

Vermont Developmental Disabilities Council

Notes for Team #1, Meeting 2 – January 22, 2021
via Zoom

Present: Candice, Kaiya, Mike, Steve, Havah

Absent: Julie

Guest: Greg

Staff: Kirsten, Chelsea

Welcome

The meeting began at 1:06 pm.

Where are we in the planning process?

Greg did a quick re-cap of Meeting 1 to remind team members what they talked about. He reminded everyone to “mute” themselves if it was not their turn to speak, then talked about the agenda and what people could expect.

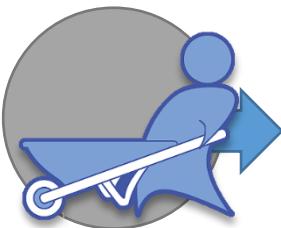
Meeting #1

(December)



Meeting #2, Part 1

(January)



Meeting #2, Part 2

(Feb./March)



Meeting #3

(May /June)



We're setting
ourselves up for
success.

Let's dig into the
issues.

More digging, plus
We'll make decisions
about our priorities.

We're almost
there!

Kirsten explained that the information she would share today is a small part of all the information that staff have collected for the Needs Assessment, which is a report that must accompany the State Plan. She has pulled out a few very important facts (also called “findings”) and created a short list of “things happening right.” Some of these changes and trends are positive and/or create opportunities for the DD Council to help. Others are not as positive and may become barriers to improving the lives of people with disabilities. She encouraged the group to ask questions and said that if there are areas where you would like more information, she will get that for the group.

Focus Area #1 (Employment)

Employment programs in Vermont are run by the Department of Vocational Rehabilitation, the Department of Labor, designated agencies, and two Governor-appointed advisory boards, among other groups. This creates a “patchwork” of programs where some needs are met, and some are not. Programs come and go as funding is available. The “good news” for our state is that Vermont has more people with disabilities employed than most other states.

People who receive developmental services can have a job, usually arranged using a model called “supported employment.” This means that the person with a disability has a support worker go to their job with them to provide some help. Over time, the support worker should “fade back,” providing less and less support as the individual becomes more independent in their job. Half the people receiving developmental services who work have jobs in food service or cleaning. The average number of hours is 9/week and the average wage is about \$11.00/hour, better than the minimum wage.

Vermonter does not have any facility or company that uses a special labor law to pay people with disabilities less than the minimum wage. Settings like these are called “sheltered workshops,” and Vermont has not had one of these in at least 15 years. Many states still do.



Half the people in Developmental Services who do not have a job said they would like one. Candice shared that she is an example of someone

who has employment as a goal in her service plan. She has experience working in childcare.

Vermont's Department of Vocational Rehabilitation (Voc Rehab) helps youth with disabilities learn valuable skills that will prepare them for employment. In 2014, the Workforce Innovation and Opportunities Act (WIOA) required Voc Rehab to shift money and focus toward students with disabilities. They provided more assistance with the goal of students having at least 1 job experience before graduation, since this is a good predictor of future employment.



Before WIOA, 15% of Vermont students with disabilities had a job experience before graduation. After WIOA, this rate grew to 26%

Positive things happening in Vermont / Strengths:

- Vermont's agencies for developmental services are good at using the supported employment model.
- DD Council just published a paper on employment. More public outreach will be done to educate employers about how people with disabilities can help Vermont address workforce shortages.
- There's federal money through WIOA to help more youth become employed.

Not-so-positive things happening in Vermont / Weaknesses:

- Only 40% of people with cognitive disabilities have a job.
- Programs are confusing, overlapping, and run by different agencies.
- Developmental service agencies are "stuck" on one model of employment.
- Many students with disabilities (74%) still do not get real job experience before graduation.

Steve said that too often people are overlooked because they may not fit the "cookie cutter" job description. It's important to look at what each individual is good at and find a job that gives them satisfaction.

Havah has been disappointed with how services are decided for transition-age youth. She said that parents are not told about employment-building programs or opportunities for youth. Outside services are deciding "who needs what

transition services,” and the process is not student led or parent informed; it is a bias system that is not inclusive. Jobs and skills are determined by “where there’s a for-sure job” and not “what are the student’s passions?” She suggested middle-schoolers take a single class for “career exploration” to pinpoint everyone’s specialties. Support providers, who works with a student every day, could be more involved, helping to pinpoint what someone likes to do and is good at.

