

DS State Program Standing Committee (SPSC)

April 21, 2022

Meeting Held Virtually on Microsoft Teams

Attendees

Committee Members: David Ballou, Max Barrows, Dawn Danner, Bethany Drum, Ed Place, Karen Price, Barb Prine, Cheryl Thrall, Lyn Ujlaky, Connie Woodberry

Guests: Karen Topper, Marie Lollier, Collette Wilson, Hasan Yo, Randy Breer, Marcus Gunter Jessica Stehle, Tammy Dupuis, Deb Spencer-Tanguay, Priscilla Connolly, Sharon Ryan, Page Kirby, Kelsey Stavseth, Jess Moore, Kara Artus, Barbara Lee

State Employees: Jennifer Garabedian, Jessica Bernard, June Bascom, Joy Barrett, Hilary Conant, Chris O’Neill, Kirsten Murphy, Susan Aranoff, Laura Siegel, Joy Barrett, Lisa Parro and Judy Spittle

Roll Call and Review Agenda

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

Meeting Minutes, SPSC Member Check-In

The March minutes were reviewed and approved by Bethany Drum and then 2nd by Dawn Danner.

NKHS Re-designation – Chris O’Neill

New Director, Kelsey Stavseth was introduced

Agency met all 16 areas of requirements

The report is separated into 2 sections

Highlights

The report is separated into 2 sections, the Administrative with the following 4 areas as a combined review with Department of Mental Health (DMH) for the agency as a whole

4.1 - Corporate Status – meets the requirements as a registered nonprofit organization with the VT Secretary of State’s office

4.5 data and Info systems – meet all requirements – NKHS collects, maintains and provides the type of information Department of Mental Health (DMH) and DDS/DAIL requires.

4.6 fiscal management – manages their finances in a manner that meets requirements, using accepted accounting practices with required audits and reports presented to AHS, DMH & DAIL/DDS as specified

4.12 Accessibility – All public building NKHS owns and/or uses for the provision of services met ADA Accessibility standards and requirements. NKHS also needs to ensure that communication is accessible to everyone using the language and communication process that is effective for them.

DMH had determined that NKHS meets the standards for each of the 4 areas they review as do we for 4.12.

The second part of the report focus on programmatic issues along with some administrative areas that may have different standards for DMH and DAIL, therefore we review them separately. These areas are:

Administrative Rules Covered in this Section

- 4.2 Governance
- 4.3 Agency Organization and Administration
- 4.4 Consumer and Family Involvement and Input
- 4.7 Comprehensive Service System
- 4.8 Quality Improvement and Outcomes
- 4.9 Consumer Support, Treatment, and Records
- 4.10 Personnel Practices
- 4.11 Training
- 4.13 Rights and Responsibilities of Recipients
- 4.14 Confidentiality
- 4.15 Complaints, Grievances, and Appeals Procedures

4.16 Local System of Care Plan

We had previously shared with the SPSC that NKHS had undergone an Additional Agency Review (AAR) by DMH & DAIL in response to a number of concerning letters from staff, stakeholders & community members about the leadership of the agency, low staff morale, staff leaving the agency due to this and a resulting limiting of services. The AAR resulted in DMH placing NKHS on Provisional Designation in November 2020, DAIL/DDSD had some similar findings but had previously identified them during the Quality Services Review from 2019 and had an active Plan of Correction to address these issues, which had shown signs of progress when the AAR happened.

The main concerns from the AAR and QSR (Quality Service Review) are reflected in the Rules 4.2 specific to the Executive Director and Board of Directors, Local Program Standing Committee and 4.3 specific to internal agency community, decision making, staff morale and community presence and reputation.

NKHS had responded by making changes to the leadership at the agency by hiring a new Executive Director, re-organizing and bringing on new Board members. Providing training to the Board and LPSC (Local Program Standing Committee) about their roles and responsibilities. The results are that the Board and LPSC understand their roles and responsibilities and have demonstrated that they are actively performing these duties including the oversight of the Executive Director and service provision in general. Many staff have commented that they were given the opportunity to be involved in the recruitment and hiring of the new Executive Director.

