

***DAIL Advisory Board
October 9, 2014
Comfort Inn, Berlin***

Attendees:

Board Members: Jim Coutts, John Pierce, Nick McCardle, Steve Pouliot, Harriet Goodwin, Diane Novak, Gini Milkey, Beth Stern, Robert Borden, Janet Cramer, Linda Berger (phone)

Guests: Jackie Majoros

State Employees: Jackie Rogers, Lisa Parro, Stuart Schurr, Susan Wehry, James Smith

Roll call taken.

Jim moved to accept the meeting minutes from September, Harriet seconded. Motion carried 7-0-2, with the following edit:

Page 6, last paragraph – Questions were presented about why qualitative information was presented as quantitative information. Linda questioned the report’s lack of the big picture of adequacy and gaps of the program. Bard commented that the responses in the report are listed.....

Office of Public Guardian (OPG) – Jackie Rogers, DAIL/Director of the Office of Public Guardian

The Office of Public Guardian (OPG) operates within the Department of Disabilities, Aging, and Independent Living (DAIL). OPG serves two populations: Individuals 18 and over who have a developmental disability; and individuals 60 years and older who have some type of cognitive impairment. The individuals in the Office of the Public Guardian program are under Commissioner’s custody. The statute requires that all other avenues are used to find guardianship before turning to the OPG program.

Prior to 2005 there were two guardianship programs housed in two separate departments. In 2005 the two departments merged as well as the two guardianship programs; however, the paths and statutes for the guardianship programs remain separate. As new guardians are hired, they will be trained on the two separate statutes, two provider systems, and the two court systems and will retain a caseload with both types of guardianship. Heather Allin is a new Regional Supervisor and is responsible for learning the elder care system with Susan Castor and Mike Attley. There are 5 Senior Guardians, and efforts are being made to strengthen the OPG supervisory program. Diane Novak encouraged Jackie to set a projected date for the completion of the supervisory program to be revamped to prevent it from being forgotten.

Title 18, public guardianship for people with developmental disabilities, includes four main functions: supervisory (e.g., where a person lives, education, work), legal, contracts (e.g., cell phone contracts), and medical. Title 14, public guardianship for people who are elderly and have a cognitive impairment, includes the same four main function plus financial and property sale and encumbrance of property. There is a major difference in the two statutes about DNR/DNI orders. A public guardian can serve as a representative payee; however, there are other options for rep. payees throughout the state. Short term case management can also be provided by the public guardian program as an alternative to guardianship - a public guardian is assigned to assist the individual, without the person's rights being removed from them.

Public guardianship does not have to include all of the areas; a guardian could be assigned to assist in just one area. Guardianship could also be split with a private guardianship assisting in some areas, and a public guardian assisting in the other areas. The Public Guardians can provide assistance to private guardians; however, they cannot supervisor private guardians.

OPG schedules evaluations for people with developmental disabilities. The Guardianship Order will occasionally indicate when re-evaluations are necessary. The person, case worker, or other avenues can also prompt a re-evaluation.

There has been a 4% growth in the guardian caseloads since 2001, with one position being added since that time. The projected increase in caseloads due to aging Vermonters has multiple factors involved and is difficult to determine. The cases involving developmental disabilities are also difficult to project as the States Attorney is the one that files a petition to have the person put on public guardianship and OPG is not notified until it has occurred.

The data about potential heavy use areas, percentage of people with developmental disabilities on the program, elders in the program, or individuals who do not meet statutory requirements for guardianship, is not available. The OPG program recently converted to electronic record keeping, which has been challenging; however, this has had some significant value.

There are 14 probate judges who have different expectations. Jackie met with the probate judges and they discussed the public guardian system and common areas where there may be more consistency. Jackie also explained the eligibility requirements for OPG and the caseload and staff pressures, as some judges will occasionally put someone in the Public Guardian program when other avenues are available.

State reviewed facilities are required to have advanced directives. OPG is finding an increase in the number of facilities which will not accept an individual unless they have advance directives in place, and they are using the guardianship program in order to do this. DAIL is looking into this.

The last statute change for the OPG program was in 2008. The Board raised the question about reviewing the laws and regulations again to be sure they are current on issues such as cell phones and advanced directives.

Commissioner Wehry's Updates

Legislative updates

The Commissioner will be testifying next week at the request of the Health Care Oversight Committee to review the “gap report,” the document about how to use Choices for Care reinvestment funds, that was previously brought to the DAIL Advisory Board. This year there are no excess funds to go into budget adjustment, just the savings funds for home modifications as previously discussed. The basic message, as is indicated in the report, is that DAIL is meeting its targets and would like to continue to grow the moderate needs group and initiative.

There are ongoing conversations with the Legislature about how the departments within the Agency of Human Services (AHS) share information. There are a lot of mechanisms in place for collaboration across multiple agencies serving the same family. The statutes are clear about what AHS can and cannot say to whom, and work is being done to find the right balance of what can be shared and when. The Legislature would like to know about issues before it is known by the press; however, this is difficult as there is no control over what the public tells to other people, which may occur before a report is completed. Collaboration around new initiatives and strategic planning has made some gains this year and it continues to improve.

