [http://www.nationalcoreindicators.org/upload/state-reports/2014-15\\_ACS\\_Vermont\\_Report.pdf](http://www.nationalcoreindicators.org/upload/state-reports/2014-15_ACS_Vermont_Report.pdf); <http://app.resultsscorecard.com/Program/Embed/14904>

### Post-Secondary Education for People with Developmental Disabilities

In partnership with community providers, DAIL has developed options for post-secondary education for people with developmental disabilities. Three organizations (Think College Vermont, College Steps and SUCCEED) help youth to integrate into post-secondary coursework at collaborating colleges; the latter of which specializes in teaching independent living skills in a transitional living model. A fourth program (Project Search) matches students who are in their final year of high school with internships located within host businesses where they learn multifaceted skills that lead to employment at graduation. These four youth transition programs have collectively enabled young adults to live independently

## Facts and Figures

and/or attain occupations in media, public relations, human resources, data entry, baking, and human services. As of June 2016, 46 young adults had graduated from these programs and 38 were employed at graduation for an 83% graduation rate.

## Adult Services Division

### Division Philosophy

The Adult Services Division (ASD) supports older Vermonters and adults with physical disabilities to live as they choose, pursuing their individual goals and preferences within their chosen communities.

### Division Overview

ASD is responsible for a full array of long-term services and supports for older Vermonters and adults with physical disabilities. The primary focus is on managing Medicaid funded long-term services and supports and as well as services provided through the Older American's Act and Vermont's State Plan on Aging.

### Staff and Partners

ASD operates with 38 employees located within the Central Office in Waterbury and regionally within district offices. Services are managed within three units: Long-Term Services & Supports Unit, Quality Management Unit and State Unit on Aging.

ASD partners with a wide variety of organizations in managing services for Vermonters. Partners include:

- Adult Day Centers
- Aging and Disabilities Resource Connections
- Area Agencies on Aging
- Designated Agencies and Specialized Services Agencies
- Home Health Agencies
- Nursing Facilities
- Residential Care Homes & Assisted Living Residences
- State Long Term Care Ombudsman
- Vermont Center for Independent Living

### Recent Developments and Accomplishments

In November 2015, the State Unit on Aging was reorganized within ASD. This created a consolidated team of experts who are better able to address the needs of Older American's Act services and advocate for people living in Vermont.

## Adult Services Division

In 2015, the Department of Labor changed its regulations regarding wages and overtime for self-directed attendant care. This change required a swift and dramatic change to the way Choices for Care and Attendant Services Program's services are authorized and paid for. Because of this work, the ASD team was recognized with a DAIL Commissioner's Team Award and Sara Lane with a Governor's Public Service Recognition Week award.

January 2016, the TBI program was transitioned to ASD, providing the opportunity to streamline access for Vermonters, improve quality outcomes across settings and ensure consistency with new home and community-based (HCBS) regulatory requirements.

In 2016, the State changed how nurse positions are classified, creating a more competitive market. This helped ASD recruit and maintain the clinical RN positions that are critical to helping people access to Medicaid funded long-term services and supports.

In July 2016, minimum wages for self-directed services were increased through the State's Collective Bargaining Agreement from \$10.80/hour to \$11.04/hour. In September 2016, Medicaid rates for Choices for Care home-based and Enhanced Residential Care were also increased by approximately 2%.

### Future Directions

ASD continues to prioritize work related to new Federal Regulations for Home and Community-Based Services (HCBS). Focus remains on assuring all home-based settings meet specific characteristics regarding participant rights, freedoms and community participation in addition to person-centered planning standards. A Choices for Care and TBI Program Alignment Report and work plan submitted to the Centers for Medicare and Medicaid Services (CMS) will guide the process within Vermont's Global Commitment Comprehensive Quality Strategy.

In 2017, ASD will be joining the National Core Indicators (NCI) for Aging & Disabilities. This will provide an opportunity to survey Vermonters in alignment with national standards of performance accountability.

As ASD wraps up its first year managing the Older American's Act and TBI Program, it will spend time creating a comprehensive inventory of ASD programs

## Adult Services Division

and performance measures that align with AHS and Department goals. The inventory will help inform a new public-facing ASD Scorecard, which will be in a new ASD website being launched by December 2016.

