# Developmental Disabilities Services
# State Program Standing Committee (SPSC)
# May 21, 2015
# Comfort Inn, Berlin

## Attendees:

Members Present: Emily Anderson, Anne Bakeman, Max Barrows, Linda Berger, Julie Cunningham, Bethany Drum, Joe Greenwald, Nicole LeBlanc, Greg Mairs, Ed Place, Barbara Prine, Theresa Wood, Connie Woodberry, Susan Yuan

Guests: Lori Lintner, HCRS; Denis Gray, UVS; Lorraine Gaboriault, UVS; Joan Carman, UVS; Stephen Rauh, UVS; Bill Ashe, UVS; Will Gilbert, GMSA; Cathy Hull, UVS; Kirsten Murphy, VTDDC; Jennifer Stratton, LCMHS; Joy Redington, Transition II; Marlys Waller, VT Care Partners; Beth Sightler, CCS; Rachel Colby; Mark Utter; Brian Merrill; Karen Schwartz; Bill Metcalfe, HCRS; James Paradis; Christine Boothby, HCRS; George Karabakakis, HCRS; Emily Mastaler, HCRS

State Employees: Jeff Coy, Chris O'Neill, Jennifer Perkins, Jeff Nunemaker, Lisa Parro, Camille George, June Bascom, Joy Barrett

## I: Introductions, Review Agenda and Approve April Minutes

A second break was added for the latter part of the agenda, as well as a change in time for DAIL Budget/one-time funds.

GMSA had another outstanding Voices and Choices Conference. Rachel Colby received a Theresa A Wood award for 30 years of dedicated work for people with disabilities. Congratulations to the DS Directors who received the 2015 Ally Award.

Lisa Parro has joined the Developmental Disabilities Services Division (DDSD) team.

Thank you to Julie Cunningham for filling in as co-chair at last month's meeting.

The meeting minutes from April were reviewed. Anne made a motion to accept the meeting minutes, Ed seconded the motion. All members present were in favor; motion passed.

## II: Upper Valley Services Designation Review

The SPSC plays a role in the re-designation of an agency. The Developmental Disabilities Services Division (DDSD) gives an overview of the report of findings, and representatives from the organization attend the meeting to answer any questions.

The Designation Report for Upper Valley Services (UVS) by DDSD, dated April 22, 2015, was reviewed. There were some minor paperwork items that needed correction; however, there were no quality issues that needed to be addressed. UVS met all categories/standards. In the past few years, there have been no complaints about UVS that have risen to the Division level. The wrong summary sheet was used and passed out for the UVS review - please disregard the "NA." Jeff Coy will send the correct sheet to the committee.

Green Mountain Self Advocates (GMSA) conducts focus groups and meets with consumers as part of the review and designation process. Nicole reviewed the feedback from GMSA. GMSA's feedback is posted with the quality services report on the DAIL website.

UVS does not have a Registered Nurse on staff; however, they have a close working relationship with a licensed facility and local medical practices. Individuals in the public safety program are integrated in the overall system. UVS has always been strong with employment, and exceeds the target for employment.

The member composition of the UVS Board of Directors consists of families and consumers, so the UVS board can perform both the functions of the UVS Board of Directors as well as the functions of the UVS Standing Committee. This is different from other providers.

UVS is looking at a more systemic way at where, and to what extent, people with disabilities are involved in their community; and as an agency, they help direct and support people to not only feel like they belong to the community, but to truly belong. The involvement of people with disabilities in their environment is different than just being integrated; the belonging dimension is more challenging. UVS had an inclusion group meeting, in which support people were not allowed to attend, which was very enlightening and encouraging.

Lorraine Gaboriault, UVS, has worked with Bill since 1981 and will be retiring.

The SPSC voted to recommend re-designation UVS, all standards were met. (13 members in favor; 1 abstained)

## III: DAIL Budget Update

The absorption of the DS 1.9 million dollars was included in the SFY 16 budget. Because of underutilization of caseload funds this year, it is expected that all, or most of, the reduction can be met by the underutilization. This will be clearer once the end of the year figures have been calculated. A deficit for the close out of 2015 is not anticipated.

There was media attention throughout the legislative session about a Medicaid rate increase and service cuts. This rate did not go through, nor did any service cuts in DAIL. (Camille will inquire about whether there was any increase in the Medicaid rate passed.) Medicaid funding is no longer available for the targeted case management system for the Public Guardian Program and funds were included in the SFY 16 budget to adjust for that with other funds; another provider tax has been approved for 6 months; DAIL still has funding for collective bargaining,

which is required; there is only one person that needs continued support and Families First is providing this; some people on the Public Safety program that are in the correctional system have been identified as competent to stand trial; and an early retirement offer with specific criteria was passed to assist with funding for staff. Human Resources will work on this process and determine who is eligible to consider this option. *(Post Note: Regarding the Medicaid rate increase, a very small amount of funding was approved for Developmental Services. This will amount to about a .2- zero point 2 – percent increase).*

Integrated Family Services (IFS) provides more flexibility to meet the needs of children and families. Some DS funding has been transferred to the early implementation regions for Integrated Family Services (IFS.) It is expected that other areas may be added in the years ahead. Resource materials are being developed for any areas interested in starting IFS. The SPSC would like to see more DS services in the early implementation areas.

