

# DS State Program Standing Committee (SPSC)

November 18, 2021

## Meeting Held Virtually on Microsoft Teams

### Attendees

**Committee members:** David Ballou, Susan Yuan, Bethany Drum, Dawn Danner, Karen Price, Max Barrows, Ed Place, Connie Woodbury, Barb Prine, Lyn Ujlaky, Cheryl Thrall

**Guests:** Nicole Leblanc, Joe Greenwald, Jen Hayes, Collette Wilson, Natalie, Gloria Quinn, Sima Breiterman, Elise Haydon, Marie Lallier, Jess Moore, Tonya Mason, Barbara Lee, Kara Artus, Al Vecchione, David Cannamela

**State Employees:** Clare McFadden, Jessica Bernard, Lisa Parro, June Bascom, Kirsten Murphy, Ellen Booth, Jeff Coy, Jackie Rogers, Leslie Pinkham, Susan Aranoff

### Roll Call and Review Agenda

A roll call was completed, and the meeting agenda was reviewed.

### Meeting Minutes, SPSC Member Check-In

The SPSC meeting minutes from the October 21, 2021 meeting were reviewed. Bethany made a motion to accept the meeting minutes, Dawn seconded the motion, and the motion was passed.

### Francis Foundation Closing

The Francis Foundation is closing its services to people with developmental services. Nineteen people receiving services at the facility are being transitioned to other agencies.

Clare acknowledged the years of service the Francis Foundation has provided, improving the lives of many challenging individuals, including those with a history of trauma, and conducting training in the Network. Clare acknowledged all the years of services Al Vecchione and David Cannamela have given to the agency and those that they support. Clare thanked Al and David and presented them with a plaque and certificate of appreciation for the many years they worked for Francis Foundation. Meeting attendees voiced their appreciation to the Francis Foundation.

Jeff Coy shared that he has been involved with FRF for many years in his role as a Quality Reviewer, as well as when he worked for WCMH. He said that Al was one of a kind and that Dave was always the smartest man in the room. Jeff said they made what they do look simple, but it was both complex and basic: be kind, be present, show up when someone needs you, and practice, practice, practice. They made sure everyone who worked for them received training. Their interactions were effective because the tenet “Nothing About Us with Us” was standard routine and they knew relationship were the key to everything. They have stacks of binders filled with people’s stories in respectful language, and personal information and data would inform staff who came along later. They knew the importance of keeping the person’s history. They had extraordinary commitment. Al and Liz Guilfoyle would be out at all hours of the day and night, any day of the week, because that’s how the work gets done. There were other standouts at FRF, such as Eileen Mulcahy and Dr. Joe Hasazi.

Al shared that he came to Vermont 35 years ago. He just wanted to spend his life with friends and family doing something good. In the end, he said, it’s easy to do it if you love the people you are with.

David said the past 18 or 19 years have been rich and rewarding and was a wild ride. He said FRF staff are an extraordinary group of people who did extraordinary things. He’s glad they will be continuing to work in the system because the work isn’t done. They are packaging training into a curriculum so it can be shared with the larger provider network.

Barb P. said that FRF always had an environment where people felt comfortable, where there was a lot of enjoyment, laughter, and affection.

Jackie Rogers shared she’d known Al from the early UVM days in the Psychology Dept. She saw his involvement in the system as a developmental progression – RCL, UVS Moretown, VCIN (a key factor in the closing of BTS and having a fully community-based system), then FRF. Al and Dave combined to form a “right brain/left brain” approach, helping FRF get the things done that needed to be done to stay in compliance plus doing all the good things that made it all work so well.

Sima Breiterman said she was also a member of the “40-year club”. Monday meetings at CSAC Al would talk about what people needed in a way that was actually creating relationships. Al has an amazing ability to dial into people to know what they need.

### DDSD Director Updates

Tomorrow is Lisa’s Last day after 41 years. Lisa was acknowledged for all her great contributions to the state, to the SPSC and for all the work she’s done at DDSD.

## **DDSD Staff Recruitment**

- DDSD is still recruiting for a DDS Director with a couple more interviews this week. Connie agreed to take part in the second interview if there is one.
- Tomorrow is Clare's last day but she will be coming back as a temp after Thanksgiving.
- Jessica is stepping in as Interim Director.
- Jeff Nunemaker is starting on Monday as the Assistant Director. Amy will be around until December 17<sup>th</sup> while onboarding Jeff.
- Judy Spittle has been hired for Lisa's Administrative Coordinator position starting on 12/6.
- Recruitment is taking place for Ed Riddle's position as the Public Safety Specialist.
- There is active recruitment for the Quality Management Reviewer (Jeff's former position) and the Children's Specialist position (Diane Bugbee's position for when she retires in January).
- Internal recruitment is underway for Jackie's replacement as the Director of the Office of Public Guardian to allow for a sufficient transition.

Clare said she feels good about who we are hiring and asked for patience with the Division as people learn their new roles.

## **Workforce Challenges**

Providers have been updating the Division on their workforce challenges, specifically the loss of direct service workers and Service Coordinators. Agencies are primarily focused on health and safety at this point and trying to fill vacancies. Some agencies are using vacancy savings to increase wages with the hope that additional funds can be secured later. VCP has had conversations with Secretary Smith and he has asked for workforce data from agencies. He will explore additional funds for providers from remaining COVID Relief funds.

The F-MAP funding (10% enhancement on HCBS) given to states is moving forward. It is not clear yet how funding will be made available to providers, though workforce is high priority for use of those funds. There is high anxiety at agencies as staff are still working significant amounts of overtime and they are getting tired and stressed.