### Programs and Services

Medicaid Funded Long-Term Services & Supports Programs:

- Adult Day Health Rehabilitation
- Adult High Technology Program
- Attendant Services Program
- Choices for Care
- Traumatic Brain Injury Program

Older American's Act (OAA) Services through Area Agencies on Aging include:

- Case management
- Nutrition Services and Programs
- Flex Funds (State funded only)
- Health Promotion and Disease Prevention
- Information, Referral and Assistance
- Legal Assistance
- Family Caregiver Support and
- Volunteer Outreach (State funded only)

Federal & State funded grants & contracts include:

- Aging & Disabilities Resource Connections – No Wrong Door (ADRC)
- Commodity Supplemental Foods
- Dementia Respite funds
- Employer Payroll Support for Self-Directed Services
- Health Insurance Counseling & Support (SHIP/MIPPA)
- Home Delivered Meals for People Under 60
- Long-Term Care Ombudsman Program
- Nursing Facility Quality
- Online Worker Registry
- Self-Neglect Initiative
- Senior Farmer's Market

Special projects include:

- Companion Aide Project

## Adult Services Division

- Federal HCBS Regulations Assessment & Implementation Project
- Governor's Commission on Alzheimer's and Related Disorders
- Money Follows the Person Project
- Substance Abuse Treatment Initiative

### Results

ASD strives to utilize the Results Based Accountability (RBA) framework throughout the work we do. As of 2015, all Medicaid services, including Choices for Care, are managed through the State [Global Commitment to Health 1115 Waiver](#) and the accompanying [Comprehensive Quality Strategy](#). Additionally, all State contracts and grants require RBA performance measures and ASD is participating in a pilot to improve this work.

As ASD continues to finalize a public-facing performance accountability [Scorecard](#), priority has been given to: a) programs with measures already required by State Legislation, b) programs with high profile and/or high budget and c) programs or work with performance improvement needs.

Therefore, the ASD [Scorecard](#) is being refined to focus on six areas:

- Contracts & Grants Management
- Choices for Care Program
- Money Follows the Person Project
- Traumatic Brain Injury Program
- Area Agency on Aging Home Delivered Meals
- Substance Abuse & Misuse in Older Vermonters

## Adult Services Division – Choices for Care

### Program Overview

Choices for Care (CFC) is a program covered under [Vermont's Global Commitment to Health 1115 Waiver](#). CFC offers long-term services and supports to adult Vermonters who need nursing home level of care and who also need Vermont Medicaid to help pay for services. If a person is found clinically and financially eligible, they may choose where they want to receive their services whether it is in their own home, the home of another person or in a licensed residential care home, assisted living residence or nursing facility.

### Staff and Partners

The Long-Term Services and Supports Unit manages Choices for Care and includes 20 staff, 15 whom are regionally located to manage applications and clinical eligibility for people in their regions.

Partners who provide direct services under CFC are many and include:

- Adult Day Providers
- Adult Family Care Authorized Agencies
- Area Agencies on Aging
- ARIS Solutions (employer payroll services)
- Designated Home Health Agencies
- Licensed Residential Care and Assisted Living Residences
- Licensed Nursing Facilities
- Providers of Personal Emergency Response Services
- Traumatic Brain Injury Providers

### Recent Developments and Accomplishments

A large focus this year has been on the new federal regulations for [Home and Community-Based Services \(HCBS\)](#) settings characteristics and person-centered planning. A systemic evaluation and work plan was developed for CFC through a public process which led to a strengthening the certification standards for Adult Day and Case Management providers and program standards for Adult Family Care.

In July 2016, the minimum wage for all self-directed employees increased from \$10.80 to \$11.04 per hour. Additionally, the CFC home-based and Enhanced Residential Care services rates were increased by 2% September 1, 2016.

The Companion Aide Project, which provides an enhanced Medicaid rate to four Nursing Facilities to improve the lives of people with Alzheimer's and related