Budget:

The departments have been assigned two tasks: present the Governor with a 5% budget cut across the board for the FY15 budget (post August rescission); and create a budget, factoring trends and budget pressures with a proposal about how to achieve this without any additional funding.

This has been a transition year looking at more meaningful outcomes and a baseline for accountability. The State, and DAIL, has been working towards Results Based Accountability (RBA): what we are doing, how well we are doing it, and are we better off. However, data is not yet available for everything.

Suggestions/Comments from the Board about the budget exercises included: avoid putting people at risk - the risk of moving a person from a current level of independence to a setting less of their choice; Did we do better for the person for whom we are working; Is there anything that can be done differently for accountability; work together with the stakeholders so there are no surprises; the people at risk are the areas that should drive the decisions that are made; publicize new programs better; have the State take a look at the whole picture for the last multiple years – federal cuts, state cuts, creativity by organizations/programs providing services – to see what has been going on; look at ways for Medicaid match (such as SASH); look at the balance of medical care vs. social care that will help people stay in their homes.

Health Reform - Better health, better care, at a lower cost.

The Healthcare Reform Initiative Program (HIP) is very active, and the second round of sub grants is being reviewed.

The committee has been struggling on quality measures. There are two big questions: Are the measures meaningful and are the measures relevant to long term care? There is push back about having too many measures. Lifetime screening for substance abuse and developmental screening for the first year of life was voted to be kept in. Two other measures about pediatrics and diabetes were removed, as there are many other measures in this area. There was not enough agreement about avoidable ER visits; however, it was felt that developmental disabilities screening would be a good one to add. HIP is looking at plans at year 2 for Medicare measures and year 1 for Medicaid.

Vermont's system depends on unpaid caregivers, and caregiver support should be very close to the top of priorities because of the domino effect it has. Nancy requested that anything DAIL or the State can do to help with the communication, information and sense of isolation of unpaid caregivers would be invaluable.

Some federal funding, such as the Affordable Care Act funding for AHS information technology, is protected and not connected to DAIL's budget. The \$2 million for health reform is also very controlled; however, the Commissioner will look again to see if there is anything that could offset anything in the DAIL budget. Harriet emphasized the need for services by the Area Agency on Aging for individuals who do not qualify for programs, and wondered if the Older Americans Act should be looked at more closely for other possible ideas on funding.

At the Council on Aging meeting, senior centers and other counterparts were very interested in some of the programs that were occurring, and discussions took place about what could and could not be funded. More information should be available at the next meeting.

Personnel Updates

- Marybeth McCaffrey, Director of Operations, is out on leave; an individual has been hired as the Health Reform Quality Oversight Analyst and will start on 10/20; and there is a good candidate for the Health Policy Analyst position who is scheduled for a second interview.
- The position that Mary Woodruff occupied is still with Human Resources.
- Linda Martinez, who works in the Money Follows the Person program (MFP), has accepted a position in the Department of Vermont Health Access to work on the chronic care initiative. This is a 100% federally funded position and DAIL will be recruiting to fill this position.
- The vacancy freeze is over.

Division of Vocational Rehabilitation (DVR) - James Smith, DAIL/VR Budget and Policy Manager

Vocational Rehabilitation (VR) is a voluntary program for individuals who have a disability and are interested in working. The individual can have any type of disability; however the disability must be a barrier to employment. Some individuals are referred to VR by other programs, such as TANF (aka: welfare) or the Reach-Up program as part of their requirements for benefits; and some individuals are referred to VR as part of their requirements for the Department of

Corrections (DOC.) VR also works with the business community and employers. VR is a dual program, working to assist both the consumer and the employer.

VR has some specialized services, such as Transition Counselors who work with the schools and youth in transition; Benefits Counselors who work with individuals receiving public benefits, SSI and SSDI; and Counselors who work with individuals who are involved with the Department of Corrections (DOC) or who receive TANF benefits (aka: welfare.) All VR counselors either have a Master's Degree in Rehabilitation Counseling or have a Master's Degree in another related topic and have completed additional courses in rehabilitation work.

VR does not have any criteria to determine whether an individual has a disability; a person just has to verify a disability and it has to be a barrier to employment. (i.e., an individual with a severe disability who has excellent work skills may not qualify for VR services.) VR is unique in that every work plan is individualized. The federal statute is flexible, so almost anything can be purchased as long as it is supported by a work plan. There are some individuals who come to VR for counseling assistance; however, they will find employment on their own.

Individuals who receive SSI may be able to work at a high level and zero out on their benefits but remain eligible for SSI. If an individual is on SSDI and they earn over a certain amount, they may lose their benefits; however, they can get back on SSDI easily if they lost the benefits due to employment. A lot of discussion takes place before any decisions are made about an individual transitioning off benefits.

