



**Agency of Human Services**

**Department of Disabilities,  
Aging and Independent Living**

**GOVERNOR'S SFY2024 BUDGET TESTIMONY**  
JANUARY/FEBRUARY 2023

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# SFY2024 Budget Testimony

## Department of Disabilities, Aging, and Independent Living

### Department of Disabilities, Aging and Independent Living SFY2024 Budget Testimony 2023 Legislative Session

#### Department Overview

The Department of Disabilities, Aging and Independent Living (DAIL) is responsible for managing services to older Vermonters and Vermonters of all ages with disabilities. This work is codified at 33 V.S.A. Chapter 5 of Vermont's Human Services Statute.

DAIL's mission guides the delivery of all services, which is: **To make Vermont the best state in which to grow old or live with a disability, with dignity, respect, and independence.**

DAIL consists of approximately 300 employees working throughout the Commissioner's Office and the following five divisions:

1. Adult Services Division (ASD).
2. Division for the Blind and Visually Impaired (DBVI).
3. Developmental Disabilities Services Division (DDSD).
4. Division of Licensing and Protection (DLP).
5. Division of Vocational Rehabilitation (DVR).

The Commissioner's Office includes the Commissioner; Deputy Commissioner; Operations; Principal Assistant; Legal Unit; Business Office; Director of Deaf/Hard of Hearing/DeafBlind Services; and an Executive Assistant.

DAIL's primary role in Vermont is to fulfill the commitment that made to individuals with disabilities and to older Vermonters, enabling them to receive supports and services in their homes and in their communities, living independently and fully included as participating and contributing members of those communities. This commitment is underlined by state and federal mandates such as the [Older Americans Act \(OAA\)](#), the [Older Vermonters Act \(OVA\)](#), the [Americans with Disabilities Act \(ADA\)](#), the [Workforce Innovation and Opportunity Act \(WIOA\)](#), the [Vermont Health Care Administrative Rules \(HCAR\)](#), the [Medicaid Global Commitment 1115 Waiver](#), and the [Olmstead Decision](#), which require states to provide services to people in the least restrictive environments possible. Vermont remains a leader in supporting self-determination, choice, expansion of community-based options, the development of robust supported employment, and mature worker options.

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Globally, DAIL's work is most directly related to the following two areas of the [Governor's Strategic Plan](#):

- Grow the Economy.
- Protecting the Vulnerable.

Examples of DAIL contributions to the Governor's Strategic Outcomes include work focused on:

- Reducing high-risk substance use and preventing suicide among older Vermonters.
- Preventing abuse, neglect and exploitation of vulnerable adults.
- Improving career paths for youths with disabilities as they transition into adulthood.
- Supporting employment of older adults and adults with disabilities.
- Ensuring that long-term care facilities follow federal and state licensing regulations.
- Ensuring the delivery of quality home and community-based services.
- Reducing fall-related injuries.

DAIL has embraced Results Based Accountability (RBA) and continues to focus on program performance measures and performance improvement. Throughout this document, DAIL identifies measures related to how much, how well and how people are better off because of our services and supports. For more information, please visit the [DAIL Performance Budget Scorecard](#).

### Department Highlights

#### Department Leadership Changes

Jen Garabedian joined DAIL as Developmental Disabilities Services Division Director in January 2022.

Brian Guy, previously with HireAbility Vermont (Division of Vocational Rehabilitation), became DAIL Director of Operations in May 2022.

Rebecca Silbernagel was hired as Principal Assistant to the Commissioner in late October 2022, replacing Bard Hill who retired in December 2022.

Jason Pelopida was hired as State Unit on Aging Director in the Adult Services Division in December 2022 replacing Conor O'Dea who was hired by the Department of Vermont Health Access (DVHA) Medicaid Policy Unit.

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### **COVID Response**

In SFY2022, DAIL continued to have an active role in COVID-19 response, including working closely with the Vermont Department of Health to provide technical assistance to providers, assisting in the State's efforts to roll out Vermont's vaccine program, maintaining program flexibilities to better support consumers and families, awarding COVID Relief Funds (CRF) to a variety of providers in need of emergency financial stabilization, and actively participating in emergency outbreak response to long-term care facilities in need of emergency staffing, PPE and N95 fit-testing support. November 2022, DAIL hired two limited "strike team" positions funded by the Vermont Department of Health, Centers for Disease Control and Prevention (CDC) grant to support COVID work with long-term care facilities. These two positions support work previously managed by other deployed DAIL staff during the pandemic, allowing staff to return to their regular duties.

In addition to ongoing COVID-19 response work, DAIL has worked diligently on a wide variety of COVID recovery and revitalization efforts supporting Vermont's system of care for older adults and people with disabilities. Categories include:

- Medicaid rate increases and rate reviews.
- Emergency financial relief.
- Workforce recruitment and retention.
- Crisis capacity and hospital flow.

A detailed list of recovery and revitalization efforts can be found on the [DAIL COVID-19 web page](#).

### **Deaf, Hard of Hearing, DeafBlind Services**

Laura Siegel, MBA was hired as a new Director of Deaf, Hard-of-Hearing, DeafBlind (DHHDB) Services in March 2021. This new position acts as the single point of entry for information and works with a variety of stakeholders, including the Deaf, Hard of Hearing, DeafBlind Advisory Council, to identify services gaps and advise on program development to meet identified gaps. In SFY2022, DAIL received 164 referrals for assistance with Deaf/Hard of Hearing and DeafBlind services. The top three topics included issues related to access to interpreter services (20%), technical assistance to state agencies (15%) and access to assistive technology (12%). Top priorities include expansion of America Sign Language (ASL) services to Vermonters, modernizing Title 1 to reflect current Vermont practice, exploring a state-wide needs assessment with the Deaf, Hard of Hearing, DeafBlind Advisory Council, improving communication access across state government, and partnering with the Agency of Education to improve services to school age children.

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### **Vermont Action Plan for Aging Well**

Act 156, the Older Vermonters Act, outlines core principles to guide the State's efforts to ensure that all Vermonters can age well. The Act also required that the State propose a process for developing a Vermont Action Plan for Aging Well to be implemented across State government, local government, the private sector, and philanthropies. In SFY2022, DAIL and VDH worked together to convene an Advisory Committee for the development of the plan, conducted a statewide survey on aspects of aging in community, and held six listening sessions with older Vermonters across the state. Data and information gathered will be used by the Advisory Committee in 2023 to develop the goals, objectives, strategies, and measures for the plan. Learn more at: [Vermont Action Plan for Aging Well Advisory Committee 2022 Meeting Agendas and Minutes | Disabilities Aging and Independent Living](#).

### **DAIL Diversity, Equity, and Inclusion Task Force**

The DAIL Diversity, Equity, and Inclusion Task Force (DEITF) formed in October 2020 in support of the Agency of Human Services' (AHS) commitment to equity and inclusion. The group, composed of staff representing each of the divisions of DAIL and the Commissioner's office, was tasked with providing recommendations to departmental leadership for advancing equity across DAIL's internal and external policies, procedures, and programming. In 2021, the DEITF conducted a focused environmental scan of DAIL's internal operational efforts and workforce characteristics; this review revealed areas of strength and opportunity. In September 2022, the group brought forth a set of recommendations based upon evidence-based research and national best-practices regarding the recruitment and hiring of employees and equity-focused employee training and education. The group presented a second phase of evidence-informed recommendations focused on the retention of employees and DAIL's organizational and workplace culture in early 2022. These recommendations have been taken up for review and implementation by DAIL's Operations unit. The DEITF expects to conclude its work by early 2023. Thereafter, DAIL will establish a permanent Justice, Equity, Diversity and Inclusion Committee.

In addition to the work of DAIL's internal DEITF, DAIL is actively engaged in equity-focused work across AHS and the State of Vermont. This includes representation on the Health Equity Advisory Commission (HEAC), established by VT Act 33 of 2021 (18 V.S.A. §252).

### **DAIL Workforce Stabilization**

Since 2001 the number of Office of Public Guardian (OPG) cases has increased by 21% while the number of OPG guardians has declined by 11%, resulting in a 38% average increase in caseload. Additionally, since 2006, the number of people appointed by the courts into OPG guardianship has increased by 12%. The average OPG caseload is presently 30 clients/guardian, and supervisors carry that same load while

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overseeing staff. National standard is 20 clients/guardian (and 10 clients/guardian supervisor). DAIL is requesting three (3) additional guardian positions in SFY2024 to address the unsustainable OPG caseload.

DAIL quality management practices for home and community-based services (HCBS) and related staff capacity were discussed during the 2022 legislative session. Act 186 of 2022 required DAIL to submit legislative reports regarding quality assurance and oversight of Home and Community-Based Services (HCBS) programs for individuals with developmental disabilities. The Vermont Agency of Human Services (AHS) is currently engaged in discussions with the federal Centers for Medicare and Medicaid Services (CMS) regarding changes to quality oversight and performance management activities, as well as a timeline to implement these changes. Vermont should expect greater clarity and direction from CMS in the coming months, which will likely lead to a request for additional quality management positions in DAIL. Though DAIL has not requested additional positions in this proposed budget, recommendations for future changes in quality management practices and quality management staffing should be based on direction from CMS. The reports submitted by DAIL to the legislature in November 2022 and January 2023, can be found here: [Legislative Reports](#).

### **Statute Revisions**

[Title 33, Chapter 69: Reports of Abuse, Neglect, and Exploitation of Vulnerable Adults](#): DAIL proposes to modernize Vermont's 50-year-old APS statute to improve the protection of vulnerable adults. Over the last year, DAIL has worked very closely with stakeholders to draft proposed language. There is no anticipated budget impact to this important effort.

[Title 1, Chapter 5, Subchapter 5: Interpreters for Judicial, Administrative, and Legislative Findings](#): DAIL proposes changes that are needed to accurately reflect the status of Vermont's Deaf, Hard of Hearing, and DeafBlind services and use of the statewide American Sign Language interpreter contract. There is no anticipated budget impact.

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## Adult Services Division

### Adult Services 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.

### ASD Overview

ASD is responsible for managing a full array of Long-Term Services and Supports (LTSS) for older Vermonters and adults with physical disabilities. Vermont Medicaid, the federal Older Americans Act and State General Funds are the primary sources of funds for these services.

### ASD Staff and Partners

ASD has approximately 40 employees located within the Central Office in Waterbury and regional district offices. Services are managed within four units: Long-Term Services & Supports Unit, Quality Management Unit, the State Unit on Aging, and the Money Follows the Person Project.

ASD partners with a variety of organizations in managing services for Vermonters including:

- Adult Day Centers.
- Area Agencies on Aging.
- Brain Injury Providers.
- Designated Agencies and Specialized Services Agencies.
- Home Health Agencies.
- HomeShare Vermont.
- Facilities: Nursing Homes, Residential Care Homes, and Assisted Living Residences.
- Supports and Services at Home (SASH).
- Senior Centers.
- State Long Term Care Ombudsman.
- Transition II.
- Vermont Center for Independent Living.

### ASD Programs and Services

Medicaid Funded Long-Term Services and Supports Programs include:

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

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Older Americans Act (OAA) Services include:

- Supportive Services, such as Information, Assistance and Referral, Case Management, Legal Assistance, Transportation, etc.
- Nutrition Services (congregate meals and home-delivered meals).
- Health Promotion and Disease Prevention.
- Family Caregiver Support.
- State Long-Term Care Ombudsman Program.

Other initiatives, programs and services supported by ASD include:

- Commodity Supplemental Food Program.
- Dementia Respite Grants for Unpaid Family Caregivers.
- Elder Care Clinician Program.
- Employer Payroll Support for Self-Directed and Surrogate-Directed Services.
- Health Insurance Counseling & Support (SHIP/MIPPA).
- Home Delivered Meals for People with Disabilities Under Age 60.
- Money Follows the Person Project.
- Self-Neglect Initiative.
- Senior Farmers' Market Nutrition Program.
- 3SquaresVT (SNAP) Outreach.

### ASD Recent Developments and Accomplishments

1. ASD developed and received federal approval of the new [2023-2026 State Plan on Aging](#) which guides the work of the State Unit on Aging and Area Agencies on Aging in service to older Vermonters in greatest need.
2. In collaboration with the Department of Health, Advisory Committee and community partners, ASD has conducted a Needs Assessment, consisting of data collection, panel presentations, surveys and listening sessions, for the development of the [Vermont Action Plan for Aging Well](#).
3. In collaboration with AHS, departments and community partners, ASD has begun implementing strategies outlined in [Vermont's Enhanced FMAP Spending Plan](#) to strengthen the HCBS system. Specifically in ASD has used this enhanced FMAP funding to launch the following:
  - A continuation of a higher cap for assistive technology and home modification funds for Choices for Care participants in traditional home-based care plans.
  - A contract with Direct Access for an accessibility pilot to identify and provide home modifications needed to support individuals' mobility and independence needs in shared living homes (Choices for Care, Brain Injury Program, and Developmental Services).

