

Town of East Montpelier FY2018 Funding Requests

Each year the Town of East Montpelier receives requests for funds from many different organizations. The Selectboard appoints a committee to review the requests and to recommend which should appear on the Town Meeting Warning for action. The committee requires certain information to make sound decisions for each request. In order for your organization to be considered for funding, it is mandatory that you complete this information form. Submit the form and supplementary information to:

**Funding Request Study Committee
Town of East Montpelier
P.O. Box 157, East Montpelier, VT 05651-0157 (submit by mail)
eastmontadmin@comcast.net (submit by email)**

on or before **Friday, October 21, 2016**. Incomplete forms and/or requests received after this date will be disqualified for funding. The Committee reserves the right to require any requesting organization to defend its request in person at the Committee's annual meeting normally held in early November. An organization applying for the first time or requesting a substantial increase in funding should expect an invitation to attend the annual meeting.

If your organization operates two or more programs with separate budgets or funding sources, please fill out one form for each program. All information should be given for your latest complete fiscal year (12 months). Approved requests will be acknowledged in the fiscal year 2018 (July 1, 2017 – June 30, 2018) budget for the Town of East Montpelier. Please feel free to submit any other information you feel would be helpful to the committee in making their decision.

If you have any questions please contact Bruce Johnson, Town Administrator, at (802) 223-3313 x 204 or eastmontadmin@comcast.net.

STANDARD INFORMATION

Organization Name: **Central Vermont Home Health & Hospice, Inc.**

Address: **600 Granger Road, Barre, VT 05641**

Fiscal Year Reported: **2015**

Program Description: **CVHHH in its 105th year, is a full service, not-for-profit Visiting Nurse Association committed to providing high quality, medically-necessary home health and hospice care to all Central Vermonters regardless of their ability to pay, geographic remoteness, or complexity of health care needs. Services include: skilled and high-tech nursing; physical, occupational and speech therapies; telemonitoring, hospice and palliative care; long term care; supportive services, maternal and child health care; health promotion programs and bereavement support.**

Name of Person filling out this form: **Kelly Bishop, CFO**

Name of Person to contact with questions: **Kelly Bishop, CFO**

Phone Number: 802-224-2229 E-mail: Kbishop@cvhhh.org

AMOUNT OF FUNDING REQUEST: 5,500.00

SERVICE INFORMATION

What is your organization's service area? State? Washington County? or Other? **CVHHH's service area includes all of Washington County and 3 communities in Orange County.**

What is the total number of individuals served by your organization in your prior Fiscal Year? **In FY 2015, 2,628 individuals (unduplicated) received home visits in our service area. This figure does not include people served by health screenings, flu and pneumonia vaccinations, foot care clinics, bereavement support, international travel health, etc. This number only reflects people served by home visits.**

How many people in East Montpelier were served by your organization in the same period? **69 East Montpelier residents (52 residents in 2014) received CVHHH care in the home-setting. This figure does not include people served by health screenings, flu and pneumonia vaccinations, foot care clinics, bereavement support, international travel health, etc. This number only reflects people served by home visits.**

What type of service(s) does your organization provide to East Montpelier residents? **CVHHH provides home-based health care with visits from nurses, therapists, home health aides, social workers, etc. In addition to home visits, many Central Vermonters attend CVHHH health screenings, foot care clinics, bereavement support groups, or attend a CVHHH flu vaccination clinic. These numbers are not tracked by town.**

Approximately how many staff hours are dedicated to provide the services your organization offered East Montpelier residents during this time period? **CVHHH tracks patient visits by town, but not staff hours by town. We provided 1,282 home visits in East Montpelier in FY 2015 compared to 838 in FY 2014. The average time per visit, including travel and paperwork, is 1.84 hours (1.84 X 1,282 = approximately 2,359 estimated hours). Additional hours were provided to East Montpelier residents who participated in health promotion activities and/or support groups.**

What services does your organization provide that are not available elsewhere? **VNA-based Medicare/Medicaid certified home health care, hospice care, maternal and child health care, long term care, rehabilitative services, telehealth home monitoring – all provided in the home setting.**

What (if any) organizations provide similar services? **CVHHH is the only Visiting Nurse Association and not-for-profit provider of services listed in this form for East Montpelier and**

Central Vermont. A for-profit home health agency exists in Vermont, but we do not believe they have provided any services in East Montpelier.

If applicable, how does your organization collaborate with organizations providing similar services? **Home Health and Hospice services are an integral part of the overall health care system. Therefore, CVHHH collaborates as a matter of practice with hospitals, medical practices, nursing homes, assisted living and residential care facilities, mental health agencies and many other social service organizations in central Vermont.**

In what way are the services your organization provides preventative in nature? **Homecare and hospice programs providing medically necessary care, and health promotion services such as foot care clinics and international travel health clinics that promote general welfare of central Vermonters, long term care services that provide assistance with activities of daily living, all offer interventions and prevention of more serious illness or hospitalization. People prefer the opportunity to recover at home and receive services in the security and comfort of their own homes.**

FINANCIAL INFORMATION

How did your organization determine the amount of the funding request? Please explain in detail your reasoning for any increase or decrease (use attached sheet if necessary). **We request a minimum of \$2 per capita from the towns we serve. Our request this year is the same as last year. This is an amount that we have determined will enable us to provide care to residents of each town when they are uninsured or under insured. However, this does not cover the gap between what it costs us to deliver services and what we are reimbursed from Medicaid and Medicare.**

If approved by the town, how will your organization use the funds? **To provide East Montpelier residents home health and hospice care which is not covered by Medicare, Medicaid or private insurance; to provide home-based medically necessary care and long term care services for those who are low-income, living on a fixed income and are uninsured or underinsured.**

Do any of your grant sources require local financial commitment? Explain. **No**

Is your organization approved by the IRS as tax-exempt? **Yes**

If yes, indicate your approval type: 501c3: **X** other: _____

INCOME SOURCES	PERCENT OF INCOME	TOTAL INCOME
Federal	60.24%	\$6,959,037
State	17.59%	\$2,032,109
Local Towns	1.27%	\$146,900
United Way	.09%	\$8,072
Fundraising	2.39%	\$277,073
Other – Private Insurance	9.94%	\$1,148,337
Other – PP, Grants, Contracts, health promotion, Investment Income, Realized/Unrealized Gains	9.35%	\$1,080,773
Provision for Bad Debt	(.87)%	(\$100,780)
TOTAL	100.00%	\$11,551,521

EXPENDITURES	Budgeted Percent	Budgeted Dollars	Actual Expense Percent	Actual Expense Dollars
Personnel	82.13%	\$9,734,161	82.71%	\$10,075,173
Insurance/Rent/Utilities	16.04%	\$1,899,186	15.60%	\$1,900,004
Fundraising Costs	.29%	\$35,000	.26%	\$31,979
Other -Depreciation	1.54%	\$183,104	1.43%	\$173,636
Total	100%	\$11,851,451	100%	\$12,180,792

Number of full-time paid staff positions (full-time equivalents or hours): **160**

Number of full-time volunteer staff positions (full-time equivalents or hours): **1,612 hours (There are no full time volunteer positions. There are Hospice volunteers, administrative volunteers and event volunteers.)**