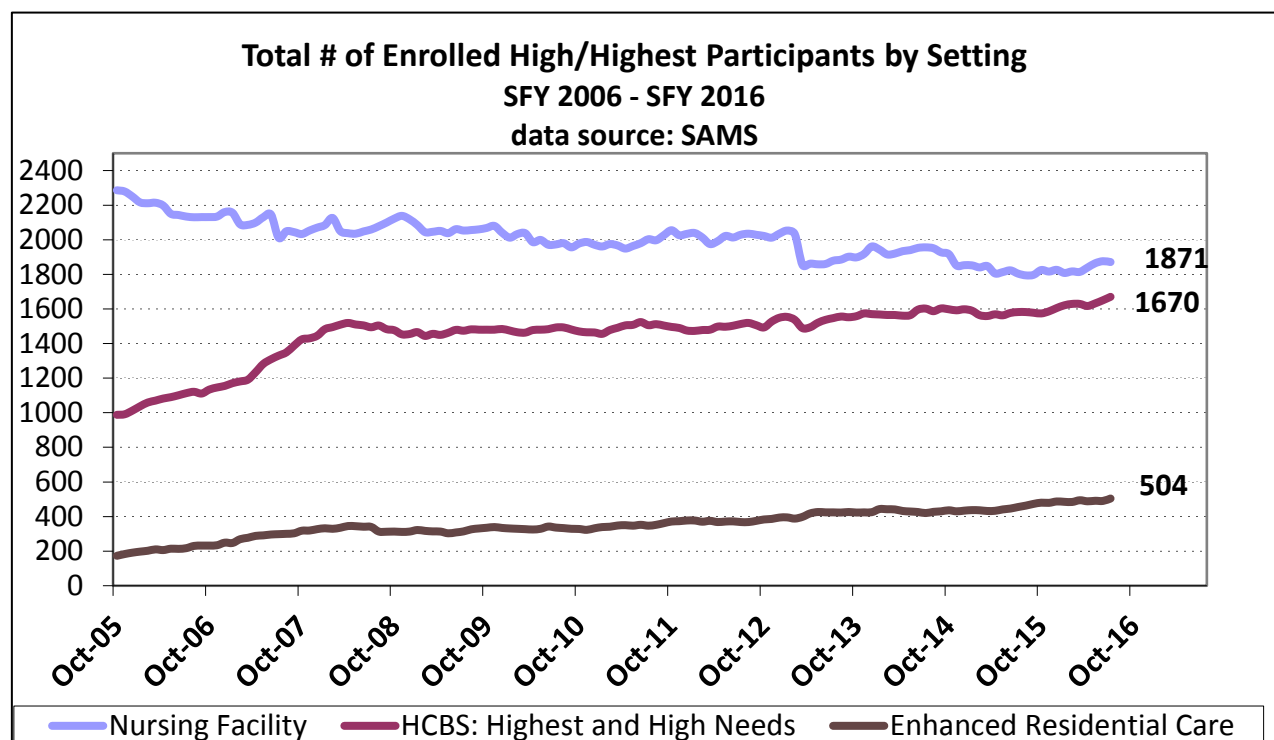
## Adult Services Division – Choices for Care

disorders living in nursing facilities, was nationally recognized for its innovation by the [National Association of States United on Aging & Disabilities](#) (NASUAD).

### Future Directions

- Work will continue the HCBS regulations as it related to home-based setting requirements and person-centered planning.
- Will join the [National Core Indicators for Aging & Disabilities](#) next in 2017.
- Will continue as a primary focus of the State's Medicaid Pathway work from Act 113.

### Results



- 46% of all High/Highest enrollments were in the Nursing Facility setting (1% decline from SFY15)
- 1467 people were enrolled in Moderate Needs services (7% decrease due to reduced funding) and provider wait lists increased to over 600 people
- As of June 2016, 94% of High/Highest clinical eligibility determinations were made within 30 days. The target is 95%.
- [Consumer survey \(2015\)](#) indicated that 85% of people receiving personal care state their choice and control over planning is excellent or good.
- [Consumer survey \(2015\)](#) indicated that 90% of people receiving personal care say the degree that services met their daily needs is excellent or good.

## Adult Services Division – Older American’s Act Nutrition Programs

### Program Overview

[Older Americans Act \(OAA\)](#) services support Vermonters age 60 and older and are designed to help older Vermonters remain as independent as possible and to experience a high quality of life. OAA services are provided through Vermont’s five Area Agencies on Aging (AAA) and include case management; nutrition services and programs; health promotion and disease prevention; information, referral and assistance; legal assistance; and family caregiver support. This summary focuses on the OAA Nutrition Programs for people 60 and over referred to as Home Delivered Meals and Congregate Meals.

Home Delivered Meals and Congregate Meals contribute to the food security of older adults and can play an important role in promoting good health, preventing disease, and lowering rates of disability, hospitalization, depression and mortality. According to the [USDA](#), over 8% of Vermont senior households are food insecure; over 17,000 are threatened by hunger, and nearly 40,000 are isolated and live alone. The demand for senior meals is growing. Efforts are being made at the federal, state and local levels to strengthen meal programs and develop innovations in nutrition services.

### Staff and Partners

The Adult Services Division (ASD) State Unit on Aging (SUA) manages the OAA and related services. The unit consists of five staff that manage nine different grants, five area plans and the VT State Plan on Aging. The OAA Nutrition Program partners include the VT Association of Area Agencies on Aging (V4A) and its five member agencies:

- [Age Well](#)
- [Central Vermont Council on Aging](#)
- [Northeast Kingdom Council on Aging](#)
- [Senior Solutions](#)
- [Southwestern Vermont Council on Aging](#)

Each agency then works with a network of meal providers who prepare nutritious meals. Meals are delivered by hundreds of volunteers across the state every day.

## Adult Services Division – Older American’s Act Nutrition Programs

### Recent Developments and Accomplishments

In 2015, 30,000 more home delivered meals were provided than the year before. The SUA continues to work closely with the AAAs to monitor the growing demand for meals across the state and find creative ways to serve more people with limited funding, including streamlining transportation, closing under-performing congregate sites, increasing local and private fundraising efforts, no longer providing “blizzard bags” for emergencies and encouraging the use of home delivered meals by people enrolled on Choices for Care and Attendant Services Program.