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- A contract with Health System Transformation to coordinate a working group to consider extending HCBS services to a broader cohort of Vermonters and develop a report of recommendations as required by Vermont Act 167, 2022.
4. Following submission to CMS of a [plan how Vermont will meet HCBS conflict-of-interest requirements](#), ASD worked with AHS and departments to develop an RFP and select a contractor to provide technical assistance and stakeholder engagement as Vermont works to come into compliance with these rules in calendar year 2025.
  5. To address new CMS requirements under Vermont's renewed Global Commitment to Health Waiver, ASD worked to identify performance measures to meet HCBS Assurances for quality services.
  6. Using \$5 million in [Money Follows the Person](#) funding through a supplemental capacity building grant, ASD launched nine new contracts and Memorandum of Understandings (MOUs) for innovative pilots to address unmet needs such as the caregiver workforce shortage, mental health supports, home modifications and falls prevention.
  7. ASD supported DVHA in the work to develop a proposed rate methodology for Adult Day services as well as personal care, companionship, respite, and homemaker services provided by Home Health Agencies; this work continues with a report due to the legislature by February 15<sup>th</sup>, 2023.
  8. ASD hosted three community meetings (Rutland, Barre and virtually) to discuss building back capacity for Adult Day services in those regions and are providing technical assistance as agencies consider paths forward.
  9. ASD continued to work with AHS and ARIS on the implementation of [Electronic Visit Verification](#) (EVV) for Medicaid funded in-home services and have seen a steady increase in adoption rates by independent direct support workers.
  10. In a time when older Vermonters and people with disabilities have been labeled "vulnerable" due to the pandemic, ASD continued work on reframing aging in communications and policies to ensure an inclusive, accessible, and age-friendly Vermont for generations to come.

### ASD Future Directions

In 2023 ASD plans to:

- Implement the new State Plan on Aging.
- Draft the Vermont Action Plan for Aging Well.
- Implement additional Enhanced FMAP Spending Plan initiatives.
- Work to meet HCBS conflict-of-interest requirements and identify pathways forward for ASD programs.
- Strengthen quality oversight across all ASD programs and services through data-driven surveys and reviews.
- Monitor the MFP pilots for successes, challenges, and potential

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## Adult Services Division

sustainability.

- Continue collaboration with AAAs including expansion of therapeutic meals, promotion of [Get Set Up](#), and implementation of [TCARE](#), an evidence-based family caregiver assessment tool.

### **ASD Results (how much, how well, better off)**

All Medicaid services, including Choices for Care, are managed through the State [Global Commitment to Health 1115 Waiver](#) and the accompanying [Comprehensive Quality Strategy](#).

Supporting data for ASD services are in the [DAIL Scorecard](#). Highlights include:

1. **Choices for Care:** In SFY2022, 6783 people received Choices for Care services across all settings. Of the total who received services, 1198 were in the Moderate Needs Group and 5711 were in the High/Highest Needs Groups. Of the total in the High/Highest Needs Groups, 2805 were in a home-based setting, 762 were in an Enhanced Residential Care home, and 2745 were in a nursing facility. Note that some individuals received services in more than one setting above.

Vermont has participated in the National Core Indicators (NCI) Adult In-Person Survey over the years. DAIL's participation in the 2019/20 survey was cut short due to COVID-19, and there was no regular 2020/21 survey for the same reason. DAIL then made the difficult decision to not participate in 2021/22 because of the providers' workforce crisis, limited internal resources needed to manage the project, and ongoing pandemic-related concerns. The most current survey results are from 2018/19, so the findings are not republished here.

2. **Adult Day Programs** served 331 people in SFY2022 with Medicaid funded services (High/Highest Groups, Moderate Needs Group, and Adult Day Health Rehabilitation).

3. **Older Americans Act Home Delivered Meals**

- 8699 people were served in FFY2021 (12% increase from previous year).
- 1,117,247 meals were served in FFY2021 (14% increase from previous year).
- 96% of consumers reported they had enough to eat (unchanged from previous year).
- 79% of consumers reported that meals helped manage or improve their medical condition (4.5% decrease from previous year).

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## Division for the Blind and Visually Impaired

### **Division for the Blind and Visually Impaired (DBVI) Philosophy**

DBVI assists individuals who are blind or visually impaired to meet their employment and independence goals. DBVI uses 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 economic independence, self-reliance, and social integration consistent with their interests, abilities, and informed choices.

### **DBVI Overview**

DBVI helps working age individuals achieve economic independence by obtaining livable wage jobs and income. This involves training to improve employment skills and higher education that leads to degrees or certificates. DBVI helps transition high school students from school to the world of work. DBVI's statewide approach for younger students helps to ensure that all blind and visually impaired high school students have pre-employment transition skills. DBVI helps individuals of all ages to build adaptive skills related to their visual impairment through assistive technology, low vision, orientation and mobility, and independent living skills.

### **DBVI 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 four regional field offices. Each office has a Blind Services Rehabilitation Counselor and a Rehabilitation Associate who deliver individualized services. One Blind Services 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 organizations to accomplish its mission. The 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 certified blindness professionals who are highly trained in the areas of Orientation and Mobility, Low Vision, and Rehabilitation Therapy. For other DBVI partners please visit [www.dbvi.vermont.gov](http://www.dbvi.vermont.gov).

### **DBVI Recent Developments and Accomplishments**

This year DBVI held several White Cane events in each of the DBVI regions. The intent was to educate the public about White Cane Safety Awareness. The white cane is a symbol of strength and independence, used by people who are blind as they travel independently. Many members of the public and community leaders usually attend to participate in a simulated walk in the community facilitated by an Orientation and Mobility instructor to increase the awareness of what it is like to travel with the white cane.

The DBVI events were held this year in Barre, Burlington, Rutland, and Springfield.

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Each event included an experiential walk through each town and guest speakers who discussed specialized technology used by people who are blind. Participants included many individuals who are blind or visually impaired and several town officials who wanted to learn ways to promote safe travel for people who are blind in their town. Media coverage included articles in the Rutland Herald, Springfield Reporter, and Springfield Facebook Page.

[Rutland Herald Article-White Cane Awareness Event](#)

[Town of Springfield Facebook Page about the White Cane Event](#)

[Burlington Picture of White Cane Event](#)

The Vermont Association for the Blind and Visually Impaired (VABVI) was granted permanent additional funding of \$100,000 from the State to assist in reducing the social isolation of older Vermonters by providing additional instruction in through training Speech, Magnification, Access, Technology, Reading and Telecommunications (SMART). Historically, through the previous two-rounds of temporary COVID Relief Funding (CRF), about 90% of all clients who completed these services, reported feeling less socially isolated and better off for having received SMART Services. Of those who did not report a change in their feelings of social isolation, the causes were due to extenuating circumstances not related to their vision or receipt of the training. Clients who received benefit were able to accomplish at least one or more tasks, such as video conferencing with their doctor, video/teleconferencing with the Peer Assisted Learning Session (PALS) Groups, communicating with family and friends through various modes of technology, having groceries delivered, and more.

DBVI also partnered and assisted with the DVR HireAbility Vermont Transition Core Teams Virtual Conference. This statewide event brought together Transition Core Teams from schools and employment service providers to share ideas about how to assist students with disabilities with their employment goals.

DBVI staff work towards continuous improvement by listening to the voice of customers and using that information and data to improve performance. An updated DBVI State Plan with new goals and strategies was completed and approved by the State Rehabilitation Council in February 2022 and can be found at <https://dbvi.vermont.gov/resources/publications>. Please also visit the success story link on DBVI's website at [www.dbvi.vermont.gov](http://www.dbvi.vermont.gov) to see examples of people reaching their goals.

The federal Workforce Innovation and Opportunity Act (WIOA) requires DBVI to use 15% of its federal grant award to provide Pre-Employment Transition Services (Pre-ETS) creating an opportunity for DBVI to expand Pre-ETS services in the core areas:

- Job exploration counseling.
- Work-based learning opportunities.
- Counseling on post-secondary educational opportunities.

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## Division for the Blind and Visually Impaired

- Workplace readiness training.
- Instruction in self-advocacy.

DBVI has been successful in expanding Pre-ETS services for students who are blind or visually impaired by providing work-experiences, internships, and job readiness training to build skills necessary for career development. Learn, Earn, and Prosper (LEAP) is a program developed by DBVI to achieve these goals. Students participate in a slate of different options year-round to learn job readiness and self-advocacy skills, and to engage in work-based learning experiences. LEAP's in-person and residential programming returned in 2022 after Vermont lifted COVID restrictions. LEAP also continued its year-round virtual programs. Virtual programs have become a significant access point for participants and families who are not yet ready for a residential experience. **Check out [DBVI's new LEAP video](#).**

### DBVI Future Directions

DBVI believes the best path forward for people with visual impairments includes a solid foundation in technology. DBVI staff stay current to help customers achieve their employment and independence goals. For example, new apps help people navigate their environment using the white cane and GPS by sending verbal information including specific directions to reach their destination.

DBVI continued with the second year of a learning collaborative with a focus on creating apprenticeship opportunities in a rural state. This was a competitive process and other states include Arkansas and Wyoming. The learning opportunities are facilitated by the team from University of Massachusetts - Boston in their Rural Apprenticeship Development program. It is a 5-year grant with the goal of creating apprenticeship opportunities for people who are blind in Vermont.

### DBVI 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 improve their functional independence.

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 independent regardless of vision loss.
- Learn to use specialized technology needed to do their jobs.
- Receive services to maximize visual function.

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- Help with a job search and provide training in job skills.
- Assist with attending college.
- Provide technology and training that allow people to access printed materials and complete work tasks.

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

DBVI's transition services provide high school students with opportunities for learning job readiness, self-advocacy, and independent living skills. DBVI collaborates with several partners including DVR HireAbility, VABVI, ReSOURCE, and the Gibney Family Foundation.

The Learn, Earn, and Prosper (LEAP) program provides paid summer employment for youth in a residential setting. LEAP empowers students to take charge of their employment future by gaining early employment success, and helps students make a successful transition from school to work.

### **Independent Living Services**

DBVI helps individuals maintain independence. A 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 managing medications. Direct instruction is provided by certified blindness professionals through a contract 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.

### **Assistive Technology**

Assistive technology is critical for many people with vision loss. DBVI invests significant effort to stay current in new assistive technology to help people find employment, participate in their communities, and eliminate other barriers caused by vision loss.

### **DBVI Results (how much, how well, better off)**

#### **How many DBVI served (SFY2022):**

- 258 individuals received services to assist them to maintain or find employment because of their vision loss. 246 received services in SFY2021.

Individuals previously in SFY2021 served in the DBVI Homemaker Program are now being served in the DBVI Independent Living and Older Blind program for SFY2022.

- 667 individuals over the age of 55 received specialized vision rehabilitation services.
- 93 individuals were served by the Independent Living Program.
- 4 individuals served in the Business Enterprise Program.

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- Total for SFY2022= 761 (Includes DBVI VR; DBVI Independent Living; and Older Blind programs).

### **Total Training Hours, LEAP FFY2022: 2,568.9**

- Work-Based Learning Training hours (both in-person & virtual): **2,099**
- Work Readiness Training & Self-Advocacy, Social and Leadership Instruction (both in-person & virtual): **327.5**
- Orientation and Mobility with a COMS (both in-person & virtual): **69**
- Independent Living Skills with a CVRT (both in-person & virtual): **73**

In FFY2022, training hours in Work-Based Learning Programs increased 384.9 hours. This was due to return to residential programming and maintained focus on placing participants who were not ready to commit to full-time residential positions in community-based internships and work experiences.

The percentage of population served who were under age 22 at entry into DBVI services has grown from 17% of people served in SFY2014 to 25% of people served in SFY2021 and remains substantial at 25% in SFY2022.

### **How well DBVI served people:**

Below are the SFY2022 Customer Satisfaction results of a 3-year statewide random survey of all participants in the Division for the Blind and Visually Impaired (DBVI) Vision Rehabilitation Employment program (Conducted by Market Decisions):

- 97% of consumers said they are satisfied with the DBVI vocational rehabilitation program.
- 95% of consumers agree that they are better off as a result of the services received from DBVI.
- 97% of consumers said that DBVI staff treated them with dignity and respect.
- 96% of consumers said that DBVI helped or is helping them achieve their vocational rehabilitation goals.
- 93% of consumers said that DBVI services met their expectations.
- 91% of consumers said that DBVI vocational rehabilitation services are helping or will help them become more independent in general.
- 85% of consumers said that DBVI helped them reach their job goals.

### **How people are better off:**

- 18 blind or visually impaired individuals closed their DBVI case in SFY2022 with successful employment.
- 78% had a wage above 125% of the minimum wage in SFY2022.
- 52.5% employment rate four quarters post exit in SFY2022, an increase from 46.7% in SFY2020 and 48.3% in SFY2021.

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- Median earnings two quarters post exit rose by 13% to \$5,213 in SFY2022 from \$4,630 in SFY2021, both above the national average for those years.

To read success stories of DBVI customers and their experiences, visit the DBVI website: [www.dbvi.vermont.gov](http://www.dbvi.vermont.gov).

Table 1: Table showing VT and National averages for key federal WIOA reporting metrics. Data for VT are combined between DBVI and DVR HireAbility agencies as per federal reporting requirements.

MEASURE	NATIONAL AVERAGE SFY 20	VERMONT RESULTS SFY 20	NATIONAL AVERAGE SFY 21	VERMONT RESULTS SFY 21	NATIONAL AVERAGE SFY 22	VERMONT RESULTS SFY 22
MEASURABLE SKILLS GAINS	31.4%	49.3%	43.3%	49.0%	43.0%	56.3%
EMPLOYMENT RATE 2 QUARTERS POST EXIT	51.3%	51.1%	48.6%	53.3%	52.5%	53.6%
EMPLOYMENT RATE 4 QUARTERS POST EXIT	43.6%	46.7%	44.0%	48.3%	48.0%	52.5%
MEDIAN EARNINGS 2 QUARTERS POST EXIT	\$4,005	\$3,901	\$4,280	\$4,630	\$4,776	\$5,213
CREDENTIAL ATTAINMENT	NA	NA	23.2%	42.5%	30.8%	43.4%

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## Developmental Disabilities Services Division

### **Developmental Disabilities Services Division (DDSD) Philosophy**

The Developmental Disabilities Services Division (DDSD) supports people to live, work and participate as citizens in their local communities, pursuing their own choices, goals, aspirations, and preferences. To be effective and efficient, services must be individualized to address the goals, capacities, needs, and values of each person. With support as needed, individuals are able to make decisions, live in typical homes, and contribute as community citizens. DDSD services are based on the principle that communities are stronger when everyone is included.

