



Intentional Living Communities – A How-To Guide

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Riverflow Community: From Dream to Reality in 16 Months

I. Introduction – Who Am I & How I Got Here.

The story of Riverflow Community, Inc., in concrete terms, started with the rocket fuel of a pilot planning grant from the State of Vermont in the summer of 2023, but in many ways, it has been decades in the making. For the Caffry family, the quest for a stable, service-supported, meaningful, and dignified life for our son started in March of 2002 when our son was first diagnosed with autism. While the early years were consumed with OTs, PTs, SLPs, and AAC (“augmentative and alternative communications”), the stress and worry of “what happens for our son when we are gone?” was omnipresent. Starting in October 2006, attending the Stetson National Conference on Special Needs Planning and Special Needs Trusts has been a hugely important part of the Caffry family journey that led to the creation of Riverflow Community.

According to the [Administration for Community Living](#) within the Centers for Medicare and Medicaid Services (“CMS”), there are approximately 7.4 Million people with I/DD nationwide. According to the Vermont Agency of Human Services (“AHS”), Department of Aging, Disabilities and Independent Living’s (“DAIL”) Developmental Disabilities Services Division’s [FY 2024 Annual Report](#), there are approximately 55,000 people with I/DD in Vermont, a state with a total population of just under 650,000. The FY 2024 Annual Report states that there are only 3,394 Vermonters with I/DD that receive Developmental Services through the Home and Community-Based (“HCBS”) Waiver, constituting only 6% of all Vermonters with I/DD. Of the

3,394 Vermonters receiving DD-HCBS Waiver services, only 1,490 are eligible for 24/7 residential services, a/k/a “Home Supports”.

Since the closure of Vermont’s one and only large institution in 1993, the Vermont Developmental Disabilities Services Division has effectively provided only a single model of Home Supports for individuals who are eligible for 24/7 support. Of the 1,490 individuals receiving Home Supports in Vermont, 88% of them are in “Shared Living”, which is adult foster care. The remaining 173 individuals receive Home Supports, through either “Staffed Living” or “Group Living”, which are *placements*, typically made only after multiple failed Shared Living attempts, and are generally for individuals with I/DD that also have co-occurring high medical or high behavioral support needs.

Riverflow Community, Inc. opened its doors in October 2024, through the intense efforts of the founding group of families and most critically, the Riverflow operations team. This is how we went from dream to reality in 16 months.

II. The State of Our State and What You Need to Know About Your State

A. The Vermont Landscape for Developmental Disability Services

As special needs planning attorneys, all of you are in a position to play an important and positive role in the evolution of how services and supports are provided to Americans with I/DD.

While the federal government obviously plays an enormous role in how Medicaid-funded Home and Community-Based Services are delivered throughout the country, particularly with the March 2014 adoption of updated [Medicaid Home and Community-Based \(“HCBS”\) Regulations](#), which includes the so-called “Settings Rule”, each state government has a tremendous amount of discretion in how to provide developmental services. The CMS notice in the Federal Register for the Setting Rule makes it clear: “This rule offers states new flexibilities in providing necessary and

appropriate services to elderly and disabled populations.” In order to help client families and individuals with I/DD create and sustain residential models that will stand the test of time, that will require special needs planning attorneys to dig into how your particular state administers its developmental services programs.¹

The State of Vermont, like many states, has a long history of legislation and administration regarding whether, when, where, and how, to support people with disabilities, starting with “[poor farms](#)” at the end of the 18th Century. Also like many states in the late 19th Century and early 20th Century, Vermont ended up creating large institutions - one for people with mental illness in Waterbury, Vermont, and one for people with developmental disabilities, in Brandon, Vermont.

Vermont opened the “State School for Feeble Minded Children” in 1915, which was ‘re-branded’ as the “Brandon Training School” in the 1930s. The Brandon Training School was in operation for 78 years until 1993, when Vermont became the second state to close its large institution (New Hampshire was first), and the State proclaimed that it was committed to “[Opening the Hearts of Our Communities](#)”. The Vermont Agency of Human Services published this understandably self-congratulatory report in December 1993 about the closure of the Brandon Training School, and on the final page, the State declared:

In the years ahead, we must be careful not to settle into a particular way of providing services. We must continue to change, to give people what they want and what they tell us they need.

