

Town of Richmond
Request for Special Appropriations
Request for Fiscal Year: 2026

Organization's Name: UVM Health Network – Home Health & Hospice

Address: 1110 Prim Rd.

City, State, Zip: Colchester, VT 05446

Website address: uvmhomehealth.org

A. GENERAL INFORMATION

1. Program Name: UVM Health Network - Home Health and Hospice

2. Contact Person/Title: Maya Fehrs, Director of Development

Telephone Number: (802) 860-4475

E-mail address: Maya.Fehrs@uvmhomehealth.org

3. Total number of individuals served in the last complete fiscal year by this program: 4,004

4. Total number of the above individuals who are Town residents: 66

Please, attach any documentation that supports this number.

Percent of people served who are Town residents: 2%

5. Amount of Request: \$12,500

6. Total Program Budget: \$29.8M

Percent of total program budget you are requesting from the Town of Richmond: .04%

7. Please state or attach the mission of your agency: We help people live their fullest lives by providing innovative, high-value, and compassionate care wherever they call home.

8. Funding will be used to:

Maintain an existing program ~~Expand an Existing Program~~ ~~Start a new program~~

9. Has your organization received funds from the Town in the past for this or a similar program?

Yes. We are grateful to have received crucial funds from the Town of Richmond, alongside the other 21 Towns in our service area, for many years.

If yes, please answer the following:

- a. Does the amount of your request represent an increase over your previous appropriation? If yes, explain the reason(s) for the increase.

No.

b. Were any conditions or restrictions placed on the funds by the Selectboard? No
If yes, describe how those conditions or restrictions have been met.

B. PROGRAM OVERVIEW

1. Statement of Need: Identify the issue or need that the program will address (use statistical data to justify the need for the program). To what extent does this need, or problem exist in the Town of Richmond?

The UVM Health Network - Home Health and Hospice is a nonprofit home health and hospice agency caring for people at all ages and states of life: from critically ill children to vulnerable families to adults who need rehabilitation, care for chronic illness, adult day services, or end-of-life care. The UVM Health Network - Home Health and Hospice provides medically necessary home and community-based care to individuals and families regardless of their ability to pay. We serve about 4,000 individuals and families throughout Chittenden and Grand Isle Counties every year.

Care at home is proven to provide better outcomes to patients, and helps patients avoid re-hospitalization. We are often the sole choice for homebound patients, or those for whom visits outside of the home would be an insurmountable obstacle.

Each year, we provide approximately \$1 million in charitable - free or reduced cost – care. We do not turn neighbors away due to lack of ability to pay for the care they receive.

In our most recently completed fiscal year, the UVM Health Network Home Health and Hospice cared for 66 Richmond residents. This care equated to:

- 507 nursing visits,
- 537 physical and occupational therapy visits,
- 200 social work visits

Please refer to the attached Report for a detailed list of services and charitable care provided in Richmond last year.

2. Program Summary: a. Identify the target/recipients of program services. Specify the number of Town residents your program will serve during the fiscal year and explain the basis upon which this number is calculated. Indicate any eligibility requirements your program has with respect to age, gender, income or residence.

a. The recipients of Home Health and Hospice services can range from a pregnant person receiving prenatal care at home to an adult who needs rehabilitative therapy following surgery to an individual with a terminal illness who is able to live their final days at home surrounded by family and friends, receiving hospice care. Our programs serve people of all ages and there are no eligibility requirements with respect to age, race, gender, or socioeconomic status. We serve anyone who turns to us in need. Our service area includes residents of Chittenden and Grand Isle Counties.

The number of clients served in a particular town varies from year to year based on community need. Below reflects the number of Richmond residents served by Home Health and Hospice in the past several years. As you can see, the volume varies year to year depending on many factors. With the advancement of health care reform and lessons learned from the COVID-19 global pandemic, we anticipate an even greater demand for in-home services in the future.