### **DDSD Overview**

DDSD plans, coordinates, administers, monitors, and evaluates state and federally funded services for people with developmental disabilities and their families within Vermont. DDSD provides funding for services, systems planning, technical assistance, training, quality assurance and program monitoring and standards compliance. DDSD provides court-ordered public guardianship to adults with developmental disabilities and older Vermonters aged 60 and over on behalf of the Commissioner.

For more information about developmental disabilities services, please review the [Developmental Disabilities Services Annual Report](#) or visit the [DDSD](#) website.

### **DDSD Staff and Partners**

DDSD work is carried out by eighteen program staff members, including the Quality Management Unit, Services Specialists, administrators, and support staff, and thirty-one staff members working within the Office of Public Guardianship, twenty-four of whom are full-time public guardians.

The Agency of Human Services contracts with fifteen private, non-profit developmental disabilities services agencies to provide or arrange for services to 4663 people with developmental disabilities and their families through Designated Agency and Specialized Services Agency Provider Agreements. In addition, a Supportive Intermediary Service Organization (ISO) assists individuals and families to manage their services and a Fiscal/Employer Agent provides the infrastructure and guidance to enable employers to meet their fiscal and reporting responsibilities. DDSD emphasizes the development of community capacities to meet the needs of all individuals, regardless of the severity of their disabilities.

DDSD works with a variety of people and organizations to ensure that the changing needs of people with developmental disabilities and their families are met. This includes people with disabilities, families, guardians, advocates, service providers, the State Program Standing Committee for Developmental Disabilities Services, and State and Federal governments.

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### **DDSD Recent Developments and Accomplishments**

#### **New Payment Model**

The Developmental Disabilities Services Division (DDSD) and the Department of Vermont Health Access (DVHA) have continued to work on a new payment model for Developmental Disabilities Home and Community-Based Services (HCBS). The goal of this payment reform project is to create a transparent, equitable and effective payment model for Developmental Disabilities Services that is manageable, supports Vermont's philosophy, and aligns with the broader payment reform and health care reform goals of Agency of Human Services (AHS).

Stakeholders, including people who receive services, families, advocacy organizations, and providers, are participating in workgroups for the development and implementation of the new payment model. An advisory committee and workgroups are focused on a new needs assessment tool and process; improvements to agencies ability to fully report on services delivered to individuals (encounter data); and the design of the future payment model. DDSD and its partners continue work to design the payment methodology, which is informed by assessment data, encounter data, and stakeholder input.

DDSD contracted with Public Consulting Group (PCG) in March 2021 to conduct individual assessments of need using the Supports Intensity Scale, a standardized assessment tool used by many other states. Using PCG to perform this assessment tool meets the Centers for Medicare and Medicaid Services (CMS) requirement that an independent assessor performs the needs assessment, moving Vermont into compliance CMS requirements. SFY2021 was the initial planning phase which included training of assessors. 500 assessments were conducted during the next phase in SFY2022. The information from these assessments will be used as part of future payment model design. DDSD has experienced some challenges with the initial implementation of the new assessment process. DDSD has continued to solicit feedback from stakeholders and is working on addressing these issues.

In SFY2021, DDSD provider agencies began reporting encounter claims in the Medicaid Management Information System (MMIS) and are expected to report encounter data for all services delivered in SFY2022. Reporting of encounter claims in the MMIS will increase transparency and accountability of service delivery. The data is also a building block for the design of the future payment model. DAIL, DVHA, and Gainwell (the MMIS contractor) continue to identify and resolve issues in reporting encounter claims.

#### **Home and Community-Based Services (HCBS) Rule Implementation**

DDSD continues work to comply with the federal HCBS settings rules requirements by 2023. The intent of the rules is to ensure that individuals receiving long-term services and supports through HCBS programs have full access to the benefits of community

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living and the opportunity to receive services in the most integrated setting appropriate. The rules promote choice and control, community inclusion, and protection of participants' rights.

DDSD completed site visits to validate survey information submitted by residential service providers in September 2019 regarding compliance with federal rules for HCBS settings. DDSD found that most providers complied with the setting requirements, with only minor changes. DDSD anticipates that all providers will comply with the setting requirements, and no residents will need to transition to other settings. This information was included in the Vermont's State Transition Plan in February 2020.

In addition, DDSD has incorporated HCBS settings rules requirements into overall quality review process and continues to provide policy guidance. The DDSD Quality Management Team has verified the status of each provider agency and plans to bring each agency into complete compliance. Plans of corrective action are documented in each agency's Quality Services Report.

CMS performed a site visit to Heartbeet, a Camphill-based farmstead setting, in August 2022. The results of the site visit were provided to AHS in November 2022, including recommendations to increase the community integration of residents and for those residents to have increased choice and control. DDSD, in conjunction with AHS, will craft a response to CMS and work with Heartbeet and other provider agencies addressing the recommendations.

The HCBS rules also require that case management be provided by an organization that is separate from an organization that provides a person's direct services to avoid a conflict of interest. In the summer of 2022, CMS rejected Vermont's 5-year plan to implement conflict of interest in case management, indicating this initiative needed to be implemented within 3 years. DDSD and its stakeholders have been involved to-date and will continue to be an active participant on workgroups and committees.

### DDSD Future Directions

**Workforce:** DDSD convened a stakeholder group that included representatives from service providers, consumer, and family advocacy organizations, DVR HireAbility, and others to explore solutions to chronic provider workforce issues. The group identified a variety of short-term and long-term solutions to the ongoing challenge of recruiting and retaining direct support workers. The pandemic continues to aggravate issues relating to hiring and retaining direct support workers. DDSD will continue to work with providers and others to explore solutions to this increasingly challenging issue.

**Office of Public Guardian (OPG) Caseload:** OPG currently consists of 30 staff, of whom 19 are full time guardians and 5 are supervisors, who served 759 people in FY22. National standards for best practice indicate that public guardians should have

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caseloads of no more than 20 clients per guardian and no more than 10 clients per supervisor. Vermont's current caseload is approximately 30 clients per guardian, including supervisors who also supervise 3-5 guardians. Since 2006, the number of people appointed by the courts into OPG guardianship has increased by 12%.

**Payment Reform:** DDSD will continue work on payment reform and compliance with the federal HCBS rules, as described above. In combination, these two complex initiatives represent changes to the current DDSD system of care that are to be quite broad in scope and impact. DDSD will continue to work closely with stakeholders to achieve change while preserving DAIL's commitment to improving individual outcomes. As directed by Act 186 of 2022, DDSD will seek approval of the legislature before implementing payment reform changes.

**Residential and Housing Options and Alternatives:** Following the passage of Vermont Act 186 of 2022, DDSD is partnering with designated and specialized service agencies and community members to explore new residential and housing options and alternatives for adults with developmental disabilities. Act 186 established a Steering Committee to provide guidance and support to DDSD related to the pilot planning grants funded through the federal American Rescue Plan Act (ARPA) funds, which were also included in Act 186. The \$500,000 planning grants will explore alternatives to the residential options currently available in Vermont.

**Developmental Disabilities Ombuds Program:** DDSD is partnering with Vermont Legal Aid (VLA) to create an Ombuds pilot project to support the developmental disabilities and brain injury populations. The program, run through VLA, will provide independent review and investigation of administrative acts that are believed to be contrary to rule, law, or policy. Proposed activities include developing promotional materials and website; creating and implementing a home monitoring plan; developing a complaint response process and responding to complaints; providing a "Know your Rights" workshop and other training for advocates and support staff; and providing feedback mechanisms for pilot area stakeholders. This pilot is pending CMS approval through the ARPA FMAP HCBS funds.

### DDSD Programs and Services

**Home and Community-Based Services (HCBS):** HCBS are provided through Designated Agencies and Specialized Service Agencies. These services include Service Coordination, Community Supports, Employment Supports, Home Supports, Respite, Clinical Services, Supportive Services, and Crisis Services. Home Supports including 24-hour Shared Living, Staffed Living, Group Living, and Supervised Living (hourly supports in the person's own home). In-Home Family Supports are hourly supports provided in the home of a family member. Services can be managed by the agency, managed by the person or a family member, or shared-managed (a combination of agency-managed and self/family-managed services).

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**The Bridge Program:** provides care coordination to families to help them access and coordinate medical, educational, social, or other services for their children with developmental disabilities.

**Family Managed Respite:** provides respite for families to give them a break from caring for their child with a disability.

**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.

**Office of Public Guardian (OPG),** acting under court authority, provides public guardianship where there is no friend or family member to serve as guardian, and the individual needs a public guardian to protect his or her rights or welfare. OPG also provides representative payee services and case management services to a limited number of people.

**Specialized Services** are provided by service agencies to adults with developmental disabilities who live in nursing facilities to improve their quality of life by providing support to address social and recreational needs.

**Targeted Case Management** provides assessment, care planning, referral and monitoring to individuals who are not receiving service coordination through HCBS or other funding source.

### DDSD Results (how much, how well, better off)

#### In SFY2022:

- 3,334 people were served in Home & Community-Based Services (HCBS).
- 929 people served by Flexible Family Funding.
- 325 people served by Family Managed Respite.
- 404 people served in Bridge program.
- 759 people received OPG public guardianship services.
- 287 people received OPG representative payee services.

**Quality Service Reviews:** The DDSD Quality Service Reviews (QSRs) monitor and review the quality of services provided with HCBS funding. The purpose of the QSR is to determine the quality of the services provided by the Designated Agencies and Specialized Service Agencies and to ensure that standards are met with respect to state and federal guidelines and policies.

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The QSR is one component of a broader effort to maintain and improve the quality of services. Other activities supported by the review team and DDSD include monitoring and follow-up regarding agency designation; authorizing Medicaid and HCBS eligibility; verifying housing safety and accessibility inspections; monitoring critical incident reports; responding to grievances and appeals; providing technical assistance; and conducting satisfaction surveys of adults receiving HCBS.

**National Core Indicators (NCI):** Vermont has participated in the National Core Indicators (NCI) Adult In-Person Survey over a number of years. Due to COVID-19 DAIL did not participate in the survey since 2018/19 survey.

**Employment Services:** The employment rate for all working age adults with developmental disabilities who receive HCBS continues to be sustained at a high rate of 40% (SFY2021). This compares favorably to the national average of individuals participating in ID/DD employment services. A 2018 Data Brief from National Core Indicators reported nationally that 20% of adults with IDD receiving services were engaged in paid employment in the community, including both individual and/or group supported jobs. Additionally, the US Bureau of Labor Statistics (2019) reported a 39% employment rate among all working age adults with disabilities.

**Post-Secondary Education Initiative (PSEI):** More Vermonters with disabilities are going on to post-secondary education than ever before and Vermont's Think College Vermont, College Steps, and SUCCEED programs assist them in achieving their college goals. Participating colleges include the University of Vermont, Castleton University, and Northern Vermont University – Johnson and Lyndon Campuses<sup>1</sup>.

As of June 30, 2022, the total PSEI resulted in 23 students enrolled and 30 students who graduated with a certificate, resulting in a 77% employment rate of graduates. In addition, PSEI helps transition age youth enter the work force. Through supported education and job training services, youth experience successful transitions from school to work or higher levels of education. Services include specialized career training, customized job placement, independent living skills training, and experiential internships. The three programs that contribute to successful youth transitions include Supported Employment, Transitional Living Programs, and Project Search's Business Based Training.

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<sup>1</sup> Castleton University and Northern Vermont University will join Vermont State University in the Summer of 2023.

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## Division of Licensing and Protection

### Division of Licensing and Protection (DLP) Philosophy

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

### DLP Overview

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. In this role, S&C licenses and certifies health care organizations to ensure that they meet minimum state and federal regulatory compliance. Details can be found at:
- [Adult Protective Services](#) (APS) investigates allegations of abuse, neglect, and exploitation of vulnerable adults and implements protective services, as necessary, to limit future maltreatment. The APS Annual Report can be found at [APS Statistical Information | Division of Licensing and Protection \(vermont.gov\)](#)

### DLP Staff and Partners

S&C currently has 22 employees, 19 of whom are Registered Nurses (RN) who are federally trained and certified to perform investigations and surveys. These RNs are home-based and travel throughout the state to investigate complaints and to perform recurring, scheduled surveys. S&C follows federal and state regulations and procedures developed by the Centers for Medicare and Medicaid Services (CMS).

APS currently has 22 employees, including nine 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.

Like many current employers, DLP has struggled this year to recruit and hire staff. At the time of this writing, DLP is actively trying to fill eight open positions (four in S&C and four in APS), most of which have had to be reposted multiple times.

### DLP Recent Developments and Accomplishments

State licensed Residential Care Homes and Assisted Living Facilities continue to experience increasing challenges that S&C must account for in its survey efforts. Vermont currently has 153 licensed skilled nursing facilities, residential care homes, and assisted living residences, totaling over 6,514 licensed beds, caring for many of the most vulnerable Vermonters. The nature and volume of the work has grown in complexity over the past ten years, requiring additional support and oversight. To

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address these rising needs, DAIL received funding in SFY2023 to hire three additional nurse surveyors, a Long-Term Care Manager and an Administrative Coordinator to enhance oversight of state licensed facilities by increasing surveys from every other year to annually. DAIL expects to implement changes associated with these positions in SFY2023 and SFY2024.