Karen P. asked about what is happening for families and if they are eligible for extra funding. Clare said the Division sent out information on who is eligible for the difficulty of care payments. Agencies only recently received the information to know what funding is available. Some agencies are working to get the funding out to families, but it has not been consistent across all providers. Information was not sent to families via ARIS. Clare said the Division sent out memo about difficulty of care payments for families and who is eligible for it. If it was not sent to the employers of records, that can be done.

Max B. asked about how the FMAP funding can be used to raise wages. Clare said that has not been decided yet. Jess said the goal of FMAP is for short term use and must be spent within a certain time frame, so it cannot go toward long-term commitments that need to be funded overtime. Susan A. asked about the number of people who are unhoused getting DD services.

Marie L. said VCP is tracking it quarterly and Jess said there is a count of people unhoused at the AHS level.

Susan Y. asked if there is interest in a DD Ombudsman as she has been meeting with Tim McHugh, the person in that role in Washington State. Clare said the Ombudsman role is still being talked about as a strategy in the Conflict-of-Interest work.

Sherry T. said that in 35 years she's never seen it this bad. Workers need to be paid a livable wage. Agencies are using sign-on and retention bonuses with staff and Shared Living Providers. Everyone is short staffed and some group homes are closing. A long-term fix and a shift in what employees expect is needed

### **Conflict of Interest in Case Management**

DAIL received an answer from CMS regarding how Vermont must comply with Conflict of Interest in Case Management. Vermont has to separate out Case Management (CM) from direct services with a separate organization providing CM. This cuts across all HCBS programs at AHS (DD Services, Choices for Care, Brain Injury, Children's Mental Health). CMS can grant Vermont up to 5 years to develop a solution. DDS is working on a Plan to Plan that is due in mid-December that will request a full 5-years. CMS then determines how much time they will give Vermont. We expect approval of the 5 years as that will coincide with Vermont's next HCBS Waiver renewal with CMS. The Plan will have a lot of engagement with stakeholders and will include many steps, such as defining what CM is and what it is not. We then will need to update our Regulations, State System of Care Plan, Quality Review Standards, financing, mitigation strategies – and then implementation of the Plan. It's a big project with lots of moving parts. It's important to keep the Plan to Plan at a high level so we have flexibility down the road. Once we get the Plan approved by CMS we will start the work with all our partners.

It was clarified that the Plan will include keeping the Choice model during the transition period to make it easier for people who are currently happy with their case manager. However, the Choice model will just be part of the phasing in and will not be a long-term option based on CMS's decision.

There was concern expressed that DVHA has the final decision-making authority regarding the Plan. Clare said that while DVHA oversees Medicaid in Vermont and has direct communications with CMS, they do not trump the Department in terms of decision making. It's a partnership with DVHA as the facilitator of the process. Barb noted that some staff at DVHA understand our system but most do not and that more work has to be put in to make sure others understand the DD system throughout this process.

## Payment Reform & SIS-A

Jess acknowledge Clare for her work on Payment Reform and thanked her for all her efforts. Jess gave an update since the last meeting. Vermont Care Partners sent a letter requesting the State to pause the SIS-A. AHS and DAIL leadership made the decision not to pause. Some providers have indicated that the SIS-A has not been a problem for them and appreciate having an independent tool to determine the needs of people in services. Vacancy rates vary across the state from 30% - 60%. Jess wants to hear from agencies if they need more accommodations or other dispensation if they can't manage the work.

Jess shared about having a monthly Town Hall geared toward self-advocates and families and asked the group what would be helpful to have as part of a Town Hall. Susan Y. said it would be helpful to get input from people most impacted by use of these tools but is concerned that it doesn't make any difference what is said as people are not feeling heard. Max B. expressed concern that providers are in on meetings with DDSD and self-advocates are only offered Town Halls. GMSA wants to be in on meetings as well. Connie W. shared input from a person who experienced the assessment in October where the assessor didn't know the individual or how the person communicated and didn't feel the assessor got an accurate take on what the person might need. Dawn D. said that people who are making the decision to continue with the SIS-A are not understanding the dire-strights agencies are in. She wondered about the purpose of the Town Hall and what continued feedback on the tool will lead to.

Sherry T. expressed concern regarding the process not taking into context what the person needs and what is happening in a person's life. Others were worried about individuals being asked questions about complex behavior issues that would be upsetting to them. Clare said Case Managers can give assessors input on questions and issues to avoid that might be triggering to an individual. Max B. stated that GMSA has only heard positive feedback from self-advocates.

Jess is hoping to get to 500 completed assessments by March. By having a regular meeting time, Jess hopes more individuals and families can share their experiences and concerns. There may be aspects of the process that can be changed, such as the length of time it takes to do an assessment, or improvements to the roll-out process. Jess hopes the Town Hall will provide a venue to hear from people in services and families. Barb P. asked if the evaluator could get input at the time of the assessment. Jess saw the Town Hall as just one option and an opportunity to provide information and not just receive feedback. DDSD is open to hearing other ideas for getting and receiving information.

## Updates from GMSA, VCP, DD Council

### **Green Mountain Self Advocates (GMSA)**

Max had to leave the meeting early so was not present to provide updates.

**Vermont Developmental Disability Council**

Kirsten said the DD Council is excited about the partnership with Vermont Family Network and the UVM Comfort Zone to roll out a reduced stress vaccination option for young children. There had not previously been an option for children with sensory issues and this provides sensory-friendly ways to get vaccines.

**Vermont Care Partners**

No updates.

**Other Member Updates**

No updates.

**Close meeting**

Sherry made a motion to accept the meeting minutes, Bethany seconded the motion, and the motion was passed.

**Executive Session for Committee – Membership Voting Orientation**

The Membership Committee when into Executive Session.