VR contracts with a non-profit organization, VT Association of Business, Industry, and Rehabilitation (VABIR), for placement work. This organization does the outreach to employers and works with the individual directly, including job coaching. The use of progressive employment is increasing. Progressive employment sets up short-term training placements that last up to 6 weeks, where an individual can do a trial work period. VR pays the individual a small stipend, and there is no risk to the individual or to the employer.

VR is recruiting for a position that will focus on senior employment and will be housed in the VR Central Office. A large part of this position will be to determine why individuals over the age of 65 are not using VR services. The Commissioner on Successful Aging Workforce Subcommittee has been looking at the mature workers in the workforce and the Governor has endorsed the recommendations made by the subcommittee. The subcommittee is now working with the Department of Labor about talking points, dispelling myths of mature workers, and encouraging employers to hire mature workers. Data is still being collected. It was noted that some employment programs are income based, and if an individual does not meet the income eligibility, or have (or want to admit to having) a disability that is a barrier to employment, they may not qualify for assistance.

In the last year, VR has invested a lot of time and funding into motivational interviewing. This technique allows self-empowerment, where the counselor helps elicit from the individual what they feel they need to complete.

VR has a strong commitment to quality service. Every two years, an external contractor completes a customer service survey. The survey shows that 92-93% of the individuals would refer a family member to VR; however, the last survey showed a decrease in this percent so VR is researching this further.

In recent years, a large initiative has been Creative Workforce Solutions (CWS). In many communities employers were approached by many different individuals in many different programs. Under Challenges for Change, CWS was proposed. Business Account Managers convened representatives from all the programs, and they combined information and resources, and shared information to create one system that everyone can use, CWS. CWS organizes job fairs and employer breakfasts and continues to grow.

DAIL Advisory Board, APS Subcommittee Update – Harriet Goodwin

Harriet, Steve, Janet, Gini, and Diane have been serving on the DAIL Advisory Board APS Subcommittee since January 2012. Harriet reported the following:

- Initially, the subcommittee worked diligently, but recently meetings have been cancelled because there was no information to discuss.
- Litigation was filed by Community of Vermont Elders (COVE), Council on Aging for Southeastern Vermont /Senior Solutions, VT Disability Rights, Vermont Center for Independent Living (VCIL), and Community Action in Southwestern Vermont (SEVCA) as they felt the Adult Protective Services (APS) was not working to the best capacity. This turned into a court case, APS had personnel turnover, a new computer system and protocol, and around August 2013 a settlement was made.
- In the settlement, it stated that the APS Subcommittee would continue, and some of the litigants would be a part of the subcommittee. Joyce Lemire, Sandy Conrad, and Ed Paquin are now members of the DAIL Advisory Board APS Subcommittee. Coming together, communicating as a committee, and accepting suggestions seems to have helped make some progress.
- The settlement required APS to meet 8 benchmarks. A file review panel was established to review the APS cases every quarter to determine if these benchmarks are met. The review panel members are: John Barbour, Sarah Launderville, and Dolly Fleming. The first quarter showed how much needed to be done; the second quarter three benchmarks were met; the third quarter 7 benchmarks were met; and the fourth quarter results are not available yet as the review panel has not yet completed the review.
- It is believed that at this time APS is running smoothly with more solid staff, the Harmony system, and protocol changes.

Board updates:

Austine School for the Deaf and Hard of Hearing recently closed. The children services they used to offer have been transferred to the Nine East Network so services for students will continue. (www.9east.net) There is some confusion around the state, and comments are being made that the Vermont Association for the Blind is closing – this is an error.

October is White Cane Awareness month, and White Cane Awareness Day is October 15th. There are multiple activities going on around the state. Please talk to Steve if you would like information about them. Two of the main areas of the events are to increase awareness of independence, and to increase the awareness of what to do when you see someone with a white cane. With quieter cars, this is more important than ever as individuals with visual impairments cannot hear the cars as well. (www.nfb.org/white-cane-safety-day)

CVAA is working to change the data collection for information to the SAMS/Harmony system. There will be one system to house all the information and allow data reports to be completed, and to assist in making things more consistent. Stay tuned.

COVE had a successful candidate forum in Chittenden with approximately 40-50 people attending and 9 candidates. Another candidate forum is scheduled at Westview Meadows in Montpelier on Friday, October 17th, with almost all of the 20 Senate candidates attending.

COVE's annual meeting is on November 14th at the Canadian Club in Barre. Gini will send out a flyer.

COVE has received permission from FairPoint and Google to do safety project trainings. More information to come.

The DAIL Advisory Board has multiple vacancies for representatives for people with disabilities, and an open vacancy for a regional representative from the Northeast Kingdom. Please let Janet and Stuart know of any possible candidates.

The DOL Rule implementation requiring certain wages for home care workers is to take effect January 1st; however, DOL has stated that although the rule will go into effect January 1st, it is not going to enforce the rule for 6 months in order to allow states to get the work done in order to comply with the Rule. The last 6 months of the year, DOL's enforcement actions will be discretionary.

Robert moved to adjourn, Diane seconded.