### Future Directions

With limited funding, an aging population and growing need, we anticipate that some agencies will need to institute a waiting list in the near future. In preparation, the AAAs have worked closely with SUA staff to develop a nutritional risk screening tool within the home-delivered meals intake form. This will allow the agencies to prioritize meals for those at highest risk of food insecurity and malnutrition if a waiting list is instituted. Southwestern Vermont Council on Aging has been piloting the screening tool and the plan is for all five agencies to use it over the next year.

### Results

In Federal Fiscal Year 2015: 4,910 Vermonters received home delivered meals (4% increase). 814,802 meals were delivered to people’s homes (4% increase). 11,095 Vermonters participated in community meals (4% increase), receiving 369,571 meals across the state (4% decrease).

While the number of people served continues to climb, the SUA and the AAAs are interested in better illustrating the real health impact and financial value of home delivered meals. In spring 2016, the five AAAs came together with DAIL to develop statewide program performance measures to help us to better measure success, improve performance, and ultimately increase quality of life for vulnerable older Vermonters. The nutrition program measures that the five agencies have agreed to track are:

- The number and percentage of home delivered meals clients who report they have enough to eat
- The number and percentage of home delivered meals clients who report that meals help manage or improve their medical condition

## Developmental Disabilities Services Division

### Division Philosophy

The Developmental Disabilities Services Division (DDSD) helps people to make choices and to direct their own lives; pursuing their own choices, goals, aspirations and preferences. To be effective and efficient, services must be individualized to the capacities, needs, and values of each person. Everyone can make decisions for themselves, can live in typical homes, and can contribute as citizens to the communities where they live. Our communities are stronger when everyone is included.

### Division Overview

DDSD plans, coordinates, administers, monitors and evaluates state and federally funded services for people with developmental disabilities and their families within Vermont. We provide funding for services, systems planning, technical assistance, training, quality assurance, program monitoring and standards compliance. We also exercise guardianship on behalf of the commissioner for people who are under court-ordered public guardianship.

### Staff and Partners

Our work is carried out by a Quality Management Unit of six personnel, a Specialist Services unit of six staff and twenty-seven guardians within our Office of Public Guardianship.

Our division contracts directly with fifteen private, non-profit developmental disabilities services providers who provide services to people with developmental disabilities and their families. Services and supports offered emphasize the development of community capacities to meet the needs of all individuals regardless of severity of disability. DDSD works with all people concerned with the delivery of services: people with disabilities, families, guardians, advocates, service providers, the State Program Standing Committee for Developmental Services and state and federal governments to ensure that programs continue to meet the changing needs of people with developmental disabilities and their families.

## Developmental Disabilities Services Division

### Recent Developments and Accomplishments

Our Division's Supported Employment Program has been recognized by the Zero Project, based in Vienna, Austria, for the ZERO PROJECT INNOVATIVE POLICY 2017 award. Vermont has been awarded this recognition after the Project reviewed 48 nominations from almost 30 different countries across the world. The recognition focuses on aspects of our DD Act and how we transition from a workshop model into full community integrated employment options.

### Future Directions

The division sponsored "Vermont Task Force on Supported Decision Making" is implementing a series of demonstration projects in preparation for their final report. With representation from multiple departments with the Agency of Human Services as well as the legal system and community providers, this group will be exploring and establishing practices that allow people to exercise their right to make important decisions about their lives. The approach of "supported decision making" includes an appreciation for the natural arc of experience in how we typically learn to make decisions and the way most people receive help in making those decisions from trusted friends and associates.

Our community agency partners will be exploring how supported employment staff can mentor businesses to assume the role of training and ongoing assistance of people with developmental disabilities beyond the natural supports already in place. The goal of this pilot program is to broaden our approaches to authentic inclusion and increased investment in the employee by their work team.

### Programs and Services

Community-based services are provided through our designated agency and specialized service agency partners. These include Service Coordination, Community Supports, Work Supports, Home Supports including 24-hour Shared Living, Staffed Living and Group Living, Supervised Living including hourly home supports in person's own home, Supervised Living involving hourly supports in the home of a family member. They can be managed by the agency, self-managed or managed by family members. Family Managed Respite is provided through designated agencies to offer families with a break from caring for their child with a disability. The Bridge Program is a service that provides support to families in need of care coordination to help them access and coordinate medical,

## Developmental Disabilities Services Division

educational, social or other services for their children with developmental disabilities. Targeted Case Management is a service that provides assessment, care planning, referral and monitoring. Flexible Family Funding provides funding for respite and goods for children and adults who live with their biological or adopted family or legal guardian. These funds are used at the discretion of the family for services and supports that benefit the individual and family.