S&C oversees the Nurse Aide Training and Competency Program which approves nurse aide training programs statewide. S&C also holds the vendor contract to assure the availability of testing for licensure as a licensed nurse's aide. Over the past year, testing opportunities for nurse aide students has been limited as recruiting evaluators for onsite clinical testing has proved to be difficult. In response to this challenge, Vermont has received a waiver from CMS to allow for nurse aide students to work as licensed nurse aides until April 4, 2023, to allow for ample time to test all nurse aide students statewide.

APS was awarded a one-million-dollar grant in 2020 by the federal Department of Health and Human Services (HHS), Administration for Community Living (ACL) to provide Restorative Justice services aimed at lowering the re-victimization rates of vulnerable adults, as well as lowering the recidivism rates of perpetrators of maltreatment. In SFY2022, the ACL funded the pilot program for one additional year, awarding a supplement of \$204,750 with the option for an additional no-cost extension. APS also received two other awards from the ACL in SFY2022: \$704,000 through Coronavirus Response and Relief Supplemental Appropriations Act (CRRSA) and \$645,000 through the American Rescue Plan Act (ARPA). These awards support APS Service Navigators to help better identify vulnerable adults in Vermont and connect them to needed services, the building of a new data library, purchase of remote work equipment, PPE and training opportunities for staff.

### **DLP Future Directions**

In SFY2023 DAIL is proposing changes to Vermont's 40-year-old APS statute 33 V.S.A. Chapter 69. Proposed changes were developed through a year-long statute review with the DAIL APS stakeholder committee and are expected to have a positive effect on the APS reporting and investigative process, and improved outcomes for vulnerable Vermonters.

Early in SFY2020, S&C began the process of updating the Assisted Living Facility and Residential Care Home regulations to reflect the increased needs of people they serve. During the initial phase, a contractor helped DLP solicit detailed input from a wide variety of stakeholders. After a pause to focus on critical COVID-19 efforts, DLP has resumed the regulation review process and expects to hold public meetings early 2023 with anticipated regulatory filing in late Spring 2023.

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### DLP Programs and Services

Both S&C and APS work to protect and serve vulnerable adults. Vulnerable adults are defined in statute as individuals over 18 years in age who are residents of a facility licensed by S&C, 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 unannounced, regular surveys at health care facilities, and investigates complaints made about the care received in these facilities. These surveys and investigations can result in fines and other corrective action, including bans on admissions or revocation of operating licenses.
- APS investigates reports of maltreatment of vulnerable adults. When APS discovers that a person has maltreated a vulnerable adult, that person may be placed on the Adult Abuse Registry. The Registry is used by organizations that serve children and vulnerable adults to check the backgrounds of employees and volunteers prior to hiring.

### DLP Results (how much, how well, better off)

#### S&C:

- S&C conducted 241 onsite investigations looking at 436 combined complaints and self-reports across all state and federal provider groups. This represents an increase of 4.4% from the previous year.
- 8.5% of Nursing Homes had no deficiencies, isolated deficiency with substantial compliance, or no onsite survey performed during this period. This represents a decrease of 82% from the previous year.
- 0% of Nursing Homes had a deficiency reflecting the potential for minimum harm.
- 77.14% of Nursing Homes had a deficiency reflecting the potential for more than minimum harm, more than double the amount from the previous year.
- 14.28% of Nursing Homes had a deficiency reflecting actual harm or immediate jeopardy of residents. This represents a small (3%) increase from the previous year.
- Since 2018, S&C has processed 11 applications for SNF transfer of ownership for an average of two per year. In calendar year 2021 and 2022, eight applications were received, indicating more than double the number of transfers of ownership applications that occurred between 2018-2019.

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### APS:

- APS received 3590 reports alleging abuse, neglect, or exploitation of vulnerable adults, an increase of 4% from the previous year.
- APS initiated 682 investigations from these reports, an increase of 10.7% from the previous year.
- APS completed 568 investigations, a decrease of 10.8% from the previous year.
- APS placed 39 individuals on the Adult Abuse Registry, a decrease of 30% from the previous year, and a decrease of 74% from two years prior.

It is important to note that, in the three years leading up to the COVID-19 pandemic, reports of maltreatment of vulnerable adults in Vermont increased 23% (from 3,331 reports in SFY216 to 4,080 reports in SFY2019). The number of APS investigations completed climbed 32% in just two years, from 664 in SFY2017 to 875 in SFY2019. Though reports of maltreatment and resulting investigations had a decline in the first half of 2020 due to the pandemic, both reports and investigations increased rapidly that summer and through the rest of that year, resulting in total numbers that exceeded those from two years prior. SFY2022 saw a return to pre-pandemic levels of reports, increasing 4% from the previous State fiscal year.

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## Division of Vocational Rehabilitation

### **Division of Vocational Rehabilitation (DVR) Philosophy**

The Division of Vocational Rehabilitation's (DVR's) mission is to help Vermonters with disabilities prepare for, obtain, and maintain meaningful careers 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 the needs of employers. To better reach both consumers and employers, in SFY2022 DVR rebranded as HireAbility and launched a marketing campaign to promote services for both audiences. The HireAbility rebranding also reinforces the commitment to helping consumers access high wage and high-quality careers through training and education. It also communicates the goal of being a source of motivated and trained Vermont employees.

### **DVR HireAbility Overview**

DVR HireAbility serves people with disabilities in Vermont who face barriers to employment. DVR HireAbility helps consumers figure out what career pathway will work through assessment, counseling, and guidance. DVR HireAbility uses extensive networks in the employer community to create job opportunities, match employer needs with jobseeker skills, and help employers retain staff with disabilities. DVR HireAbility also invests heavily in post-secondary training and education to help those served gain credentials that lead to better employment.

### **DVR HireAbility Staff and Partners**

DVR HireAbility has approximately 130 staff members located in 12 district offices around the state. DVR HireAbility collaborates with other service providers to reach people with disabilities facing challenges to employment. DVR HireAbility has created partnerships with multiple organizations to serve youth, offenders, veterans, people receiving public benefits, and those who need ongoing support.

### **DVR HireAbility Developments and Accomplishments**

#### **The Rebranding of DVR to HireAbility**

The Department name did not speak to the new mission of DVR as a career pathways and workforce development program. To update the brand of the program, DVR used one-time excess federal funds to contract with the Place Creative. After input from staff and stakeholders, the Place Creative came up with the HireAbility brand and related materials. HireAbility was launched in the spring of 2022 with a marketing campaign on multiple platforms, which received overwhelmingly positive feedback from stakeholders.

#### **Helping SSI/SSDI Beneficiaries Achieve Financial Independence through the Kessler Foundation Grant/WorkVT2.0**

DVR HireAbility was selected by the Kessler Foundation to receive a grant designed to improve employment prospects for participants who receive Social Security disability

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benefits (SSI and SSDI). Vermont was one of only 6 projects to be selected out of over 70 applications. The WorkVT2.0 project provides an innovative combination of services and financial incentives to help beneficiaries obtain enough income to end their benefits. The project has sites in Barre, Burlington, Newport and Rutland.

As of September 30, 2022, over 140 beneficiaries signed up to receive WorkVT2.0 services. The project is showing early successes with 68 participants working, of which 21 are working full time. Twenty-six participants are enrolled in post-secondary education. The project provides up to three achievement payments to participants who hit specific earning benchmarks. Forty-two participants have earned at least one achievement payment. Twelve participants have worked their way off benefits and earned all three achievement payments.

### **DVR HireAbility Future Directions**

**Diversity, Equity, Inclusion and Access (DEIA):** In 2021 Governor Scott issued the following proclamation “Vermont seeks to achieve equality and equity and to create a culture in which racial, ethnic and other cultural disparities are openly acknowledged and addressed and where no one person is more likely to experience society’s benefits or burdens than any other person.” In 2022 DVR HireAbility contracted with the company Social Contract to help the DVR HireAbility become as welcoming and inclusive as possible. DVR HireAbility expects a needs assessment will be complete by the end of SFY2023.

**The Vermont Career Advancement Project (VCAP):** DVR HireAbility was awarded a \$6.5 million grant from the US Department of Education to support the Vermont Career Advancement Project (VCAP). VCAP establishes a robust partnership between DVR HireAbility, the Vermont Department of Labor (VDOL), the Community College of Vermont (CCV), Vermont Technical College (VTC), and secondary Career and Technical Education Centers (CTEs), to enable individuals with disabilities to pursue high quality, good paying careers. The project embeds Career Pathways Student Advisors in post-secondary programs to provide intensive support for VCAP participants. VCAP will also partner with other work force development organizations to expand paid, credentialed, occupational training programs in response to employer needs.

DVR HireAbility started enrollment in VCAP in August 2022. The project will enroll 500 participants, with 375 earning Industry Recognized Credentials and 75 enrolling in Registered Apprenticeships. 75% of participants will exit their training programs employed and earning at least 150% of the state’s minimum wage. To date 70 individuals have been enrolled in the program.

**The Career Training Offset (CTO):** DVR HireAbility implemented Career Training Offset (CTO). Participants enroll in training that leads to industry recognized credentials

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and are paid minimum wage for classroom and instruction time. Between October 2021 and June 2022, 48 participants started training programs with support from the CTO. The average number of anticipated paid training hours for these participants was 147 hours. DVR HireAbility expects participation in the CTO to greatly increase in SFY2023 and beyond leading to a higher proportion of DVR HireAbility participants achieving an industry recognized credential.

### **DVR HireAbility Programs and Services**

**DVR HireAbility Core Services:** Services for 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 counselor, who helps 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 HireAbility staff and partners, are enhanced with a range of purchased services and supports.

**DVR HireAbility Placement Services:** DVR HireAbility has an ongoing partnership with the Vermont Association of Business, Industry, and Rehabilitation (VABIR) to provide employment services. DVR HireAbility customers and counselors benefit from dedicated employment consultants who provide job development, job placement, and workplace supports to help people find and keep jobs.

**DVR HireAbility Employment Teams:** DVR HireAbility oversees 12 Business Account Managers (BAMs) who have active relationships with 2,500 employers statewide. The BAMs convene local teams of Agency of Human Service providers who deliver employment services across multiple populations. These Creative Workforce Solutions (CWS) teams coordinate local employer outreach across programs to better serve employers.

**Jump on Board for Success (JOBS):** The JOBS program is a DVR HireAbility partnership with the Department of Mental Health. JOBS provides employment and mental health case management services for youth with severe emotional/behavioral disabilities.

**Benefits Counseling Program:** DVR HireAbility benefits counselors provide information and expertise to Social Security disability program beneficiaries about the impact employment will have on their benefits.

**Employee Assistance Program (EAP):** EAP has offered comprehensive Employee Assistance Program (EAP) services since 1986. EAP provides short-term counseling and referral, management consultation, wellness workshops, and resource information.

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**Rehabilitation Counselor for the Deaf (RCD):** RCDs provide a wide range of services for Vermonters who are services Vermonters are Deaf, hard of hearing, or late deafened.

**Assistive Technology Program (AT):** The AT program helps individuals of all ages find accessible solutions to overcome disability and aging related barriers at home, work, and in the community.

**Farm First:** Farm First provides Vermont's farmer's and their families with support, resources, and information to reduce stress and improve emotional well-being. Farm First Resource Coordinators perform outreach and establish a plan for each farmer. Farm First serves all farmers with approximately 50% of the farmers focused on dairy.

**The Summer Career Exploration Program (SCEP):** SCEP provides high school students with disabilities paid summer work experiences combined with career exploration curriculum. DVR HireAbility district teams partner with local employers to provide meaningful real life work experiences for students with disabilities.

### Results (how much, how well, better off)

The federal Workforce Innovation and Opportunity Act (WIOA) requires the following Common Performance Measures (CPM):

- Job retention six months post program exit.
- Job retention twelve months post program exit.
- Median earnings six months post program exit.
- Credential attainment.
- Measurable skill gains.
- Employer satisfaction.

DVR HireAbility tracks the Careers Initiative strategies through a Performance Dashboard. The Dashboard provides staff and managers with real-time information at the counselor, district, and statewide level. It also serves as a frame of reference to judge how they are doing and show them what they need to focus on to achieve the desired outcomes. SFY2022 Dashboard data shows:

- An 18 percentage-point increase in DVR HireAbility consumers participating in career assessment within 180 days of application.
- A 4 percentage-point increase in DVR HireAbility consumers with higher wage employment plan goals.
- A 3 percentage-point increase in DVR HireAbility consumers earning over 125% of minimum wage at program exit.
- A post-pandemic rebound in services, with a 70% increase in applications taken and 77% increase in plans initiated, resulting in an overall 7% increase in the overall caseload.

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## Division of Vocational Rehabilitation

### Number of People Served:

- A total of 5,871 individuals were served in SFY2022. 5,606 were served in SFY2021.
- 5,234 people were served in the core DVR HireAbility program in SFY2022. 4,957 were served in SFY2021.
- 1,281 high school students were served through the Pre-Employment Transition Services program in SFY2022; 1,189 were served in SFY2021.

### SCEP outcomes for SFY2022:

- 127 students successfully completed a paid work experience with a local employer.
- SCEP engaged 89 employers in providing work experiences for students.
- SCEP included all students with disabilities, regardless of the level of support required for them to be successful.
- 33 students were offered competitive employment after completing the SCEP program (26% of participants).

DVR HireAbility also measured the outcomes for those who participated in SCEP during SFY2021. The following is a summary one-year post SCEP participation:

- 34 students participated in additional employment experiences post SCEP during the school year.
- 41 students are currently employed in competitive jobs or were employed at the time they closed their case with DVR HireAbility.
- 81% (116) of students are still engaged with DVR HireAbility.