¹ Keep in mind that the 2014 CMS guidance memos regarding the “Settings Rule” were largely negated by the subsequent 2019 CMS guidance memos. Additionally, “heightened scrutiny” under the Settings Rule does not automatically mean a residential setting cannot be permitted. It is just another hoop to jump through, but that is for a different presentation.

Closing institutions is great. However, it is a 2-step process: (1) close institution, ***AND*** (2) ***create and properly fund*** a community-based system of services that provides the range of services and supports necessary to meet the range of needs of Vermonters with I/DD.

Three years after closing the Brandon Training School, Vermont passed the Developmental Disabilities Act of 1996, codified at [18 V.S.A., Chapter 204A](#). Among the “Principles of Service” laid out in the DD Act of 1996 are:

Full Information. In order to make good decisions, people with developmental disabilities and their families need complete information about the availability, choices and costs of services, how the decision-making process works, and how to participate in that process.

Individualized Support. People have differing abilities, needs, and goals. To be effective and efficient, services must be individualized to the capacities, needs, and values of each individual.

Family Support. Effective family support services are designed and provided with respect and responsiveness to the unique needs, strengths and cultural values of each family, and the family's expertise regarding its own needs.

Meaningful Choices. People with developmental disabilities and their families cannot make good decisions without meaningful choices about how they live and the kinds of services they receive. Effective services shall be flexible so they can be individualized to support and accommodate personalized choices, values and needs, and assure that each recipient is directly involved in decisions that affect that person's life.

Unfortunately, the Vermont Developmental Disabilities did exactly what it warned itself not to do – for the last 33 years, Vermont has very much “settled into a particular way of providing services”, much to the dismay, and sometimes outrage, of Vermonters with I/DD and their families. Without any statistical data backing this up, anecdotal evidence suggests that a majority of Vermont families with someone receiving HCBS/Developmental Services, feel that the lofty principles set out in the Vermont DD Act have never been achieved in the three decades since its passage.

In addition to the DD Act itself, the Vermont system is framed out under the [Developmental Disabilities Regulations \(March 2023\)](#), which states:

7.100.1 Developmental Disabilities Services Purpose and Scope

(a) The purpose of these regulations is to fulfill the requirements of the Developmental Disabilities Act of 1996 (DD Act) (18 V.S.A Chapter 204A) to include specific details for implementation of the Act. These rules are adopted pursuant to 18 V.S.A. § 8726.

(b) The Developmental Disabilities Services program operates within the State’s Global Commitment to Health 1115 Waiver, providing long-term services and supports to individuals with developmental disabilities.

(c) The Program is subject to approval by the Centers for Medicare and Medicaid Services (CMS) and is managed in compliance with CMS terms and conditions of participation.

Under the 1996 DD Act, the Department of Aging, Disabilities and Independent Living (“DAIL”) is required to re-adopt every three years the “[State System of Care Plan for Developmental Disabilities](#)”. The System of Care Plan does not go through the formal rulemaking

process under the [Vermont Administrative Procedures Act](#). On top of the statute, regulations, and System of Care Plan, there are over 60 additional “[Policies, Guidelines and Field Memos](#)” produced by DAIL over the last 30 years.

After digesting all of that information, replete with proclamations about choice, person centered planning, the reality is this – for the 1,490 Vermonters who qualify for HCBS “Home Supports”, there is really only one residential option – which is adult foster care, called Shared Living in Vermont. Under the Shared Living model, a Home Provider is paid an income tax-exempt stipend to care for one or two adult individuals with I/DD in *the Home Provider’s personal residence*. If a Home Provider retires, moves, or determines that it is ‘just not working out’, then the individual with I/DD is placed with the next Home Provider willing to take the person in. The next Home Provider located by a Designated Agency or Specialized Service Agency (one of Vermont’s 15 nonprofit “designated” service providers) could be anywhere within the same county or service territory (as many as three counties), and the new home is often in a town that the person with I/DD does not have any connection to.