The new Executive Director and members of the Board have created opportunities for communication and information sharing at all levels of the agency, people talked about the Monthly Round Table as well as surveys. The supervisors and leadership having open door policies to receive feedback and ideas around proposals, initiatives etc., The reputation of the agency in the community and with stakeholders is an area of on-going growth, but one that is improving due to the agency reaching out and being transparent when issues arise and trying to work with the community rather than simply respond defensively or not at all to concerns

New Director, Kelsey Stavseth talked about the Howard Center – person centered practice. People care deeply about their work. Philosophy in general, be open and welcome feedback and embrace what is working and what is not working. Ask the people who received the services, what do they need. Embracing the environment in the community. Staff engagements once a month at a round table setting. People need to ask the hard questions and from that we will grow. Sense of fear if you speak up and that is sad and takes time to work out from that.

We are here, how can we support you to be your best which will lead to feeling supportive. Encourage people to show up and we will work will thru it.

4.4 Consumer – NKHS gathers most of the required information through the LPSC (Local Program Standing Committee) which has been an active and engaged group for many years. The agency does an annual satisfaction survey and follow up with people on a regular basis.

Deb Spencer-Tanguay talked about the development of an activity schedule – how do we not feel isolated. Activities run throughout the day. Individuals and self-advocates direct these activities with staff there for support.

Sharon Ryan comment on having new committee members is a great addition and having long standing members and their commitments on how we provide services.

4.7 Comprehensive Service System: As with every other agency, staffing issues have affected the agency's ability to provide all services, but the required services are in place as described in this section.

4.8 Quality Improvement and Outcomes: NKHS has an agency wide Quality Improvement Plan which contains DS Specific items. They have a Quality Director position to help the agency have a consistent and comprehensive response to quality issues and develop a CQI process within the agency. The agency has been timely, responsive, and open to all DAIL recommendations.

4.9 Consumer Support, Treatment, and Records: Services are individualized and responsive to the individuals' needs and strengths. As stated in the QSR report, the ISAs need work in terms of documenting the work and supports provided but the services are delivered as intended and the people providing the supports understand the individual's goal and how to effectively support the individual to work towards achieving these goals.

4.10, 4.13, 4.14 & 4.15 are all policy-based items with specific areas that are required to be present and reviewed with individuals and guardians as well as ensuring individuals' privacy/confidentiality is respected and honored, individuals understand the process to file a complaint/grievance or appeal if they disagree with agency decisions, and specific personnel policies to guide staff and ensure there is no discrimination in hiring or working conditions. These are all there and the agency meets in these areas.

4.11 Training: This is an important area for NKHS since training has been an issue in the past and part of the last Plan of Correction from the 2019 QSR. NKHS has developed a comprehensive Training plan for the agency as well as DS specific. A training Coordinator position has been created and oversees training focused on staff in each service program as well as the Board of Directors and LPSCs.

4.16 Local System of Care Plan: There is a local system of care plan in place and reflects local concerns and perspectives. The plan was developed with input from individuals, families, staff, and stakeholders.

In summary, NKHS meets all areas and standards and has made significant changes to address previous concerns.

Joy Barrett – COVID hit us all so hard. Guidance was changing all the time. NEHS got his hard with their group homes. QS report, supporting the clients and the staff felt supported from Leadership as well. They got creative on how to communicate with clients in a variety of ways. NK supported each other too.

DS Director Updates

Leg update: Budget bill is still working it ways thru the process. Provider Rate increase, a rate discrepancy between the House and Senate. The House put 7% and the Senate 8%.

H720 updating the DD ACT is getting final markup. Last in Senate Appropriations then hopefully voted on and making the way through final stages.

SOCP and Regs update. Presented those to February and March and asked for input and written comments. Integrating that feedback into a "draft" to be presented to Secretary of State which will open the next phase.