**How Well We Served Them:** The DVR HireAbility Consumer Experience Survey is conducted every two years to determine consumers' overall satisfaction with the program. The survey is conducted by a third-party research firm, Market Decisions Research (MDR), which has an extensive background working with VR agencies nationwide. Six hundred forty-six consumers were contacted for our 2022 survey. This survey has provided DVR HireAbility with valuable information regarding consumers' reactions to remote and hybrid services.

The following are highlights from the 2022 results:

- 81% of consumers reported they were satisfied or very satisfied with DVR HireAbility.
- 93% said that they would recommend that their friends or family members seek help from DVR HireAbility.

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- 90% of consumers responded that they are satisfied with their experience working with DVR HireAbility staff and counselors. This is a two percent increase from our 2016 survey.
- 97% felt they were treated by staff with dignity and respect.
- 77% of consumers reported that it was very easy or somewhat easy to connect with their Counselor, even during the times where services were being delivered entirely remotely.
- 63% of consumers reported that they would like to continue to receive services remotely.

**Employer Satisfaction with DVR HireAbility:** In 2022 DVR HireAbility contracted with MDR to develop a survey that would determine employer satisfaction with services. Between February and May 2022, MDR surveyed 72 employers that had contact with a DVR HireAbility team member(s) within the last 18 months. The survey found that 93% of employers were satisfied with services, up from 77% in 2019, and 100% of employers would be open to working with DVR HireAbility again in the future, up from 94% in 2022. Survey results identified that employers would like to be contacted more frequently.

Another focus of the survey this year was apprenticeship and internship opportunities. Of the employers surveyed 60% do not currently have any apprenticeship or internship opportunities, however 76% are interested in partnering with DVR HireAbility to create these opportunities in the future.

The survey results provided invaluable information that will help DVR HireAbility continue to improve services to employers and develop more connections to better serve DVR HireAbility customers.

**How People are Better Off:** A core DVR HireAbility measure of success is the employment status of consumers when they leave the program. In SFY2022, 435 individuals closed their cases with successful employment. This means they had met their individual employment goals and were stably employed for at least 90 days; 237 of these individuals (54%) had a wage above 125% of minimum wage.

DVR HireAbility also received data for the second time on all five WIOA Common Performance Measures. The SFY2022 data show DVR HireAbility participants are achieving better outcomes than the national average on all five performance measures. DVR HireAbility improved on all five performance measures in SFY2022 compared to SFY2021 outcomes.

The DVR HireAbility employment rate four quarters post exit continues to improve, starting at 46.7% in SFY2020, increasing to 48.3% in SFY2021, and increasing again in SFY2022 to 52.5%. DVR HireAbility median earnings two quarters post exit jumped

# SFY2024 Budget Testimony

## Division of Vocational Rehabilitation

from \$3,901 in SFY2020, which was below the national average, to \$4,630 in SFY2021 and then \$5,213 in SFY2022, both above the national average for those years.

Table 1: Table showing Vermont and national averages for key federal WIOA reporting metrics. Data for Vermont combine DBVI and DVR HireAbility agencies, per federal reporting requirements.

MEASURE	NATIONAL AVERAGE SFY 20	VERMONT RESULTS SFY 20	NATIONAL AVERAGE SFY 21	VERMONT RESULTS SFY 21	NATIONAL AVERAGE SFY 22	VERMONT RESULTS SFY 22
MEASURABLE SKILLS GAINS	31.4%	49.3%	43.3%	49.0%	43.0%	56.3%
EMPLOYMENT RATE 2 QUARTERS POST EXIT	51.3%	51.1%	48.6%	53.3%	52.5%	53.6%
EMPLOYMENT RATE 4 QUARTERS POST EXIT	43.6%	46.7%	44.0%	48.3%	48.0%	52.5%
MEDIAN EARNINGS 2 QUARTERS POST EXIT	\$4,005	\$3,901	\$4,280	\$4,630	\$4,776	\$5,213
CREDENTIAL ATTAINMENT	N/A	N/A	23.2%	42.5%	30.8%	43.4%

# SFY2024 Budget Testimony Budget Fact Sheet

SFY2024 TOTAL DAIL PROPOSED BUDGET - \$648,526,351

- General Fund – 4.9%.
- Global Commitment – 87.8%.
- Federal Fund – 6.6%.
- Special and Interdepartmental Funds-less than 1%

<b>SFY2024 DAIL PROPOSED BUDGET BY DIVISION</b>					
<b>DIVISION</b>	<b>Proposed Budget Total</b>	<b>% Of Total Budget</b>	<b>Fund Split</b>		
			<b>GF</b>	<b>GC</b>	<b>Federal /Other</b>
<b>Developmental Disabilities Services Division</b>	\$302,168,532	46.6%	2%	97.4%	Less than 1%
(Includes DS Waiver)					
<b>Adult Services Division</b>	\$299,317,020	46.2%	3.5%	92%	4.5%
(Includes AAA, Attendant Services Programs, Adult Day)					
<b>Vocational Rehabilitation</b>	\$ 29,838,515	4.6%	21%	67%	12%
<b>Blind and Visually Impaired</b>	\$ 3,457,367	Less than 1%	21.1%	8.8%	70.1%
<b>Licensing and Protection</b>	\$ 6,952,185	1%	42.5%	0%	57.5%
<b>Commissioner's Office</b>	\$ 6,792,732	1%	78.3%	Less than 1%	21.1%
<b>Totals</b>	<b>\$648,526,351</b>	<b>100%</b>			

## SFY2024 Budget Testimony

### Summary of Changes from SFY2023 Base Budget to SFY2024 Proposed Budget

<b>Total Change SFY2023 to SFY2024 Recommended Budget</b>	<b>\$40,877,194</b>
<b>(All Gross Dollars)</b>	
<b>DAIL Administration &amp; Support – Sec. B.329</b>	
Total SFY2023 Base Appropriation	\$43,577,243
Proposed Changes:	
1) SFY2024 net increase (Salary & Fringe and Internal Service Funds)	\$ 4,272,413
2) Office of Public Guardian (OPG) positions – three Public Guardians	\$ 318,126
3) Developmental Disabilities Services Division (DDSD) Medical Consultation Contract	\$ 350,000
Total Changes	\$ 4,940,539
<b>SFY2024 Recommend</b>	<b>\$48,517,782</b>
Positions: 316 positions and 319 employees as 3 positions are shared	
<b>Adult Services Division Grants - Sec. B.330</b>	
Total SFY2023 Base Appropriation	\$19,709,925
Proposed Changes:	
1) AFSCME Collective Bargaining Agreement	\$ 122,455
2) Federal Funds adjustment	\$ 22,148
Total Changes	\$ 144,603
<b>SFY2024 Recommend</b>	<b>\$19,854,528</b>
<b>Blind and Visually Impaired Grants – Sec. B.331</b>	
SFY2023 Base Appropriation	\$ 1,761,457
Proposed Changes:	
1) Federal Funds adjustment	\$ 146,147
<b>SFY2024 Recommend</b>	<b>\$ 1,907,604</b>
<b>Brain Injury (TBI) Program - Sec. B.334</b>	
SFY2023 Base Appropriation	\$ 6,163,669
1) Utilization increase (BAA Item)	\$ 150,000
2) AFSCME Collective Bargaining Agreement	\$ 8,259
Total changes	\$ 158,259
<b>SFY2024 Recommend</b>	<b>\$ 6,321,928</b>

## SFY2024 Budget Testimony

### Summary of Changes from SFY2023 Base Budget to SFY2024 Proposed Budget

<b>Choices for Care (CFC) – Sec. B 334.1</b>	
This includes estimated expenditures for nursing homes, home and community-based services and other Medicaid acute/primary care costs for Choices for Care participants.	
SFY2023 Base Appropriation	\$247,242,665
1) Statutory Nursing Home (NH) inflationary rate increase \$4,910,088, Statutory Nursing rebase in SFY2024 to FY2021 costs effective 7/1/23 \$12,878,304	\$ 17,788,392
2) NH bed day utilization adjustment ½ % decrease, 2782 days @258.25/day	\$ (718,452)
3) AFSCME Collective Bargaining Agreement	\$ 1,514,455
4) Utilization adjustment to Moderate Needs	\$ (2,000,000)
5) Home Health rate increase	\$ 3,000,000
6) Federal Funds adjustment	\$ 366,667
Total Changes	\$ 19,951,062
<b>SFY2024 Recommend</b>	<b>\$267,193,727</b>

## SFY2024 Budget Testimony

### Summary of Changes from SFY2023 Base Budget to SFY2024 Proposed Budget

<b>Developmental Services Grants Appropriation - Sec. B.333</b>	
SFY2023 Base Appropriation	\$282,169,830
Proposed Changes	
1) DS Caseload – 353 individuals @ \$46,485 = \$16,409,205 adjust for Equity Fund less (-\$8,112,219) for a total of \$8,296,986	\$ 8,296,986
2) DS Public Safety/Act 248 Caseload 15 @ \$80,568	\$ 1,208,520
3) Annualization of DS Public Safety/Act 248 Caseload outliers 5 individuals (BAA item)	\$ 1,900,000
4) AFSCME Collective Bargaining Agreement	\$ 1,792,587
5) Upper Valley Services (UVS) Crisis Capacity Expansion – base need represented here (BAA item)	\$ 955,358
6) Budget to Actuals realignment	\$ (2,000,000)
7) Transfer funds to DVHA for DS Dental (AHS net-neutral)	\$ (118,821)
8) Federal Funds adjustment	\$ 71,655
9) Commercial Policy Workers Comp premium increase	\$ 274,822
Total changes	\$ 12,381,107
<b>SFY2024 Recommend</b>	<b>\$294,550,937</b>
<b>Vocational Rehabilitation Division - Sec. B.332</b>	
SFY2023 Base Appropriation	\$ 7,024,368
1) Federal Funds adjustment	\$ 3,155,477
<b>SFY2024 Recommend</b>	<b>\$10,179,845</b>

# SFY2024 Budget Testimony Administrative Appropriations by Division

## DEPARTMENT OF DISABILITIES, AGING, & INDEPENDENT LIVING ADMINISTRATION BUDGET BY DIVISIONS SFY24

	TOTAL	VR	DBVI	DD&D	ASD	L & P	Com office	TOTAL
<b>PERSONAL SERVICES DETAIL</b>								
Classified Salary	23,294,583	9,807,934	762,008	3,692,775	3,270,564	4,046,925	1,714,377	23,294,583
Exempt Salary Total	723,196	-	-	-	-	-	723,196	723,196
<b>Salary Total</b>	<b>24,017,779</b>	<b>9,807,934</b>	<b>762,008</b>	<b>3,692,775</b>	<b>3,270,564</b>	<b>4,046,925</b>	<b>2,437,573</b>	<b>24,017,779</b>
FICA	1,834,120	749,919	58,294	261,301	248,816	309,316	186,474	1,834,120
HEALTH	5,813,168	2,633,343	200,411	938,453	559,874	940,506	540,581	5,813,168
RETIREMENT	6,396,140	2,618,712	203,456	988,016	873,242	1,080,530	632,184	6,396,140
DENTAL	271,251	118,360	10,685	43,539	31,788	40,955	25,924	271,251
LIFE	120,373	49,140	3,818	18,542	16,386	20,275	12,212	120,373
LTD	5,449	1,962	174	844	323	405	1,741	5,449
EAP	10,852	4,862	408	1,672	1,258	1,700	952	10,852
<b>Fringe Benefits Total</b>	<b>14,451,353</b>	<b>6,176,298</b>	<b>477,246</b>	<b>2,272,367</b>	<b>1,731,687</b>	<b>2,393,687</b>	<b>1,400,068</b>	<b>14,451,353</b>
Unemployment	135,418	11,151	696	66,630	53,467	1,925	1,549	135,418
WC/ Other Ins	254,989	-	-	-	-	-	254,989	254,989
Emp room allowance	15,470	-	-	8,583	6,887	-	-	15,470
Tuition	40,000	36,000	4,000	-	-	-	-	40,000
Overtime	50,000	20,999	2,080	6,965	9,583	5,754	4,618	50,000
Temp Employee	268,310	243,918	0	8,125	6,520	9,747	0	268,310
Contracts	3,735,973	1,501,091	30,483	1,204,708	685,862	168,686	145,143	3,735,973
Other Personal Services	147,055	-	82,000	-	-	65,055	-	147,055
Vacancy Savings	(921,817)	(426,787)	(26,245)	(131,581)	(99,519)	(109,452)	(129,233)	(921,817)
Sub-Total Misc Personal Services	3,725,396	1,386,372	93,013	1,163,430	663,801	141,715	277,066	3,725,396
<b>TOTAL PERSONAL SERVICES</b>	<b>42,194,530</b>	<b>17,370,604</b>	<b>1,332,267</b>	<b>7,128,572</b>	<b>5,666,052</b>	<b>6,582,327</b>	<b>4,114,707</b>	<b>42,194,530</b>
<b>Number employees by Division</b>	<b>319</b>	<b>143</b>	<b>12</b>	<b>49</b>	<b>37</b>	<b>50</b>	<b>28</b>	<b>319</b>
<b>OPERATING DETAIL</b>								
	TOTAL	VR	DBVI	DD&D	ASD	L & P	Com office	TOTAL
Repair & Maint - Buildings	27,000	15,172	1,458	1,798	1,442	2,000	5,130	27,000
RENTALS	1,624,046	1,356,395	103,845	113,519	-	-	50,287	1,624,046
Rentals - Auto & Other	35,036	12,992	1,414	1,744	1,399	3,667	13,820	35,036
Fee for Space	752,741	186,116	30,365	75,724	114,531	107,977	238,028	752,741
Insurance other than Empl Bene	0	0	0	-	-	0	0	0
Insurance	126,533	0	0	-	-	0	126,533	126,533
Dues	44,000	2,984	2,376	2,929	2,351	25,000	8,360	44,000
Advertising	50,000	27,800	2,700	3,329	2,671	4,000	9,500	50,000
Communications	221,528	88,475	6,963	54,158	30,842	4,000	37,090	221,528
data circuits, internet	43,000	23,348	2,322	2,863	2,297	4,000	8,170	43,000
ADS App Support SOV Emp Exp	327,006	0	0	-	-	0	327,006	327,006
DII Assessment/SLA Charges	554,440	-	-	-	-	-	554,440	554,440
ADS Allocation Exp	380,116	-	-	-	-	-	380,116	380,116
Printing and Binding	200,000	102,200	10,800	16,089	12,911	20,000	38,000	200,000
Registration for Meetings&Conf	60,000	29,760	3,240	3,994	3,206	8,400	11,400	60,000
Postage	79,641	26,397	5,705	7,033	5,644	14,790	20,072	79,641
Travel	578,127	198,987	15,006	161,008	65,227	117,034	20,866	578,127
Other Purchased Services	89,421	21,491	12,650	12,902	12,638	14,370	15,370	89,421
Evaluations	20,000	9,920	1,080	1,332	1,068	2,800	3,800	20,000
Office Supplies	120,000	58,520	6,480	10,763	8,637	12,800	22,800	120,000
Other General Supplies	16,000	7,936	864	1,065	855	2,240	3,040	16,000
Food	5,000	2,480	270	333	267	700	950	5,000
Educational Supplies	18,000	8,928	972	1,198	962	2,520	3,420	18,000
Subscriptions	14,500	7,192	783	965	775	2,030	2,755	14,500
Data Processing Supplies	8,000	3,968	432	533	427	1,120	1,520	8,000
Electricity	6,500	3,224	351	433	347	910	1,235	6,500
Furniture & Fixtures	33,000	16,368	1,782	2,197	1,763	4,620	6,270	33,000
Other Equipment	20,000	4,920	1,080	1,332	1,068	2,800	8,800	20,000
Information Technology Equip	81,000	33,780	670	6,990	5,610	5,000	28,950	81,000
Inf Tech Purchases-Software	63,000	37,720	3,780	4,660	3,740	6,800	6,300	63,000
Vision Assessment	473,100	-	-	-	-	-	473,100	473,100
HR Services	250,517	-	-	-	-	-	250,517	250,517
Other Operating	2,000	992	108	133	107	280	380	2,000
<b>TOTAL</b>	<b>6,323,252</b>	<b>2,288,066</b>	<b>217,495</b>	<b>489,023</b>	<b>280,785</b>	<b>369,858</b>	<b>2,678,025</b>	<b>6,323,252</b>
<b>TOTAL ADMINISTRATION</b>	<b>48,517,782</b>	<b>19,658,670</b>	<b>1,549,763</b>	<b>7,617,595</b>	<b>5,946,837</b>	<b>6,952,185</b>	<b>6,792,732</b>	<b>48,517,782</b>