The Vermont DD Services Division’s [FY 2024 Annual Report](#), notes:

Paid home supports, like all HCBS, are individualized and based on a needs assessment that address goals, strengths and needs. There are multiple types of paid home supports:

- **Shared Living:** Supports provided to one or two people in the home of a shared living provider. Shared living providers are home providers contracted by DA/SSAs. The home is owned or rented by the shared living provider.
- Shared Living – Hourly: Regularly scheduled or intermittent hourly supports provided to an individual who lives in a Shared Living home.

- **Staffed Living:** Supports provided in a home setting for one or two people that is staffed on a full-time basis by providers. The home is typically owned or rented by the service provider.
- **Group Living:** Supports provided in a licensed home setting for three to six people that is staffed full-time by providers. The home is typically owned or rented by the service provider.
- **Supervised Living:** Regularly scheduled or intermittent hourly supports provided to an individual who lives in his or her own home. Supports are provided on a less than full-time schedule (not 24 hours/7 days a week). The home is typically owned or rented by the individual.
- **In-Home Family Supports:** Regularly scheduled or intermittent hourly supports provided to an individual who lives in the home of unpaid family caregivers. Supports are provided on a less than full-time schedule (not 24 hours/7 days a week).

Individuals served – Living with 24-hour paid home supports (June 30, 2024)

- **1,317** – Shared Living (1,171 homes)
 - **95** – Staffed Living (61 homes)
 - **78** – Group Living (22 homes)
- 1,490** – Total

When 88% of all individuals receiving 24/7 Home Supports are being served under the Shared Living model, and the only way to end up in residential services are under the Staffed Living and Group Living models is after individuals who have tried, and failed, with multiple Shared Living Homes, then *that is not a choice*.

Within Vermont’s Department of Disabilities, Aging, and Independent Living [there are 5 different divisions](#), and the Developmental Disabilities Services Division is one of them. For Vermonters with I/DD, the other Division that matters the most is the [Division of Licensing and Protection](#) (“DLP”). Under current Vermont law, if there are [three or more individuals](#) that receive services and supports under the same roof, then that home must be licensed. There is no licensing requirement for a Shared Living home. For individuals with I/DD that live in a residence with three or more individuals, they are licensed either as “[Residential Care Homes](#)” or as “[Therapeutic Community Residences](#)”. The DLP is focused on people’s health and safety. The DLP does not appear to be hung up on public/social policy issues about whether adults with I/DD should be allowed to live with their peers.

B. Additional Considerations When Trying to Create a Residential Community

1. Zoning and Environmental Permitting

In addition to applicable statutory, regulatory, and policy considerations that are relevant to creating alternative residential models for adults with I/DD, it is also necessary to be aware of the land use and environmental permitting issues that must be complied with. Under Vermont’s state zoning statute a home providing support to *up to 8 persons* with a disability (of any kind) are considered a residential use by right under [24 V.S.A. §4412\(1\)\(G\)](#). Therefore, municipalities cannot enact zoning bylaws that would prohibit a single home serving 8 or fewer people with I/DD. The Vermont Supreme Court recently confirmed that “statute’s purpose was to preclude municipalities from excluding facilities that served those with disabilities”. [In re Vt. Permanency Initiative](#), 2023 VT 65, ¶ 17.

However, beyond a single residence serving not more than 8 people, all local zoning and state environmental regulations and permitting requirements apply.

2. Get to Know Your FOIA and APA

Every state has some form of a Freedom of Information Act (“FOIA”) and an Administrative Procedures Act (“APA”) statute, and you can find your state’s [FOIA here](#) and [APA here](#). In Vermont, the FOIA statute is called the [Vermont Public Records Act](#) (1 V.S.A. §§ 315 – 320), and the state’s APA is aptly referred to as the [Vermont Administrative Procedures Act](#) (3 V.S.A. §§ 800 – 849). Both FOIA and APA statutes are incredibly valuable tools of advocacy and can be enormously helpful in the human services context... so much so, that someone might even feel compelled to write an [article](#) about incorporating advocacy through FOIA and APA into one’s special needs planning practice.