Richmond Residents Served:

2024: 66

2023: 74

2022: 82

2021: 81

2020: 84

2019: 119

2018: 125

2017: 109

b. Identify what is to be accomplished or what change will occur from participating in the program. How will people be better off as a result of participating in the program? Describe the steps you take to make the project known to the public, and make the program accessible and inclusive?

Home Health and Hospice will improve the lives of Richmond residents by offering the following programs and services:

- Family and Children's Services: strengthening families and improving parents' capacity to nurture their children through pregnancy and early childhood years by providing nursing care and wrap-around social support services in the home.
- In-Home nursing, physical, occupational, and speech therapy to help people regain their independence after a medical intervention, or to provide care for a chronic illness.
- Long-Term, In-Home Care: including our Choices for Care Program which helps people live their best lives in the setting they prefer and avoid institutionalization.
- Adult Day Programs: helping older adults stay connected to their community in a safe, stimulating, home-like environment while offering family members respite.
- Palliative Care, in-home Hospice Care and the McClure Miller Respite House providing a home like atmosphere and expert clinical care for those at the end of life.

Home Health and Hospice has a longstanding reputation in the community. We have cared for generations of families and we often receive feedback from grateful patients and families who refer to their caregivers by name. We care for our clients and often a byproduct of the care provided is respite, education and stress reduction for the clients' caregivers and families. Many

people find out about our services from people they know. We receive most referrals from hospitals and primary care physicians. We also have very strong partnerships with other health and community service providers such as Agewell and The Howard Center.

Home Health and Hospice also employs a multi-platform strategy to engage the public in traditional media as well as the digital world. Marketing to publicize our programs and services includes press releases, social media, e-newsletters, posts on our website, and a mailed newsletter and Annual Report.

A community is only as healthy as our most vulnerable neighbors. We care for our full community for providing care for all who need us, regardless of their ability to pay.

3. Program Funding:

a. Identify how Town funds, specifically, will be used (i.e., funds will provide “X” amount of units of service.)

Funding received from the towns in our service area represents a significant portion of our annual funding needs and allows us to be able to provide the approximately \$1 million in charitable care we provide each year. Please refer to the attached report for details on the services provided specifically to Richmond residents last fiscal year and the cost of providing that care.

In addition to the charitable care we provide each year, the cost of providing care is often higher than what we are reimbursed by Medicare and Medicaid. Annual contributions from towns in our service area and donations help us cover this difference.

The total cost of services provided to Richmond residents last year was \$305,111, of which \$234,329 was reimbursed. Our funding request for the upcoming fiscal year helps offset the \$70,783 in charitable care we provided to Richmond residents.

b. List the other agencies to whom you are submitting a request for funds for this program and the amount requested. How would this program be modified should revenues be lost?

Home Health and Hospice engages in extensive fundraising throughout the year to be able to provide services to the townspeople in our service area. Contributions from the 22 towns and cities in our service area are one way we do so. We are also supported by the United Way of Northwest Vermont, individual donors, federal and foundation grants, as well as fundraising events. We continuously seek diverse funding sources to avoid vulnerabilities should a funding source disappear. That being said, our margins are incredibly tight and every donor and funder plays a critical role in making our care possible.

C. ORGANIZATIONAL CAPACITY

1. Describe your agency’s capability to provide the program including its history, previous experience providing this service, management structure and staff expertise.

The UVM Health Network - Home Health and Hospice is a 100+ year old nonprofit home health and hospice agency with a long history of providing at-home and community based health services throughout Chittenden and Grand Isle Counties. The UVM Health Network - Home Health and Hospice was founded by a small group of women in Burlington, Vermont who were concerned about the health of the young and vulnerable in the community. At the turn of the last century, Burlington was a bustling community, but one with high rates of infant mortality and a range of other health and social challenges. Our intrepid founder, Julia Smith Wheeler, alongside other concerned citizens, took action by organizing nurses to care for people in their homes and communities. The founders established a directive, "to serve all who turn to the VNA (now known as UVM Health Network - Home Health and Hospice) in their time of need," which still guides our work today. Since 1979, the UVM Health Network Home Health and Hospice has been caring for residents in every city and town in Chittenden and Grand Isle Counties, including Richmond.