# SFY2024 Budget Testimony

## Administrative Appropriations by Division

ADMINISTRATION - RECEIPTS	Total	VR	DBVI	DDSD	ASD	L & P	COMM	TOTAL
<b>FEDERAL FUNDS</b>								
TITLE 18 SURVEY & CERT; 93.777	1,795,887					1,795,887		1,795,887
TITLE 19 SURVEY & CERT; 93.798	925,000					925,000		925,000
CLIA; 93.777	5,000					5,000		5,000
Elder Abuse; 93.747	600,000					600,000		600,000
Hospice Impact; 93.777	38,000					38,000		38,000
IND LIVING PART B; 93.389	100,000	100,000						100,000
TITLE III E; 93.052	433,000				433,000		0	433,000
SECTION 110; 84.126A	11,046,829	11,046,829						11,046,829
CMS-EVV; 93.778	25,000			8,333	8,333		8,334	25,000
SECTION 110 DBVI; 84.128	593,909		593,909					593,909
Senior Employment; 17.235	20,447			20,447				20,447
ASSISTIVE TECH. GRANT; 93.464	298,000	298,000						298,000
SHIP; 93.324	4,000				4,000			4,000
Money Follows the Person; 93.971	993,409				993,409			993,409
Social Services Block Grant; 93.667	380,107			380,107				380,107
VT Career Advancement Project (VCAP); 84.421C	1,000,000	1,000,000						1,000,000
Title VI-B (Stafford VR); 84.187A	6,200	6,200						6,200
Medicaid 93.778	6,164,005	0	201,050	1,890,950	2,155,151	531,091	1,385,762	6,164,005
PADS MMIS; 93.778	125,000			41,667	41,667		41,666	125,000
CHIP; 93.787	700			700				700
<b>Total Federal</b>	<b>24,554,093</b>	<b>12,450,829</b>	<b>794,959</b>	<b>2,342,204</b>	<b>3,635,560</b>	<b>3,894,778</b>	<b>1,435,762</b>	<b>24,554,093</b>
<b>Special Funds</b>								
VR FEES (EAP & AT)	1,318,889	1,318,889	0					1,318,889
VENDING	24,568	0	24,568					24,568
CONFERENCE FEES	47,000	3,000	0	24,411	19,589			47,000
<b>Total Special</b>	<b>1,390,457</b>	<b>1,321,889</b>	<b>24,568</b>	<b>24,411</b>	<b>19,589</b>	<b>-</b>	<b>-</b>	<b>1,390,457</b>
<b>Interdepartmental Transfers</b>								
SNAP; 03440	946,284	946,284						946,284
Welfare to Work; 03440	20,000	20,000						20,000
DOH Hospital Surveyor; 03420	100,000					100,000		100,000
<b>Total IntraUnit</b>	<b>1,066,284</b>	<b>966,284</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>100,000</b>	<b>-</b>	<b>1,066,284</b>
<b>GC MCO Indirects</b>	<b>35,000</b>						<b>35,000.00</b>	<b>35,000</b>
<b>General Fund</b>	<b>21,471,948</b>	<b>4,919,668</b>	<b>730,236</b>	<b>5,250,979</b>	<b>2,291,689</b>	<b>2,957,407</b>	<b>5,321,970</b>	<b>21,471,948</b>
<b>TOTAL RECEIPTS</b>	<b>48,517,782</b>	<b>19,658,670</b>	<b>1,549,763</b>	<b>7,617,595</b>	<b>5,946,837</b>	<b>6,952,185</b>	<b>6,792,732</b>	<b>48,517,782</b>

# DAIL Program Summary

\*All data is for SFY2022 unless otherwise noted

Whom We Serve	Program Description	Performance Measures	SFY2024 Proposed
<b>Commissioner's Office</b>			
People with disabilities.	<b>Home Access Program (HAP):</b> DAIL transfers \$100,000 to the Vermont Housing and Conservation Board (VHCB) to support VCIL's HAP Program. The HAP program provides information, assistance, and referral services to help people with physical disabilities locate and secure funding for home modifications.	<b>Performance (SFY2022):</b> VHCB manages the Home Access Program grant and performance measures.	\$100,000 General Funds
<b>Division for the Blind and Visually Impaired</b>			
People who are blind or visually impaired.	<b>DBVI Vocational Vision Rehabilitation Program:</b> Federal law - 29 United States Code (U. S. C), chapter 16. The DBVI Vocational Rehabilitation Program offers free, flexible services to people who are blind or visually impaired with assistance to build adaptive blindness skills and secure or maintain employment. DBVI partners with employers across Vermont to help people who are blind or visually impaired realize their full potential.	<b>Performance (FFY2022):</b> <ul style="list-style-type: none"> <li>• 258 people served.</li> <li>• 18 individuals successfully achieved their employment goals. Individuals who did not achieve their goals will continue to receive services in FFY 23.</li> <li>• 78% had a wage above 125% of the minimum wage.</li> </ul> <b>Statewide Survey--Statewide Survey Results CY 2022</b> (Conducted by Market Decisions: <ul style="list-style-type: none"> <li>• 97% of DBVI consumers are satisfied with the DBVI vocational rehabilitation program.</li> </ul> 95% of DBVI consumers feel they are better off as a result of the	\$1,234,759 Gross

## DAIL Program Summary

\*All data is for SFY2022 unless otherwise noted

		services received from DBVI.	
People who are blind or visually impaired	<b>Independent Living Services</b> helps people who are blind or visually impaired learn skills to remain independent in their homes and communities.	<b>Performance (FFY2022):</b> 93 people were served.	\$74,395 Federal Funds
People who are blind or visually impaired and over age 55.	<b>Older Blind Program</b> helps people who are blind or visually impaired and over the age of 55 learn skills to remain independent in their home and communities. Services are provided through a grant with the Vermont Association for the Blind and Visually impaired.	<b>Performance (FFY2022):</b> 667 people were served.	\$225,000 Federal Funds
People with the most significant visual impairments.	<b>Randolph/Sheppard Program</b> assists blind business owners to successfully run cafeterias and vending programs on state and federal property. 21 V. S. A. § 501 et seq.; federal law (20 U. S. C. § 107 et seq.)	<b>Performance (FFY2022):</b> <ul style="list-style-type: none"> <li>• 4 individuals who operate small café and vending businesses on state and federal property.</li> <li>• Gross earnings for blind business owners increased 1%.</li> </ul>	\$223,450 Gross
People with disabilities.	<b>IL Part B</b> is a grant to the Vermont Center for Independent Living to provide independent living services to people with disabilities through their Peer Advocacy Counseling Program and assistive technology through the Sue Williams Freedom Fund.	<b>Performance (FFY2022):</b> <ul style="list-style-type: none"> <li>• Peer Advocacy Counseling Program (overall, including federal funds): 134 individuals served.</li> <li>• Sue Williams Freedom Fund: 42 individuals served.</li> </ul>	\$150,000 Gross
<b>Adult Services Division</b>			
People age 60 and over.	<b>Older Americans Act funds</b> services for people age 60+ to help them live as independently as possible and to support	<b>Performance (FFY2021):</b> ( NOTE: FFY2022 data will not be final/confirmed until early 2023.) <ul style="list-style-type: none"> <li>• Overall, 54,651 people served</li> </ul>	Approx. \$12,000,000 Total approx. \$5,000,000

# DAIL Program Summary

\*All data is for SFY2022 unless otherwise noted

	<p>family caregivers. Services include nutrition programs, information/referral/ assistance, family caregiver support, case management, health promotion &amp; disease prevention, volunteer outreach and legal services. Federal law-42 U.S.C 3001, et. seq.</p>	<p>(1% increase).</p> <ul style="list-style-type: none"> <li>• Home delivered Meals:             <ul style="list-style-type: none"> <li>○ 8,699 people served (12.6% increase).</li> <li>○ 1,117,247 meals served (14% increase).</li> <li>○ 91% of meals served were provided to OAA eligible Vermonters.</li> <li>○ 96% of home delivered meals consumers reported they had enough to eat.</li> <li>○ 79% of home delivered meals consumers reported that meals help manage or improve their medical condition.</li> </ul> </li> <li>• Congregate Meals:             <ul style="list-style-type: none"> <li>○ 3,351 people served (59% decrease).</li> <li>○ 49,731 meals served (55% decrease).</li> <li>○ 73% of meals served were provided to OAA eligible Vermonters.</li> </ul> <p><i>Note: Congregate meal sites were closed for over half of FFY21.</i></p> </li> <li>• Case Management:             <ul style="list-style-type: none"> <li>○ 8,221 people served.</li> <li>○ 81% of survey respondents report living in the setting of their choice.</li> <li>○ 73% of survey</li> </ul> </li> </ul>	<p>General Funds</p>
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# DAIL Program Summary

\*All data is for SFY2022 unless otherwise noted

		respondents needs met.	
People 60 and over and adults with disabilities.	<p><b>Support and Services at Home (SASH):</b> Statewide Residential-based coordination of health and other services for older Vermonters and/or people with disabilities. Services include case management, health care coordination, nutrition assistance, and disease and falls prevention activities.</p>	<p><b>Performance (SFY2022):</b> SASH operates 54.5 active 'panels' in affordable housing communities, with the capacity to serve over 5,400 participants. Performance: 4,685 people were served. <u>Improve Identification of Social Isolation:</u> 5/2017: 41%. 5/2018: 51.7%. 5/2019: 54.2%. 5/2020: 61.1%. 5/2021: 76.7%. 5/2022: 77.9%. <u>Improve Identification of Suicide Risk:</u> 5/2017: 22.1%. 5/2018: 25.6%. 5/2019: 60.7%. 5/2020: 65.4%. 5/2021: 68%. 5/2022: 74%. <u>Substance Use Screening:</u> 5/2017: N/A. 5/2018: 25% (baseline). 5/2019: 62.3%. 5/2020: 93.5%. 5/2021: 63%. 5/2022: 67.5%.</p>	<p>\$405,841 GC/MCO</p>
People age 60 and over and adults with disabilities.	<p><b>Homesharing:</b> DAIL supports an innovative Homeshare Program in Vermont: HomeShare Vermont is active in Addison, Chittenden, Franklin, Grand Isle, Washington,</p>	<p><b>Performance (SFY2022):</b></p> <ul style="list-style-type: none"> <li>• 197 Vermonters in "matches."</li> <li>• 104 Vermonters provided affordable housing.</li> <li>• 96% of people matched</li> </ul>	<p>\$327,163 GC/MCO</p>