But what if a state human services agency contracts with a private company to provide certain services? Well, in Vermont, under [Human Rights Defense Center v. Correct Care Solutions](#), 2021 VT 63, the Vermont Supreme Court sidestepped the question of whether a private company under contract with a state agency should be considered to be the “functional equivalent” (as many other states’ Supreme Courts have done) of a governmental agency under the Vermont PRA, and instead the Vermont Supreme Court held that the private prison healthcare contractor was an “instrumentality” of the Vermont Department of Corrections.

3. *Loper Bright v. Raimondo*, 144 S.Ct. 2244 (June 28, 2024)

The U.S. Supreme Court has stayed true to its current form, and two years ago, by a 6 – 3 majority, issued its decision in [Loper Bright Enterprises v. Raimondo](#), 144 S.Ct. 2244. In *Loper*, the U.S. Supreme Court wiped out 40 years of “*Chevron* Deference” that had been the law of the country since the Supreme Court decision in *Chevron U.S.A. Inc. v. Natural Resources Defense Council, Inc.*, 467 U.S. 837, 104 S.Ct. 2778, 81 L.Ed.2d 694 (1984). Under *Chevron*, for the last 40 years, if a statute was ambiguous, then federal courts were required to give deference to a

federal agency's interpretation of the ambiguous statute, as long as the public agency's interpretation was "permissible". Deference was required even if the reviewing court would have reached a different conclusion. Under *Loper*, the deference to an agency's interpretation of an ambiguous statute is gone, with the majority holding that under the federal Administrative Procedures Act, only a court can do that.

What does the *Loper* decision mean for disability advocacy? TBD...

4. What's the Internal Revenue Code Got To Do With This? ... A Lot

While the evolution (...or *devolution*?) of societal norms and expectations and the resulting public policy will invariably change over time, providing human services, including to individuals with I/DD, costs money. Alas, questions about how to spend public money and how to treat the use of private money necessarily makes the Internal Revenue Code ("IRC") relevant to the issue of how to provide residential services to individuals with I/DD. A deep dive into the IRC is beyond the scope of the presentation, but when creating a residential living arrangement, special needs planning attorneys should be aware of:

- (i) [IRC 131](#) – In 1983, IRC 131 was adopted which provides an income tax exemption for payments made to individuals for being foster parents to minors. In 1986, IRC 131 was amended to allow for the same income tax exemption for adult foster care payments, for up to 5 individuals with I/DD. The cost effectiveness of the income tax exemption can be part of the problem... see, e.g. Vermont Shared Living has become the de facto only Home Supports model for individuals with I/DD who require 24/7 supports.
- (ii) [IRC 119](#) - Income tax exemption for the value of meals and lodging, if the employee is required to accept the lodging on the premises of the employer

as a condition of employment. ***But wait...*** the income tax exemption also applies to the value of room and board provided to the employee's spouse, or any of the employee's dependents!

(iii) [IRC 501\(c\)\(3\)](#) - To Be, or Not To Be a 501(c)(3)?

- Independence of Entity – Private Benefit
- Apply Early! It could be as short as 4 days or as long as 10 months from the date of application until the date the IRS makes a decision.
- Do you need a [Fiscal Sponsor](#)?

III. What is Intentional Living/Lifesharing?

An “intentional community” is a group of people who have chosen to live together with a common purpose, working cooperatively to create a lifestyle that reflects their shared core values. The people may live together on a piece of rural land, in a suburban home, or in an urban neighborhood, and they may share a single residence or live in a cluster of dwellings. This definition spans a wide variety of groups, including (but not limited to) communes, student cooperatives, land co-ops, cohousing groups, monasteries and ashrams, and farming collectives. Although quite diverse in philosophy and lifestyle, each of these groups places a high priority on fostering a sense of community—a feeling of belonging and mutual support that is increasingly hard to find in mainstream Western society.

Geoph Kozeny, [Intentional Communities: Lifestyles Based on Ideals](#), 1995

There is tremendous variety in the types of intentional communities that have been created throughout the world. For a deep dive into intentional communities, the [Foundation for Intentional Community](#) can provide an “Intentional Communities 101” for the curious.

Within the context of supporting people with I/DD to live whole and meaningful lives, there are [L’Arche communities](#) and [Camphill communities](#). There are currently 23 L’Arche communities operating in the United States, and there are 15 Camphill communities in the U.S. and Canada.