The management structure of the UVM Health Network - Home Health and Hospice consists of a voluntary Board of Directors who hire a President and COO to oversee the operations of the organization. A Senior Management Team directs the major areas of operations including: Finance, Human Resources, Clinical Programs, Quality and Education, Community Relations and Program Development, and IT. Program Directors manage the day to day work of our 300+ employees. Our staff consists of many licensed professionals such as RNs, Physical, Occupational and Speech Therapists, Medical Social Workers and Licensed Nurses' Aides. Some of these professionals also have advanced degrees and certifications in the areas of Care Management, Wound and Ostomy Care, Hospice, and Chronic Disease Management, to name a few.

On January 1, 2018, the then-named VNA joined the UVM Health Network to improve access to care, enhance quality and control costs. We aim to have an integrated team approach to patient care, which means greater coordination between the hospital, physicians and home health providers. We will continue to provide medically necessary services to all who need our care, regardless of ability to pay.

The UVM Health Network - Home Health and Hospice Board of Directors remains intact and we remain a not-for-profit organization, responsible for our own balance sheet.

2. How will you assess whether/how program participants are better off? Describe how you will assess program outcomes. Your description should include: what (what kind of data), how (method/tool for collecting the data), from whom (source of data) and when (timing of data collection).

The UVM Health Network - Home Health and Hospice has a Quality Management Plan that is broad and comprehensive. The primary purpose of the plan is to support the UVM Health Network - Home Health and Hospice's mission of "helping people live their fullest lives by providing innovative, high-value and compassionate care wherever they call home." The plan is organized around three primary functions of quality management: quality planning, quality control, and quality improvement. This plan identifies the data we collect, the frequency and source for collection and to whom the data is reported.

Quality planning is performed at several levels of the organization and by a variety of groups such as Quality Councils and a Board- driven Quality Assessment and Performance Improvement Committee (QAPI). Quality planning includes steps such as: examining existing data and trends, improving outcomes, reducing errors, etc. Examples of quality planning includes the OASIS Outcomes and Hospice Item Set that are measured and reviewed on a monthly, quarterly, and annual basis for Home Health Services and Hospice. We use these measures to monitor performance in real time and over time and benchmark against Vermont and national outcomes. Many of these outcomes are publicly reported and guide our focus on performance improvement initiatives.

The UVM Health Network - Home Health and Hospice also utilizes an external vendor, Strategic HealthCare Programs, for real time data analytics. This tool provides a drill down functionality to the clinician, team, and provider level.

Quality Control activities consist primarily of measurement and reporting. Examples of quality control activities monitored on a quarterly basis by the UVM Health Network - Home Health and Hospice are patient and client occurrences such as falls, medication errors, infections, and other events. All programs at the UVM Health Network Home Health and Hospice utilize a tool or process to measure customer satisfaction and client complaints/concerns. We are required to submit much of this data to the state of Vermont as part of the Vermont Homecare Performance Markers.

Our QAPI program involves a number of approaches to achieve Quality Improvement such as improvement project teams, lean management, outcome-based quality improvement, standardization, and staff education.

3. Summarize or attach program and or service assessments conducted in the past two years.

In addition to the above quality management activities, the UVM Health Network - Home Health and Hospice is required to comply with Federal and State regulations for home care through the Medicare Conditions of Participation for Home Health and Hospice and State Designation Rules. We are assessed on a regular basis, usually unannounced, by the following agencies: Vermont Department of Disabilities, Aging, and Independent Living (DAIL); Division of Licensing and Protection; the Veterans Administration (for Adult Day Programs); Vermont Agency of Human Services; United Way of Northwest, VT; and through external auditing of UVM Health Network - Home Health and Hospice finances and accounting practices. In the past we have completed an unannounced Federal and/or State survey of our Home Health Services for Adults, Families and Children, Long Term Care, and our Hospice Program including Vermont Respite House.