### Results

The DDS Quality Services Reviews (QSRs) are intended to meet our commitment to the State of Vermont to monitor and review the quality of services provided using Federal and State home and community-based services (HCBS) funding. The purpose of the QSR is to ascertain the quality of the services provided by the Designated Agencies (DAs) and Specialized Services Agencies (SSAs) and to ensure that minimum standards are met with respect to DAIL DDS guidelines and policies for developmental disabilities services. The QSR is one component of a broader effort to maintain and improve the quality of services. Other components supported by the review team and DDS include monitoring and follow-up regarding Agency Designation, Medicaid and HCBS eligibility, Housing safety and accessibility inspections, Monitoring of critical incident reports, Grievance and appeal processing and investigations and Independent survey of consumer satisfaction.

Our division participates in the National Core Indicators project that applies a national standardized Adult Consumer Survey.

- 4 out of every 10 people have a paid job in the community
- 9 out of every 10 people who have a paid job said they like where they work
- 7 out of every 10 people said they have a best friend
- 8 out of every 10 people said they feel safe in their home, work and day activity
- 5 out of every 10 people said they have gone to a self-advocacy meeting

The 2016 Case for Inclusion report ranks the Vermont DDS as second in the nation based on a holistically ranking of the states; showing the sub-rankings of each state in 5 key outcome areas: Promoting Independence, Tracking Health,

## Developmental Disabilities Services Division

Safety & Quality of Life, Keeping Families Together, Promoting Productivity and Reaching Those in Need.

Our employment services have been recognized as a national model with a 77% increase in the number of people on the job over the past five-year period. Vermonters who experience disabilities are earning total wages of over \$4.3 million, yielded a potential tax contribution of \$666,739 from employees and their employers.

More Vermonters with disabilities are going on to post-secondary education than ever before and our THINK COLLEGE VERMONT, COLLEGE STEPS and SUCCEED programs are helping them get there. PROJECT SEARCH is a school-to-work youth transition program that matches students who are in their final year of high school with internships located within host businesses where they learn multifaceted skills that lead to employment at graduation. These four youth transition programs have enabled young adults to live independently and attain occupations in media, public relations, human resources, data entry, baking, and human services. Participating colleges include Castleton University, Johnson State College, Lyndon State College, Southern Vermont College and University of Vermont. For the 2016 academic year, the employment rate was 83% for these programs.

## Division of Licensing and Protection

### Division Philosophy

Balanced and assertive regulation of health care organizations ensure that vulnerable Vermonters receive care with dignity, respect, and independence. When vulnerable Vermonters are maltreated, there should be an effective investigation and protective services put in place to prevent additional harm.

### Division Overview

The Division of Licensing and Protection (DLP) has two branches that work to protect vulnerable adults and individuals receiving care:

- Survey and Certification (S&C) is the State Survey Agency for the State of Vermont, and in this role, they license and certify health care organizations to ensure they meet minimum state and federal regulatory compliance.
- Adult Protective Services (APS) investigates allegations of the abuse, neglect, and exploitation of vulnerable adults and implements protective services, as necessary, to limit future maltreatment.

### Staff and Partners

S&C has 21 employees, 18 of which are Registered Nurses who are federally trained and certified to perform investigations and surveys, 15 of which are home based and travel throughout the state to investigate complaints received and to perform recurring, scheduled surveys.

APS has 16 employees, 11 of which are home based investigators who travel throughout the state to investigate allegations of maltreatment of vulnerable adults. APS frequently partners with law enforcement agencies and human service providers in the performance of their investigations.

### Recent Developments and Accomplishments

S&C received a perfect score from the Center for Medicare and Medicaid Services (CMS) on their annual performance review. The review is based on an evaluation of S&C's surveys and investigations, and includes on site evaluations by CMS surveyors. This rating shows that the Vermont State Survey Agency is providing timely, appropriate, and balanced oversight to a wide range of facility types.

Also during this period, APS successfully completed the settlement agreement that had been the result of litigation against the State of Vermont for deficient



## Division of Licensing and Protection

practices. APS showed marked improvements across the full spectrum of their program, as determined by an external file review that measured performance across six quarters. The decision to end the settlement agreement was unanimous and was supported by the litigants who had brought the suit.

### Future Directions

APS found the external review process to be so beneficial they have continued the practice after the settlement agreement. The reviews have greatly enhanced APS' performance improvement process, and Vermont's APS program is the only one in the nation to conduct voluntary external reviews.

### Programs and Services

Both S&C and APS work to protect and serve vulnerable adults. Vulnerable adults are individuals who are over 18 years in age and are residents of a facility licensed by S&C, are residents of a psychiatric hospital, recipients of home health services, have a diminished capacity to care for themselves, or a diminished capacity to protect themselves from maltreatment.

- S&C conducts scheduled surveys at health care facilities, as well as investigating complaints made about the care received in these facilities. Their surveys and investigations can result in fines and other corrective action, up to revoking the license of an organization to operate.
- When APS discovers that a person maltreated a vulnerable adult, that person may be placed on the Adult Abuse Registry, which is used by organizations that serve children and vulnerable adults to check the backgrounds of employees and volunteers.