In May, there were over 70 funding proposals/over 3 million dollars in requests, due to individuals graduating from high school. After the June funding committee meeting, more information will be known about where things stand financially for DS funding.

**Discretionary Funding**

Every funding proposal that is approved is based on an annualized amount, regardless of when the individual enters the system. For example, if someone is approved in mid-year, their funding level is still the annual amount even though it is known only ½ of this amount will be needed. The difference from the annualized amount and the amount of funding that is prorated creates discretionary funds. It is believed there is about 1.2 million dollars in discretionary funding; however, Camille will verify the amount.

Discretionary funds can be used for many things, and the amount distributed to DAs, SSAs and Transition II for one-time funding has varied in the past. At previous meetings, Camille and June Bascom provided a summary on how fund were used in SFY 15. Last week DAIL, in conjunction with staff at the Agency of Human Services, decided that one-time funds will not be distributed to the designated agencies, SSA's and Transition II from 2015 to be used in 2016. There are a number of reasons why this decision was made, including an interest in using the funds for other projects and also because of the need to develop outcome and performance measures for any one-time funds that are distributed in the future. Last year legislation passed requiring Results Based Accountability (RBA) across all state programs and services, including one-time funds. Greg Mairs volunteered to be a part of a workgroup to work on developing outcomes and performance measures for one-time funds. So far, there has been no discussion about whether decisions about discretionary funding will be made earlier in the year once the outcomes for RBA are created, but Camille agreed to take that strong suggestion back to DAIL for further discussion.

Discussion about discretionary funding continued, including, but not limited to, discussions about the public perception that DAIL is choosing not to disperse the funds but they don't know how they will use them or when; the intent of the legislature to help meet the needs of the people; asking agencies to do data analysis while pulling funding from them; limiting providers'

ability to fill needs; the increased cost to the State when one-time funding is not available to assist individuals and the lack of these funds result in crises and other greater needs. The following language was drafted by the SPSC to be used during additional discussions that will be held later in the meeting:

> *"We strongly oppose the decision to end the allocation of 2015 one time funds to agencies for use in 2016. We believe this fails to meet the one time temporary or short term expenditures that directly assist people with disabilities and their families. This is occurring without an alternative plan for use of the money by the Department. This fails to follow the direction for the State System of Care Plan, is short sighted, lacks alternative funding and plan to meet identified needs, and puts recipients at risk."*

Susan Yuan made a motion to accept this wording to be used in actions that would be determined later; seconded by Connie Woodberry. The motion was passed with all members in favor of the motion.

## IV: Re-Visit Health Care Rehabilitation Services (HCRS) Designation

Last summer there were three areas of major concern at HCRS. When HCRS was at the SPSC meeting, they said they would do everything they can to turn the agency around. They have been invested and working hard on the issues that were raised, making good headway, and they want to make sure the SPSC is regularly updated on the progress.

For the past 6 months, HCRS has improved the current system, and has developed new systems. They have been meeting with Chris O'Neill, DAIL/DDSD, once a month, along with receiving technical support and training from him and other DDSD staff. Input and feedback has also been obtained from the DS Directors group.

Within 7 days of being hired, new staff are required to complete webinars, and attend classroom trainings. A nursing audit has been implemented for continuous quality improvement; and there is a 100% auditing of behavioral planning. HCRS has two more area managers so there is now an area manager at each site which is very successful, as well as an enhancement to the supervision process. HCRS has returned to the Service Coordinator Model, and meet monthly with Service Coordinators and Waiver Managers. The PDSA model is being used.

A Waiver Request form alerts the team about any changes or transfers and enhances communication. HCRS has held three stakeholder forums, with some great feedback. A yearly consumer survey, edited for stakeholders also, obtained some baseline data with 31 responses out of 100; however, HCRS plans to repeat this in 6 months. HCRS reached out to 220 consumers and families and are happy to report that 160 people felt they were part of the person centered process. Agency wide consumer survey showed 98% consumers feel their services make a difference in their lives; 94% felt staff treated them with dignity and respect. Maintaining and sustaining these areas for continuous quality improvement will be important.

Part of the monthly meetings between HCRS and Chris O'Neill are for regular check-ins for DAIL, and information is routinely shared with Camille George, DDSD Director, and Commissioner Wehry. The next step is for the DAIL quality team to summarize HCRS' status

and present it to the DAIL Commissioner for a decision about re-designation. This decision is to be made by the Commissioner by 6/11/15. When the final report has been completed, it may be brought back to the committee; however, the designated rules do not require a new vote from the SPSC.

## V: Executive Session

The SPSC went into an executive session for the rest of the meeting.