4. Does your organization have a strategic plan and a strategic planning process in place? - If yes, please attach your plan. The strategic plan should include a mission statement, goals, steps to achieve the goals, and measures that assess the accomplishments of the goals.

We engage in a robust, internal strategic planning process, setting goals for each clinical and administrative area, with a goal of working to contain costs, maintain quality, and recruit and retain exceptional employees. Our strategic planning is presented to our Board of Directors but is not a public document.

5. What is the authorized size of your board of directors?

Agency bylaws state the UVM Health Network Home Health and Hospice Board of Directors must have no fewer than 5 members and no more than 25. We currently have: 13 members.

How many meetings were held by the board last year? 5

I, the undersigned, confirm the information contained herein is accurate and can be verified as such. I understand and agree that if the requested funds are approved, the disbursement of funds are subject to all conditions established by the Richmond Selectboard.

Signature of Applicant: *Maya Fehrs*

Date: 9/30/24

Print Name of Applicant and Title: Maya Fehrs, Director of Development

Home Health & Hospice

Home Health Services for
Adults and Children

Long-Term Care

Adult Day Program

Palliative Care

Hospice Care

McClure Miller Respite House

Mrs. Linda Parent
Town Clerk
Town of Richmond

Dear Linda,

The UVM Health Network - Home Health & Hospice provides high-quality compassionate care to Vermonters, regardless of their ability to pay. Together we make a difference in the lives of our neighbors.

Last year, Home Health & Hospice cared for ~4,000 individuals and families and provided millions in charitable care to people throughout Chittenden & Grand Isle Counties, including end-of-life care at the McClure Miller Respite House.

Annual contributions from the 22 cities and towns we serve are vital to ensure we can continue to meet the needs in your community.

Attached you will find:

- Impact Report highlighting Home Health & Hospice services provided during our most recent reporting period.
- Funding Request illustrating care provided in your town and our request for funding in FY2026.

Thank you for your partnership.

Sincerely,



Maya Fehrs
Director of Development

2024 Annual Report for Richmond

THE
University of Vermont
HEALTH NETWORK

Home Health & Hospice

CARING FOR RESIDENTS IN OUR COMMUNITY

66

Number of
Richmond residents we
cared for in the last year.



OUR PROGRAMS

- Family & Children's Program
- Adult Home Health
- Adult Day Program
- Long-Term Care
- Hospice & Palliative Care
- McClure Miller Respite House



Care at Home. For All Ages and Stages of Life.

Vermont's oldest and largest non-profit home health and hospice agency and the only Medicare-certified inpatient hospice residence.

For more than 100 years, we have provided high-quality, compassionate home health and hospice care wherever our community members call home.

Experience Matters.

Our patient and family experience of care ratings surpass Vermont and National averages.

The way our patients experience care is important to us. [Medicare's Care Compare website](#) publicly displays our ratings, demonstrating that our patients and their caregivers rate us highly for home health and hospice care and would recommend our agency to their friends and family.

Town of Richmond

UVM Health Network - Home Health & Hospice (HHH)
Request for Funding

HHH is requesting \$12,500 in the FY25 budget

Care by the Numbers in Richmond:

of Neighbors Served: 66
Total Visits to Richmond: 1,258

Social Work: 200

Nursing: 507

Occupational Therapy: 87

Speech Therapy: 14

Physical Therapy: 450

Personal Care Attendant
Hours: 225

Cost of Care Provided to Your Neighbors	Amount
Total cost of HHH Care	\$305,111
Amount reimbursed to HHH*	\$234,329
Unreimbursed Care	\$70,783

*reimbursed through Medicare, Medicaid, private insurance, contracts and patient fees

HHH requests annual contributions from each town and city in our service area. Your contribution is critical to supporting the millions of dollars in unreimbursed care we provide in Chittenden & Grand Isle Counties.

THE
University of Vermont
HEALTH NETWORK
Home Health & Hospice

Data presented is from our most recent available fiscal year

UVMHomeHealth.org