### Results

- S&C conducted 578 onsite investigations of health care organizations.
- S&C completed 100% of federal surveys on time.
- APS received 3,835 reports alleging the abuse, neglect, or exploitation of vulnerable adults, resulting in 1,139 investigations.
- APS placed 31 individuals on the Adult Abuse Registry.

## Division for the Blind and Visually Impaired

### Division Philosophy

DBVI assists individuals who are blind or visually impaired to meet their employment and independence goals. The focus of DBVI is to use a holistic rehabilitation approach that helps people to meet their goals, build new skills, and improve their circumstances. The goal is for all participants to achieve or sustain their economic independence, self-reliance, and social integration to a level consistent with their interests, abilities, and informed choices.

### Division Overview

DBVI's role is to help working age individuals to achieve economic independence by obtaining livable wage jobs and income. This involves supporting training for employment skills gains and higher education that leads to degrees or certificates. For high school students DBVI helps transition them from school to the world of work. For younger students DBVI has a statewide approach to ensure that all blind and visually impaired high school students are learning pre-employment transition skills. DBVI also helps individuals of all ages to build blindness related adaptive skills. These include assistive technology, low vision, orientation and mobility, and independent living skills.

### Staff and Partners

DBVI services are provided by highly qualified professionals who possess specialized training and understanding of the implications of visual loss. Services are provided by ten staff from regional field offices in Montpelier, Burlington, Springfield, and Rutland. Each office has a rehabilitation counselor and rehabilitation associate who are responsible for ensuring that appropriate services are delivered. One rehabilitation technology trainer covers the entire state teaching people how to use assistive technology. The Director of DBVI oversees the statewide program.

DBVI partners with several organization to accomplish our mission. Our major provider of direct instruction for teaching blindness related skills is the non-profit Vermont Association for the Blind and Visually Impaired (VABVI). Their staff include highly trained certified blindness professionals in the areas of Orientation and Mobility, Low Vision and Rehabilitation Therapists. For other DBVI partners please visit [www.dbvi.vermont.gov](http://www.dbvi.vermont.gov).

## Division for the Blind and Visually Impaired

### Recent Developments and Accomplishments

The blind community successfully worked with the legislature for support of the NFB-Newsline service. This service gives access to more than 400 local and national newspapers and magazines in an accessible format that can be accessed using a regular telephone or smartphone. There is also a local channel to post important information.

DBVI staff also facilitated several consumer-driven events. These included employment groups to help individuals tackle some of their barriers to employment while in a group setting with peers.

### Future Directions

DBVI continues to expand the Learn, Earn, and Prosper (LEAP) program for high school students. This includes workforce readiness training during school vacations. For more information please visit:

<http://www.retrainvt.org/retrain/LEAP>

### Programs and Services

#### Vision Rehabilitation Employment Services

The goal of DBVI's vocational rehabilitation services is to help people with vision loss to retain, return, or secure employment. Individuals meet with a DBVI counselor to identify goals and develop a plan to reduce their functional limitations.

DBVI counselors provide guidance related to employment and help people explore interests and abilities. On their individual path to employment, most people who work with DBVI:

- Build and strengthen vocational skills;
- Learn new adaptive skills to remain independently regardless of vision loss
- Learn to use specialized technology needed to do their jobs
- Services to maximize your vision
- Help with a job search and provide training in job skills
- Assistance with attending college
- Technology and tools that allow access to printed materials and completing work tasks

## Division for the Blind and Visually Impaired

DBVI is exceptionally proud of the accomplishments of our current and former customers. To read success stories of our former customers and their experiences with DBVI, visit our website: [www.dbvi.vermont.gov](http://www.dbvi.vermont.gov).

### **Services for High School Students**

DBVI transition services provide high school students with opportunities for learning independent living and job skills. DBVI collaborates with several partners including the Division of Vocational Rehabilitation (DVR), VABVI, ReSource, and the Gibney Family Foundation. DBVI is also working with partners to make sure that all blind or visually impaired high school students are building solid pre-employment skills.

One specific transition program called LEAP (Learn, Earn, and Prosper) provides paid summer employment for youth in a residential setting. This program empowers students to take charge of their employment future by gaining early employment success.

### **Independent Living Services**

DBVI provides assistance in maintaining independence. The DBVI rehabilitation associate meets an individual in his or her own home to discuss the individual's goals and develop a plan to achieve the highest possible degree of independence in activities such as traveling, preparing meals, and identifying medications. The direct instruction is provided by certified blindness professionals through a grant agreement with the Vermont Association for the Blind and Visually Impaired (VABVI). VABVI also administers the Older Blind Program to provide specialized vision rehabilitation services to eight-hundred individuals over the age of 55 in FFY 2016.