There are over 100 Camphill communities in 22 different countries across the world. Succinctly put:

Camphill is a worldwide social initiative that creates communities designed to include people with and without intellectual disabilities. [Camphills] strive to empower people to grow, learn, and achieve together.

[Camphill Association of North America](#).

The Camphill movement began in Aberdeen, Scotland in 1939 by the Austrian doctor and refugee Karl Konig. Camphill is an outgrowth of work of Rudolph Steiner, who created Waldorf education. All Camphill communities are guided by three essential tenants:

- (1) To Recognize the Wholeness of Each Individual
- (2) To Strive Towards Personal, Inner Development
- (3) To Bring Equality, Freedom, and Fellowship into Our Communities

[Camphill Association of North America](#).

From a parent’s perspective, the result is a life of dignity and respect for a child (of any age) with I/DD, where the line between “Direct Support Professional” and “Consumer” is washed away.

IV. Riverflow Community

A. Prologue – the Vermont DDHI and Act 186

In some respects, the story of Riverflow starts with the story of the Vermont Developmental Disabilities Housing Initiative (“DDHI”). The DDHI came to life from the July 2021 op ed article written by Elizabeth Campbell, one of the Riverflow founding parents, about the [current state of Vermont residential options](#). That article motivated many Vermont parents of adults with I/DD and high support needs to band together through zoom meetings, the first of which took place in August 2021. Motivated advocacy by the DDHI parents resulted in the Vermont Legislature passing [Act 186](#), effective June 2022. Among other tweaks to the Vermont Developmental Disabilities Services System, Act 186 established a Residential Services Pilot Planning Grant program, allocating \$500,000 to fund planning for 3 residential pilot programs in 3 different locations throughout the state.

Act 186 specifically stated: “The pilot planning grants shall reflect the diversity of needs expressed by individuals with developmental disabilities and their families, including individuals with high support needs who require 24-hour care and those with specific communication needs”. Act 186 also created a new position within the Developmental Disabilities Services Division for a “Residential Program Developer”, with multiple express job duties, including “expanding housing and residential services options for individuals with developmental disabilities, in accordance with federal home-and-community-based services regulations.” Unfortunately, the Residential Program Developer position was a “limited service” position that expired in 2026.

Now in 2026, the DDHI has continued to be a parent-driven force for improvement to the Developmental Services system, and the DDHI has grown to about 140 families.

B. Riverflow – Start Your Engines

The timeline of Riverflow has been incredibly fast, or at least it has felt that way. The amount of time and energy required of both the core leadership team and founding families has been intense, often exhausting, and always worthwhile.

Here goes:

- June 27, 2023 – Vermont nonprofit incorporation
- July 15, 2023 – Act 186 grant application filed for 3 available grants
- August 15, 2023 – Grant was awarded and property found – *same day!*
 - The 30-acre property is located about 20 – 35 minutes from the University of Vermont, Middlebury College, Champlain College, and St. Michael’s College
- October 2023 – First in-person meeting of founding families and founding team
- December 2023 – 501(c)(3) application filed (*Pro Tip – Do not wait this long...*)
- January 2024 – Property purchased, strategic planning meeting, Fiscal Sponsorship Agreement entered – *Shift to Overdrive*
- January – September 2024
 - Fund raising begins
 - Went under contract for construction/renovations
 - Hired a full-time general manager for construction--full code review for public building and TCR requirements
 - Designed program and worked on several hundred pages of policies to get us licensed
 - Budget design based on income from HCBS/DD Services Medicaid and Supplemental Security Income

- Worked with Designated Agencies to confirm service contracts and funding guidelines
- Onboard a financial firm for accounting and bookkeeping
- September 18, 2024 – 501(c)(3) exemption status approved!
- October 8, 2024 – Therapeutic Community Residence license issued – ***SHOWTIME!***

The first four residents (a/k/a “Friends”) moved into Willow House and began life at [Riverflow Community](#) that day.

As of October 2024, Riverflow was the only one of the three Act 186 grantees awarded in August 2023 that had progressed to occupancy. The second Act 186 grantee opened in 2026, and the third Act 186 grantee is expected to open in 2027. Since October 2024, Riverflow has continued to be actively engaged with the local press, and it was the subject of an extensive article in January in [Vermont Business Magazine](#).