# DAIL Program Summary

\*All data is for SFY2022 unless otherwise noted

	<p>Lamoille, Orange, Caledonia and Windsor Counties.          “Homesharing” arranges live-in ‘matches’ between Vermonters who have a living space to share and others who need a place to live.          The Homeshare Program have been successful in helping people stay in their own homes, as well as in helping people find affordable housing.</p>	<p>reported perceived benefits in at least one quality of life measure such as sleeping better, feeling safer, eating better, happier, get out more and call family for help less often.</p> <ul style="list-style-type: none"> <li>• 50% of matched home providers reported they would be unable to remain safely and comfortably at home without a home sharer.</li> </ul>	
<p>Family caregivers of people with Alzheimer’s Disease and Related Disorders.</p>	<p><b>Dementia Respite</b>          The Dementia Respite Grant is managed by Vermont’s five Area Agencies on Aging. The goal is to help family caregivers by reducing stress, maintaining their health, and maintaining their caregiving roles. Grants may be used to pay for a range of services including in-home care, respite care, homemaker services, and Adult Day services.</p>	<p><b>Performance (SFY2022):</b></p> <ul style="list-style-type: none"> <li>• 132 people served (3% increase).</li> <li>• Caregiver uses of funds:              93 used funds for Respite Care.              25 used funds for Supplemental Services.              8 used funds for Residential Respite.              3 used funds for Counseling.</li> </ul>	<p style="text-align: right;">\$250,000              General Funds</p>
<p>Adults under age 60 with disabilities.</p>	<p><b>Home Delivered Meals – VCIL</b>          The VT Center for Independent Living (VCIL) contracts with home delivered meals partners to provide nutritious meals for people under age 60 who are at nutritional risk.</p>	<p><b>Performance (SFY2022):</b></p> <ul style="list-style-type: none"> <li>• 491 people served (2% decrease).</li> <li>• 95% of respondents to a consumer survey reported that meals helped maintain their health (3% increase).</li> <li>• 96% of respondents to a consumer survey reported that staff were easy to reach when help was needed (2% increase).</li> </ul>	<p style="text-align: right;">Approx.              \$480,000              General Funds</p>

## DAIL Program Summary

\*All data is for SFY2022 unless otherwise noted

<p>People age 60 and older.</p>	<p><b>Self-Neglect</b>                  The Self-Neglect Initiative is for the ongoing effort to help and coordinate support for individuals age 60 years and older who are self-neglecting. The focus of this effort is to enhance a coordinated community response through a combination of training and education, outreach, assessment, service provision and community engagement. Service provision includes information and assistance/referral and case management (including assessment, identifying goals, working towards those goals, and engaging with additional community providers for other relevant services such as clinical therapy, meals, housecleaning, money management, etc.). Funds are distributed to the five (5) Area Agencies on Aging (AAAs) designated through the Older Americans Act to serve those age 60 and older in greatest economic and social need.</p>	<p><b>Performance (SFY2022):</b></p> <ul style="list-style-type: none"> <li>• 159 people served.</li> <li>• 100% of people served had complete assessments (same as previous year).</li> <li>• 84% of people served had goals (8% decrease).</li> <li>• 88% of people had goals with provider engagement (7% increase).</li> </ul>	<p style="text-align: right;">\$265,000 GC</p>
<p>Adults living in congregate housing and Vermont farms.</p>	<p><b>Senior Farmers Market</b>                  The Northeast Organic Farmer's Association (NOFA) recruits congregate housing sites and farms to participate in Community Supported Agriculture (CSA). The goal is to support local farms while bringing fresh local food to seniors</p>	<p><b>Performance (SFY2022):</b></p> <ul style="list-style-type: none"> <li>• 1989 people served (2% decrease).</li> <li>• 211 farms participated (12% decrease).</li> <li>• 70 housing sites participated (no change).</li> </ul>	<p style="text-align: right;">Approx. \$46,000 Federal Funds</p>

# DAIL Program Summary

\*All data is for SFY2022 unless otherwise noted

<p>Adults living in licensed long-term care facilities and all Choices for Care participants.</p>	<p>residing in congregate housing.</p> <p><b>The Vermont Long Term Care Ombudsman Project of Vermont Legal Aid</b> protects the safety, welfare and rights of older Vermonters who receive services in licensed nursing facilities, residential care homes, assisted living residences and to CFC participants of any age receiving services in any of the settings above as well as in home- and community-based settings. 33 V. S. A. § 7501 et. Seq.</p>	<p><b>Performance (FFY2021):</b> Changes below were impacted by the suspension of visits to LTC facilities for half the FFY.</p> <ul style="list-style-type: none"> <li>• 330 complaints were opened (38% increase).</li> <li>• 98% of open complaints were verified.</li> <li>• 241 complaints were closed (72% increase).</li> <li>• 225 complaints were resolved (1% decrease).</li> <li>• Provided 310 consultations to individuals in long-term care facilities (33% decrease).</li> <li>• Provided 57 consultations to people receiving HCBS (44% decrease).</li> <li>• Provided 151 consultations to long term care facility providers (80% increase).</li> <li>• Provided 106 consultations to HCBS agencies/providers (2% decrease).</li> <li>• Approximately 96% of complaints were fully or partially resolved to the satisfaction of the individuals receiving services which is well above the 75% target and national average.</li> <li>• 30% of all long-term care facilities were visited.</li> <li>• Made 101 non-complaint related visits to maintain a</li> </ul>	<p style="text-align: right;">Approx. \$700,000 Total</p>
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# DAIL Program Summary

\*All data is for SFY2022 unless otherwise noted

<p>People age 60 and over, adults with physical disabilities, and their families.</p>	<p><b>Choices for Care</b> provides a range of services to support people living at home, in an Enhanced Residential Care Home, Adult Family Care or in a nursing facility. Vermont Global Commitment (GC) Medicaid Regulations &amp; Vermont Choices for Care regulations.</p>	<p style="text-align: center;">presence in facilities.</p> <p><b>Performance (SFY2022):</b></p> <ul style="list-style-type: none"> <li>• 6,783 people received services in all settings (High/Highest/Moderate).</li> <li>• 5,711 people served in High/Highest:             <ul style="list-style-type: none"> <li>○ 2,805 were served in home-based settings.</li> <li>○ 762 were served in Enhanced Residential Care.</li> <li>○ 2,745 were served in skilled nursing facilities.</li> <li>○ Some people were served in multiple settings above.</li> </ul> </li> <li>• 87-91% of clinical determinations (high/highest) were completed within 30 days or less (target 95%). The clinical team experienced more fluctuations in the workload for clinical determinations than normal.</li> <li>• 1,198 people received Moderate Needs Group (MNG) services.</li> </ul> <p>National Core Indicators for Home-Based High/Highest settings (most recent data from 2018 survey):</p> <ul style="list-style-type: none"> <li>• 54% of people surveyed reported they get to do the things they want to do outside the home as often as they want to, compared to 61%</li> </ul>	<p style="text-align: right;">Over \$267,000,000</p>
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# DAIL Program Summary

\*All data is for SFY2022 unless otherwise noted

		<p>nationally.</p> <ul style="list-style-type: none"> <li>• 67% of people surveyed reported that they can choose or change any of the services they receive, compared to 69% nationally.</li> <li>• 3% of people reported that they have a paid job in the community, compared to 3% nationally.</li> <li>• 39% of people not employed reported they would like a paid job in the community, compared to 20% nationally.</li> </ul>	
People transitioning from nursing homes to the community.	<p><b>Money Follows the Person (MFP) Grant</b> is a special program supplementing the CFC program who choose to transition: \$2,500 per person to help overcome barriers for returning to the community (rent, mortgage, etc.), and enhanced FMAP on all HCBS for each person enrolled and transitioned to approved housing. The period of enrollment is 365 days.</p>	<p><b>Performance (SFY2022):</b></p> <ul style="list-style-type: none"> <li>• 81 people transitioned from institutions to community-based settings.</li> <li>• 19 people were readmitted to a nursing facility.</li> </ul>	MFP expenses in the DVHA budget. Administrative expenses in DAIL (100% Federal Funds)
Adults with physical and/or cognitive impairments.	<p><b>Adult Day Services</b> is a community-based non-residential service that assists individuals to remain active in their communities by maximizing health, independence and optimal functioning. Vermont Global Commitment to Health regulations; Vermont Choices for Care regulations.</p>	<p><b>Performance (SFY2022):</b></p> <ul style="list-style-type: none"> <li>• 331 people were served in Adult Day Centers in SFY2022.</li> <li>• 159 were served through High/Highest.</li> <li>• 98 were served through Moderate Needs Group.</li> <li>• 85 served through Day Health Rehabilitation Services.</li> </ul>	<p style="text-align: right;">Approx. \$4,000,000 Gross Choices for Care, and Day Health Rehab Services</p>

## DAIL Program Summary

\*All data is for SFY2022 unless otherwise noted

<p>Adults with disabilities.</p>	<p><b>Attendant Services Program (ASP)</b> provides physical assistance with activities of daily living to adults with severe and permanent disabilities, allowing people to remain in their own homes and communities. General Funds option has been frozen since July 2014. 33 V. S. A. § 6321; Vermont program regulations.</p>	<p><b>Performance (SFY2022):</b> Unduplicated served throughout the entire year:</p> <ul style="list-style-type: none"> <li>• 102 people served (2% decrease).</li> </ul> <p><u>Medicaid Option</u> - Serves people eligible under State Plan Medicaid and are able to self-direct:</p> <ul style="list-style-type: none"> <li>• 63 people served (2% increase).</li> </ul> <p><u>General Fund Option:</u> Serves people who are not Medicaid eligible and are able to self-direct. This option has been frozen since July 1, 2014.</p> <ul style="list-style-type: none"> <li>• 35 people served (8% decrease).</li> </ul> <p><u>Personal Services (SSBG):</u> Serves people who are Medicaid eligible but are not able to self-direct and use an agent to manage caregivers.</p> <ul style="list-style-type: none"> <li>• 4 people served (no change).</li> </ul>	<p style="text-align: right;">Approx. \$2,500,000</p>
<p>Adults who rely on medical technology</p>	<p><b>High Technology Home Care</b> provides skilled nursing care to adults 21 and older who are Medicaid eligible and depend on technology. Services include RN oversight, treatment coordination, medical supplies, and sophisticated medical equipment. (High Technology services for people under the age of 21 are managed by the VT Department of Health.) Benefits are covered</p>	<p><b>Performance (SFY2022):</b> 13 people were served.</p>	<p style="text-align: right;">DVHA appropriation Approx. \$4,000,000 GC</p>

# DAIL Program Summary

\*All data is for SFY2022 unless otherwise noted

<p>People with moderate to severe traumatic brain injuries.</p>	<p>within the Medicaid State Plan.</p> <p><b>Traumatic Brain Injury Program (Brain Injury Program)</b> diverts and/or returns individuals from hospitals and facilities to community-based settings. Services are rehabilitation-based and driven by participants goals and choices, intended to help people achieve their optimum independence and return to work.</p>	<p><b>Performance (SFY2022):</b></p> <ul style="list-style-type: none"> <li>• 86 people served (2% decrease).</li> <li>• 7 people receiving rehabilitation services were employed through the 3<sup>rd</sup> quarter of CY2022.</li> <li>• No one graduated from the rehabilitation program to independence.</li> </ul> <p>DAIL worked with providers to shift more long-term participants to the Choices for Care program when possible, reducing the need to fund their services with TBI program dollars.</p> <p>National Core Indicators data (most recent data from 2018 survey):</p> <ul style="list-style-type: none"> <li>• 51% of respondents reported they get to do the things they want to do outside the home as often as they want to, compared to 61% nationally.</li> <li>• 68% of respondents reported that they can choose or change any of the services they receive, compared to 69% nationally.</li> <li>• 3% of respondents reported that they have a paid job in the community, compared to 3% nationally.</li> </ul>	<p style="text-align: right;">Over \$6,000,000 GC</p>
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# DAIL Program Summary

\*All data is for SFY2022 unless otherwise noted

		<ul style="list-style-type: none"> <li>The percentage of people served in the TBI program who are not currently employed and would like a job could not be reported due to the low number of responses.</li> </ul>	
<b>Developmental Disabilities Services Division</b>			
People with developmental disabilities and their families.	<p><b>Home and Community-Based Services (HCBS)</b> consist of a range of services to support individuals with developmental disabilities and their families, increasing independence and supporting participation in their local communities. Priorities are to prevent imminent risk to the individual’s personal health or safety; prevent an adult who poses a risk to public safety from endangering others; prevent or end institutionalization; maintain employment upon graduation from high school; and provide training in parenting skills for a parent with developmental disabilities to help keep a child under the age of 18 at home. 18 V. S. A. chapter 204A; Vermont Developmental Disabilities Act Regulations; Vermont Global Commitment to Health regulations.</p>	<p><b>Performance (SFY2022):</b></p> <ul style="list-style-type: none"> <li>3,334 people served.</li> <li>223 people served who were considered to pose a risk to public safety; of whom 26 were on Act 248.</li> <li>3 individuals were served in Psychiatric Inpatient Treatment (Level 1 beds).</li> <li>40 people with I/DD lived in nursing facilities; of whom 26 received Specialized Services.</li> <li>In SFY2021 (most current data), 40% of working age people (age 18 – 64) were employed.</li> </ul>	<p>Approx. \$237,000,000 GC</p>
People with developmental disabilities and their families.	<p><b>Flexible Family Funding (FFF)</b> provides funds to be used flexibly, at the discretion of the family, to purchase goods,</p>	<p><b>Performance (SFY2022):</b></p> <ul style="list-style-type: none"> <li>929 people served.</li> <li>The number of family members reporting that they</li> </ul>	<p>Approx \$1,100,000 GC</p>