### **Technology**

Maximizing the power of assistive technology is critical for people with vision loss. DBVI invests significant effort in staying current about new assistive technology, that has revolutionized employment access, connection to society and eliminated other barriers caused by vision loss.

## Division for the Blind and Visually Impaired

### Results

#### Performance Measures

**Better Off:** Our focus is to help our consumers to become better off by building new skills and improving their circumstances. DBVI has consistently delivered a high Employment Rate.

**Employment Rate:** The percentage of people served by DBVI who have achieved an employment outcome successfully attained vocational goal for a minimum of 90 days.

	2011	2012	2013	2014	2015	2016	National Standard
Employment Rate	75%	77%	80%	79%	73%	75%	67.11%

**Deliver Services Well:** We also have a strong focus on delivering services well. Customer satisfaction is measured each year in the following key areas. The percentages below include the range during the time-period from 2011 to 2016.

- Overall Satisfaction--ranges from 92% to 95%.
- Services provided met expectations--ranges from 85% to 90%.
- Staff were helpful to achieve vocational goals--ranges from 95% to 96%.
- DBVI delivered services well for me--ranges from 89% to 92%.
- I did get the results I wanted from DBVI--ranges from 89% to 94%.

Our approach for assisting individuals who are blind or visually impaired on their path to employment and independence begins with the belief that each person can achieve their goals and DBVI can help. We also know that the “voice of the customer” is important and our strategies should be geared to meet those needs. Each staff member is committed to delivering services well and knows that their job makes a difference in the lives of people we serve. Please visit the DBVI website at [www.dbvi.vermont.gov](http://www.dbvi.vermont.gov) and visit the success story link to see real examples of people reaching their goals.

## Division of Vocational Rehabilitation

### Division Philosophy

The Division of Vocational Rehabilitation's (DVR's) mission is to help Vermonters with disabilities prepare for, obtain, and maintain meaningful employment and to help employers recruit, train and retain employees with disabilities. Consumer choice and self-direction are core values that drive DVR's approach to providing services and developing new programs. DVR's ability to help jobseekers succeed also depends on clearly understanding needs of our other customer – employers. To that end, DVR plays an important facilitating role in Creative Workforce Solutions (CWS), an Agency of Human Services (AHS) initiative that builds on DVR's initial employer outreach work.

### Division Overview

The Division of Vocational Rehabilitation serves people with disabilities in Vermont who face barriers to employment. We help VR consumers figure out what work will work for them through careful assessment, counseling and guidance from our expert staff. We capitalize on our extensive networks in the employer community to create job opportunities and make good placements that match employer needs with jobseeker skills, and help employers retain staff with disabilities. We use our financial resources within Vermont communities to support our consumers as they transition to stable employment, and our employers as they try out new workers.

### Staff and Partners

DVR believes in collaborating with other service providers to reach people facing the greatest challenges to employment. As a result, DVR has created innovative partnerships to serve youth, offenders, veterans, people receiving public benefits, and those who need ongoing support in order to work.

### Recent Developments and Accomplishments

Core Teams – One way in which DVR provides effective services statewide is through the Core Transition Teams, which increase capacity at the local level to develop, provide, and manage an effective transition process for students. Recognizing that communities will have their own individual approach, it is important that all high school staff, Agency of Human Services (AHS) staff, and community partners have access to the support of a Local Core Transition Team.

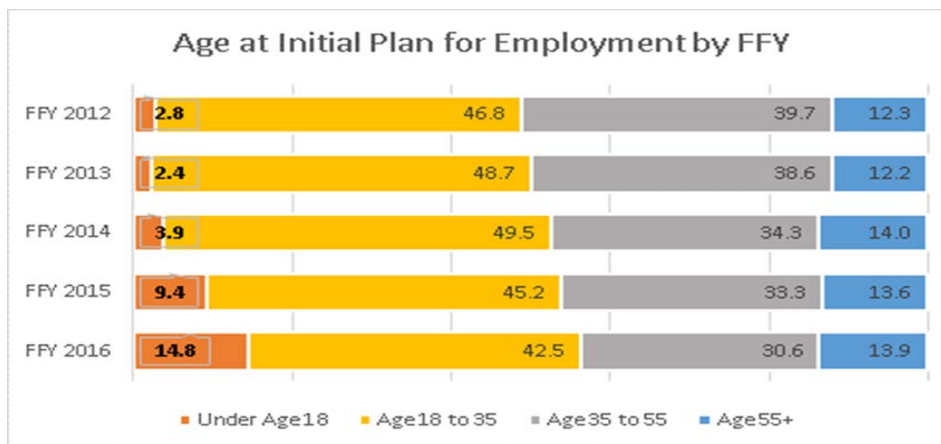
Spirit of the ADA Awards – Each year during National Disability Employment Awareness Month, the Governor's Committee on the Employment of People with

## Division of Vocational Rehabilitation

Disabilities (GCEPD) selects businesses from across the state who exemplify best practices in recruiting, promoting and retaining Vermonters with disabilities. Award winners are recognized in their local communities, and agree to work with the Committee to share their experience and strategies with other businesses. Business Account Managers from Creative Workforce Solutions (CWS) and the Committee work closely to gather nominations from a variety of programs and disability groups, and develop ideal dates, locations, agendas and talking points for the ceremonies.