Workforce topic

71% without staffing statement – *After looking into this, we found that this was a mistake. The correct number is a 31% staff turnover rate for Fiscal Year 2021 from the Working Draft Workforce Recruitment Retention Strategic Plan.*

Funds distributed equally across all the agencies so we can all hire or make the budget deficit from already having raised wages

The workgroup has data, VCP does a quarterly survey that tracks this data. Very much a crisis. Lincoln Street raised their wages and made a difference. HCRS – Jessica Stehle did the same and made a huge difference. There is a risk but the only way to meet needs of the people. Cheryl mentioned that the dollars should be allocated equally to support the workforce need. Dawn Danner commented that raising wages without planning is risky and really difficult. No guarantee money could be re-cooped.

What is the risk involved – Barb Prine – raise wages now and don't have ongoing funds to cover (July 1st is the new budget)

DS Payment Reform & SIS-A – Jessica Bernard

There was a suggestion to invite Bill Ashe to our May meeting.

Jessica met with Bill Ashe (ARIS) and Jennifer on Monday. Interesting presentation, lots of potential to address issues we have ahead of us and is a great place to start. What would things look like under new payment model. Hard to say, we do not have a new model yet. Hoping to have an approach that is like what we have now.

Release a plain language document on our SIS-A. We needed a better way for this document. Worked with GMSA, Kirsten, posted on our website. We worked with Public Consulting Group (PCG) and created a “fake person” for a sample SIS-A form. This way we could show people what it actually looks like. Any feedback just let us know, we are happy to continue to work on getting this document right.

Offered an hour-long engagements service with all the agencies with PCG. Some agencies have gone through, and others are scheduled. All sessions have gone well.

The next goal is to work with PCG to schedule with individuals and families but be mindful not to overbook people since the housing forums are getting scheduled

Karen Topper – people are still very confused with the SIS-A and conflict free. Are we going to keep our case manager and having the answer being “we don't know? Doesn't feel good to those people.

Encounter Data: asking agencies to report out on services provided.

Some are better set-up to do this than others. This is new to some agencies, and we want to offer training on file claims, process denials and get into the weeds of this. We are trying to find out what they need for additional support. Trying to have an individualized approach with each agency based on their needs.

A request was made from Kirsten Murphy that the Encounter Data should be made public in the future.

Marie Lallier – creating a strain at the network level. Looking forward to learning more from Hilary and Jessica.

GMSA, VCP, DD Council Updates

GMSA Updates

One concern is that the CDC announced the availability of a second booster. We want DAII and all the agencies to come out with guidance around getting a second booster. We want to know what steps the agencies and the state are taking to make sure people with IDD understand the CDC recommendation for getting a second booster.

We want some accountability that agencies are educating the people they serve about the second booster and supporting them to decide about getting it and helping them to get it.

GMSA is part of a team that is providing a webinar on how to create plain language and Easy Read documents. There are 5 webinars being taught to self-advocates. And 3 webinars being taught to non-profit and government agencies.

GMSA is collaborating with the DD Council and VFN to provide 3 weekends of Leadership training. We are also doing a weekend of training on supported decision making for families and students with IDD.

DD Council:

The DD Council announced a training called “Employment for All”. We have hired a well-regarded national firm, Griffin Hammis, to provide an online course on Customized Employment and Micro-Enterprise which will run from July 14 to September 10. The course ends with an in-person session on Saturday, September 24. This course is appropriate for family members who want to advocate for employment services for a family member regardless of the level of the person’s support needs. Providers are welcome too.

See: <https://ddc.vermont.gov/employment> for more information and registration.

Susan Aronoff – 4/25 annual on Medicaid public forum -

<https://humanservices.vermont.gov/sites/ahsnew/files/documents/MedicaidPolicy/GCRFinalPolicies/22-024-Final-GCR-Waiver-Post-Award-Forum2.pdf>

VCP: Marie

Part 2 Awareness on housing – went well. Eye opening
3rd and last on May 10th – 3-4 keynote speakers

Dawn Danner – agenda – challenging to bring up NEW BUSINESS

4/30 VTC 19 vendors for Deaf and Blind – Laura Siegal 9-3 pm

Wrap up