C. Essentials For Success

Riverflow would still be a concept (a/k/a pipe dream) without the ability to hire a community consultant ***BEFORE*** the founding parents really began anything. Riverflow was incredibly fortunate that Hannah Schwartz was not only available to consult under the Act 186 planning grant, but even more so that she made the decision a few months into the grant period that she would become the Executive Director.

Additionally, the ***entire team*** engaged in fundraising:

- Founding Families & Ground Team
- Their Circles of Support
- Non-Disability Sources of Public Funding

- [Vermont Housing Improvement Program](#) (\$240,000) – access to grants and forgivable loans designated to promote the renovation existing dilapidated structures or create new housings for vulnerable populations, e.g., refugees, persons emerging from homelessness, *and now* persons with I/DD.
- [Vermont Low Income Trust for Electricity](#) (\$50K) – VLITE funds projects “that advance the state’s energy goals with a particular focus on the energy needs of low-income Vermonters”.
- [Vermont Housing & Conservation Board](#) (\$425,000) – “Established in 1987, the Vermont Housing & Conservation Board remains the forerunner in the nation in pioneering a comprehensive approach to affordable housing and community development linked with land conservation and historic preservation.”

It is also critically important that the DD-HCBS Waiver budgets for the individual resident meets the operating and staffing expenses. All physical improvements are funded outside of any Medicaid dollars, through fundraising and grant applications.

D. The Future of Riverflow

In March 2025, Riverflow presented its preliminary Site Plan and Conditional Use Permit application for a “Planned Unit Development” to the Town of Monkton Development Review Board, with the local DRB being the first stop in the next phase of the community. Shortly thereafter, Riverflow began the state permitting processes for the necessary approvals from the Vermont Agency of Natural Resources (i.e., Water Supply & Wastewater Disposal, Stormwater Discharge Permit, Wetlands Conditional Use Permit). It took until June 2026 for all local and state land use/environmental permits to be issued, and appeal periods expired, for the full build out of

the community. Fund raising for House #2 was undertaken simultaneously with the permitting process.

The optimistic goal has been that the full community build out will be completed within 10 – 15 years:

- House #2 (infrastructure (road, power, and utilities) began September 2026, and occupancy is expected by June 2027
- Farm and Farmhouse (House #3) including gardening program and greenhouse
- Admin Offices
- House #4
- Community Center
- House #5

Since October 2024, the Riverflow team has worked to implement a modest farming program (currently 20 chickens and 4 sheep) and a substantial gardening program. Riverflow has continued to develop the relationship with our neighbors, and the broader community. With House #2 (Holly House) underway, Riverflow recently had a “Friends and Family Day”, where the four individual Friends who will move into Holly House in 2027 and their families and the Willow House Friends and their families, got together at Riverflow for a meet and greet. In the coming months, the Riverflow leadership team will begin holding “Sibling Zooms”, so that the brothers and sisters of the Friends in Willow House and Holly House can begin to get to know each other – no parents invited.

As Riverflow moves forward with the buildout of the community, and as the extended circle of the community grows, Riverflow will also seek to create an endowment.

As with anything ‘different’, there will be questions about the wisdom and viability of any type of service model that is different than what currently exists. However, Camphill is the longest standing intentional community model in the United States, and the only existing Camphill community in Vermont had its quarter-century anniversary last year.

It is imperative to keep in mind that intentional living is a **CHOICE**, not a placement. It should be a one of many “meaningful choices” that have failed to materialize in the 33 years since the closure of the Brandon Training School and the 30 years since the Vermont Developmental Disabilities Act was passed. Intentional living will not be for everyone, but a one-size-fits-all approach is what the current I/DD services system has become, and it is clearly failing.

Will Riverflow survive and thrive for the next 50 years? To use an old New England expression, it’s hard sayin’, not knowin’. However, what can be said with certainty is that Riverflow opened its doors in October 2024, and as of September 2026, there have been over 100 applications submitted for the 16± additional spots in the community, which will take another 1 to 10 years to build.