Assistive Technology (AT) and DVR – The AT program and DVR strengthened their partnership by providing three dedicated AT staff for consultations and training up to 20 hours each per week. These services are available for all VR consumers who are working on goals related to their IPE, which is in addition to the AT Act Core Services (demos, equipment loans, reuse, resource information) available to all Vermonters.

Pre-Employment Transition Services – The implementation of the Pre-Employment Transition Services mandate has had a major impact on the DVR caseload. To illustrate, in FFY 2012, less than 3% of the consumers who signed an Individualized Plan for Employment (IPE) with DVR were under the age of 17. In FFY 2016, that figure grew to nearly 15% of new plans signed (see chart below). Furthermore, the median age of individuals with an IPE went from 35 in FFY 2012 to 30 in FFY 2016.



### Future Directions

Linking Learning to Careers Project (LLC) – In September 2016, DVR was awarded a \$9M, 5-year Federal grant to implement and evaluate an innovative model for the transition of students with disabilities to early career success, including paid, competitive employment, postsecondary school enrollment, and improved confidence to achieve career goals.

## Division of Vocational Rehabilitation

The State as a Model Employer – On March 23, 2016, Governor Shumlin signed an Executive Order establishing a “Disability Employment Working Group” comprised of representatives from DAIL, DHR and members of the Governor’s Workforce Equity and Diversity Committee. They were charged with developing a model to help State agencies recruit, train and retain workers with disabilities to both diversify and meet the needs of Vermont’s “greying” workforce. Beginning in January of 2017, CWS will pilot the model in the Barre-Berlin-Montpelier corridor, with an eye to statewide expansion in the Spring of 2017.

Employee-driven Training – Without an intentional training effort, the valuable expertise of field staff often remains in district offices, unavailable to others. DVR is developing a process wherein staff can share their experience and best practices Statewide by exploring employee-driven trainings. This has an added professional development element, giving staff experience developing and communicating curricula to their peers all while honing presentation and writing skills.

### Programs and Services

Assistive Technology Program (VATP)	Progressive Employment Program
Benefits Counseling	Rehabilitation Counseling for the Deaf and Hard of Hearing (RCD)
Creative Workforce Solutions (CWS)	Social Security Specialists (SSS)
Developmental Services and Jump on Board for Success (JOBS)	Supported Employment (SE)
Invest EAP – Employee Assistance Program (EAP)	Transition (high-school aged youth and young adults)
Jobs for Independence (JFI)	Vermont AT Reuse Project
Mature Worker Program	Vermont Senior Community Service Employment Program (SCSEP)
Office of Child Support Pilot (OCS)	

Vocational Rehabilitation Services – DVR services to jobseekers are tailored to the person and driven by his or her own interests, job goals and needs. Each person meets regularly with his or her VR counselor, who helps to develop an Individualized Plan for Employment (IPE) and manages the services and supports needed to realize the person’s career goals. The core services of vocational assessment, counseling and guidance, job training, and job placement provided by DVR staff and partners are enhanced with a range of purchased services and supports.



## Division of Vocational Rehabilitation

Placement Services – DVR counselors benefit from dedicated Employment Consultants who provide job development, job placement, and workplace supports to help people find and keep jobs. DVR has longstanding partnerships with Designated and Specialized Services Agencies (DAs and SSAs) to provide supported employment services to people with significant disabilities. DVR also has an ongoing partnership with the Vermont Association of Business, Industry, and Rehabilitation (VABIR) to provide employment services to DVR customers.

### Results

How many people we serve: 9,254 Individuals served

How well we serve them – Survey Results:

Conducted approximately every two years, 2016 results show that for our customers:

- 97% felt welcomed when they went to DVR for services;
- 95% would tell their friends with disabilities to visit DVR for help with employment;
- 94% indicate it is easy to access vocational rehabilitation services;
- 88% are very satisfied or satisfied with the services provided by DVR;
- 97% indicate that DVR staff treated them with dignity and respect;
- 81% said DVR helped them achieve their job goal.

Nationally, Vermont DVR ranks #1 among general VR agencies in:

- New VR applicants per million state population;
- VR employment outcomes per million state population.

How people are better off:

Chart 1: Change in Average Weekly Earnings of people served by DVR who achieve an employment outcome

### Change in Average Weekly Earnings FFY 2016



Chart 2: Change in Average Hours Worked Per Week of people served by DVR who achieve an employment outcome

### Change in Average Hours Worked Per Week FFY 2016