# DAIL Program Summary

\*All data is for SFY2022 unless otherwise noted

	<p>services and supports that benefit the individual and family. 67% (619) of the people served were children under the age of 18. 18 V. S. A. chapter 204A; Vermont Developmental Disabilities Act Regulations.</p>	<p>anticipated using funds for:</p> <ul style="list-style-type: none"> <li>○ Respite: 251.</li> <li>○ Assistive Technology: 207.</li> <li>○ Individual needs: 778.</li> <li>○ Household needs: 664.</li> <li>○ Recreation: 492.</li> <li>○ Other: 221.</li> </ul> <ul style="list-style-type: none"> <li>● The number of families reporting that funds would address the following outcomes:             <ul style="list-style-type: none"> <li>○ Enhance family stability: 576.</li> <li>○ Improve quality of life: 541.</li> <li>○ Increase independent living: 477.</li> <li>○ Maintain housing stability: 446.</li> <li>○ Health and safety: 368.</li> <li>○ Increase communication skills: 333.</li> <li>○ Avert crisis placement: 77.</li> </ul> </li> </ul>	
<p>Children and youth with a mental health or developmental disability and their families.</p>	<p><b>Family Managed Respite (FMR)</b> provides respite for children and youth up to age 22 with a mental health or developmental disability diagnosis who do not receive home and community-based services funding. Respite can be used as needed, either planned or in response to a crisis.</p>	<p><b>Performance (SFY2022):</b></p> <ul style="list-style-type: none"> <li>● 325 children and youth with a diagnosis of developmental disability received FMR. This does not include children with only a mental health diagnosis, or children receiving integrated services with bundled payments.</li> </ul>	<p>Approx. \$1,600,000 GC</p>
<p>Children and youth with a developmental disability and their families.</p>	<p><b>The Bridge Program</b> provides care coordination to families to help them access and/or</p>	<p><b>Performance (SFY2022):</b></p> <ul style="list-style-type: none"> <li>● 404 children and youth served. This does not include</li> </ul>	<p>Approx. \$800,000 GC</p>

## DAIL Program Summary

\*All data is for SFY2022 unless otherwise noted

	coordinate medical, educational, social and other services for children and youth up to age 22.	<p>children receiving integrated services with bundled payments.</p> <ul style="list-style-type: none"> <li>91% of goals were being met (based on agencies reporting service goals and the service goal outcomes achieved).</li> </ul>	
Adults with developmental disabilities and older Vermonters who have been found to lack decision making abilities concerning basic life decisions.	<p><b>Office of Public Guardian (OPG)</b> provide public guardians to assist and empower people under guardianship in making decisions and taking actions in critical life areas. Courts assign a public guardian when an individual need a guardian to protect his or her rights or welfare, no friend or family member is available to serve as guardian, and the individual needs a public guardian. OPG facilitates guardianship evaluations for new private and public guardianship applicants. OPG also provides representative payee services and case management services to a limited number of people. 18 VSA 9301-9317; 14 VSA 3093.</p>	<p><b>Performance (SFY2022):</b></p> <ul style="list-style-type: none"> <li>759 adults received guardianship services including:                             <ul style="list-style-type: none"> <li>613 adults with developmental disabilities.</li> <li>144 adults over age 60.</li> <li>2 adults received case management only.</li> </ul> </li> <li>287 adults received representative payee services.</li> </ul>	<p>Approx. \$3,800,000</p>
<b>Division of Licensing and Protection</b>			
People receiving services from Vermont health care facilities and agencies.	<p><b>Survey and Certification (S&amp;C)</b> provides regulatory oversight of health care facilities and agencies under state and federal regulations. 33 V. S. A. § 7101 et seq.; state regulations for each type of Long-</p>	<p><b>Performance (SFY2022):</b></p> <ul style="list-style-type: none"> <li>S&amp;C conducted 241 onsite investigations across all state and federal provider groups.</li> <li>S&amp;C was on time for 100% of Federal Surveys and 15% of State Surveys. S&amp;C has</li> </ul>	<p>Approx. \$3,100,000 Gross</p>

# DAIL Program Summary

\*All data is for SFY2022 unless otherwise noted

	<p>Term Care facility; federal regulations for nursing homes.</p>	<p>received Legislative permission to hire three additional nurse surveyors to enhance oversight of state licensed facilities, and to survey these facilities annually.</p> <ul style="list-style-type: none"> <li>• Nursing facility surveys: 8.6% of nursing homes had no deficiencies or isolated deficiency with substantial compliance.</li> <li>• 0% of Nursing Homes had deficiencies reflecting potential for minimum harm.</li> <li>• 77% of nursing homes had deficiencies reflecting no actual harm but potential for more than minimum harm.</li> <li>• 14.3% of nursing homes had deficiencies reflecting actual harm or immediate jeopardy of residents.</li> </ul>	
<p>Vulnerable adults.</p>	<p><b>Adult Protective Services (APS)</b> investigates allegations of abuse, neglect and/or exploitation, raises awareness of adult maltreatment in all of its forms, and provides information about alternatives and services for vulnerable adults who are the victims of maltreatment. APS has been level-funded for nearly a decade despite rising reports of maltreatment. Chapter 69 of Title 33 of the Vermont Statutes Annotated.</p>	<p><b>Performance (SFY2022):</b></p> <ul style="list-style-type: none"> <li>• APS received 3,590 reports alleging abuse, neglect, or exploitation of vulnerable adults, an increase of 4% from the previous year.</li> <li>• APS initiated 682 investigations from these reports, an increase of 10.7% from the previous year.</li> <li>• APS completed 568 investigations, a decrease of 10.8% from the previous year.</li> </ul>	<p style="text-align: right;">Approx. \$1,600,000 General Funds</p>

# DAIL Program Summary

\*All data is for SFY2022 unless otherwise noted

		<ul style="list-style-type: none"> <li>• APS placed 39 individuals on the Adult Abuse Registry, a decrease of 30% from the previous year, and a decrease of 76% from two years ago.</li> </ul>	
<b>Division of Vocational Rehabilitation/HireAbility</b>			
People with disabilities	<p><b>General Vocational Rehabilitation (VR)</b> offers free, flexible services to any person or employer dealing with a disability that affects employment. Partner with human service providers and employers across Vermont to help people with disabilities realize their full potential.</p>	<p><b>Performance (SFY2022):</b></p> <ul style="list-style-type: none"> <li>• 5,871 students and adults were served.</li> <li>• 5,234 people were served in the core VR program.</li> <li>• 1,281 high school students served through Pre-Employment Transition Services only.</li> <li>• 435 individuals closed their VR case with successful employment. This means they had met their individual employment goal and had been employed for at least 90 days and were stable.</li> <li>• 54% had a wage above 125% of the minimum wage.</li> <li>• The employment rate two quarters post exit improved from 49% in SFY2019 to 52.5% in SFY2022.</li> <li>• The median earnings two quarters post exit increased from \$3,516 in SFY2019 to \$4,776 in SFY2022.</li> </ul>	<p>\$6,669,368 Gross</p>

# DAIL Program Summary

\*All data is for SFY2022 unless otherwise noted

		<p>Results from the most recent customer survey (2022):</p> <ul style="list-style-type: none"> <li>• 97% of customers felt they were treated with dignity and respect.</li> <li>• 93% of customers would tell their friends with disabilities to go to DVR for help with employment.</li> <li>• 90% of consumers reporting that they are satisfied with their experience working with DVR staff and DVR Counselors provided by DVR.</li> <li>• 77% of participants reported it was easy to contact their counselor even when services were 100% remote during COVID</li> </ul>	
People who are deaf or hard of hearing.	<b>Vermont Interpreter Referral Service (VIRS)</b> operated by VANCRO enables organizations and individuals to hire qualified interpreters.	<p><b>Performance (Calendar Year 2022):</b></p> <ul style="list-style-type: none"> <li>• VIRS filled 8,888 requests for interpreters from State government and the community.</li> </ul>	\$55,000 Gross
People with disabilities.	<b>Assistive Technology Program</b> helps people of all ages and abilities to achieve greater independence, efficiency and control over their environment using assistive technology. Required by federal statute: Federal Assistive Technology Act.	<p><b>Performance (SFY2022):</b></p> <ul style="list-style-type: none"> <li>• 781 people were provided information and assistance about AT and how it might help them.</li> <li>• 29 people were provided assistance in securing funding for AT equipment.</li> <li>• The AT program conducted 195 device demonstrations for individuals and caregivers/families who might</li> </ul>	Approx. \$300,000 Gross

## DAIL Program Summary

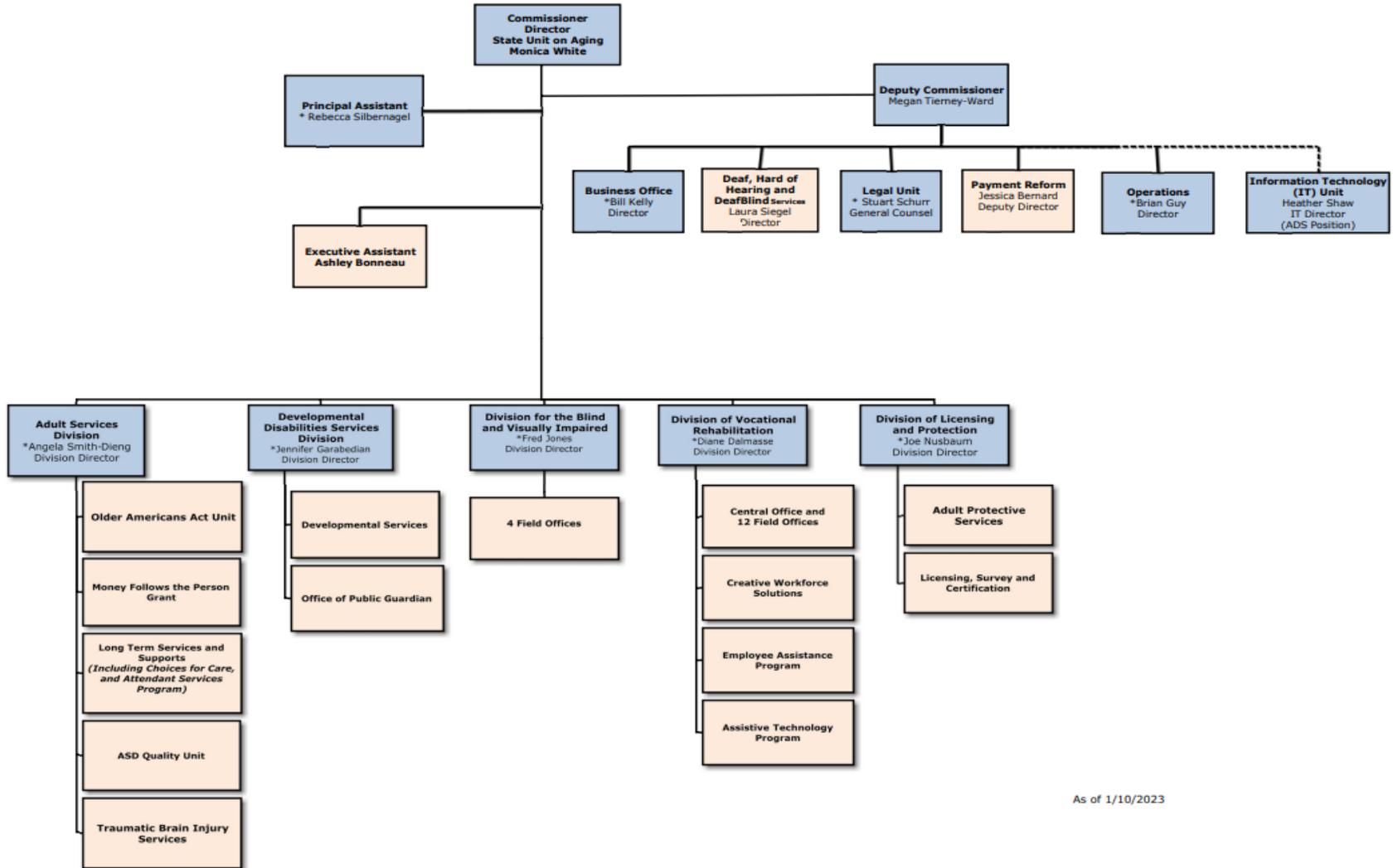
\*All data is for SFY2022 unless otherwise noted

		<p>benefit from AT.</p> <ul style="list-style-type: none"> <li>The AT program made 692 device loans for 412 individuals to allow them to try out an AT tool before making a purchase.</li> </ul>	
<p>Farmers and their families.</p>	<p><b>Farm First Program</b> provides Vermont's farmers and their families with support, resources, and information to reduce stress and improve emotional well-being. Resource Coordinators perform outreach and establish a plan for each farmer. The plan may include up to 12 counseling sessions with an Employee Assistance Program counselor or an affiliate, a referral for HireAbility services, and/or other supports such as business advising, agricultural mediation, etc.</p>	<p><b>Performance (SFY2022):</b></p> <ul style="list-style-type: none"> <li>80 farmers were served.</li> </ul>	

# DAIL State Fiscal Year 2023 Program Summary

\*All data is for SFY2021 unless otherwise noted

## Department of Disabilities, Aging, and Independent Living (DAIL) Organizational Chart State Unit on Aging (SUA)



As of 1/10/2023

\* = Identifies contacts for DAIL Senior Leadership