Candice talked about working at a local school. She helped a teacher in kindergarten. She liked that job and would like to do something like that again.

It’s important to hang onto the idea of “changing perceptions and expectations.” Teachers, parents, employers, support staff, etc.

Kirsten described the recent paper on employment as an effort to build a long - term partnership with Voc Rehab. She hopes to move them “further out of their comfort zone” with future projects.

Focus Area #2 (Home and Community-based Services)

Vermont has about 5,050 people with developmental services who receive Home and Community-based Services (HCBS).

- 3,125 people get Developmental Services
- 1,225 are kids (Vermont decided that schools take care of kids. There are no other opportunities for HCBS).
- 700 people get Choices for Care.

It is not true that Vermont has no one in an institutional setting, since some people in choices for care are in nursing homes.

Where do people live? Most people live at home with their families or with a family *who is paid* to house them. People also live in a group/staffed home or live independently.

- 41% of adults work.
- 74% receive community support by a paid worker.
- 39% go to a self-advocacy group or event.
- 39% people volunteer.

- 33% go to an adult day program.
- 61% of people said they went on a vacation.

An adult day program is built a lot like a “senior citizen program” where they have scheduled activities and are with others who have developmental disabilities. These programs are set-up by designated and specialized services agencies. They differ from programming created by private entities like Zack’s Place (Woodstock), the Inclusion Center (Brattleboro), and Special Needs Support Center which services Upper Valley Vermont towns.

There are some strong transition programs for youth, but unfortunately they do not support adults who want to improve their job skills later in life.

Mike asked if there is a way to get rid of “adult day center.” He said that there was no way he would go to a place like this, “even if you paid me.”

Vermont reports to the federal government that it has “no waiting list.” This is not true. In 2019 there were 219 people on a waiting list -- not because there is no funding for them -- but because they did not meet a “funding priority” in the system of care plan. They are on a waiting list because they are not in crises.

System wide challenges:

In 2014, the State Auditor directed DS Agencies to change how they account for the money they receive. This is one of the reasons “payment reform” in Developmental Services.

The State has been out of compliance with Case Management Service requirements since 2014. The system has many conflicts of interest.

Payment reform has revealed a split between families who have been served by the system for a long time and families that are new to the system.

Positive things happening in Vermont / Strengths:

- Developmental Services is guided by strong values and a focus on individual needs.
- Despite a growing caseload, the DS system has not reduced the average amount it spends per person, even when adjusted for inflation.

Not-so-positive things happening in Vermont / Weaknesses:

- The DS System sticks to models it has learned to do well (for example, supported living). There has not been funding and interest in experimenting with alternatives.
- The direct care workforce is unstable, underpaid, and – especially in the case of ARIS workers who are 56% of the workforces -- not well trained.
- To remain fiscally sound, the system has narrowed eligibility, as well as the types of things it will pay for.
- The system does not have what it needs to care for people with very high support needs including access to clinical expertise.
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Steve talked about his experience hiring a team of support providers for his son, who is 28. He and his wife have trained over 100 people to support their son. Only 1 in 5 stay beyond the initial training and 6 months of work.

Why isn't turnover being reduced? People are constantly getting new staff to help them and move to new places to live. There needs to be an incentive. Is there a way to pay staff a livable wage when they learn best practices?

The goal should be to teach people how to be more independent. An example would be teaching people how to “tolerate” things they don’t like – to visit the dentist, to have less anxiety about being without their parents, etc. More skill-development is needed so that people get more independence. People may always need support, but they may reach a point where they need less support and have overall better lives.

The job of a direct-support professional is not to be a “glorified babysitter,” Kirsten said. Their job is to help individuals make more connections in the community.

Parking lot: Accessibility into public buildings, including hotels. Example: bathrooms, staircase, roll-in showers, hotel beds. Candice asked to make sure that this issue remained on our list of ideas.

How will we pick the best ideas?

Team 3 also has interest in Housing, but nobody picked up “Mental Health” as an area to discuss in depth, even though it’s something DAIL staff and families have identified as a priority. Kirsten asked if the group would be willing to switch Mental Health with something on the group’s list for Meeting #3. The group agreed to include Mental Health in place of Early Intervention but keep Housing on their list.

Adjourn

The meeting adjourned at 3:03 pm.

These notes were provided by Chelsea Hayward and reviewed by Kirsten Murphy.