



*a nonprofit organization assisting persons
with developmental disabilities
in the community*

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Dear Chair Gelser, Vice Chair Olsen, and Members of the Committee,

My name is Anna Keenan-Mudrick. I am the Executive Director of Community Access Services, a nonprofit provider that serves approximately 170 children and adults who experience intellectual and Developmental Disabilities (IDD) in Columbia, Washington, Clackamas and Multnomah counties.

I am here today representing both my organization, and the Community Provider Association of Oregon, a group of 22 agencies who serve adults and children with IDD. We support Senate Bill 238.

DSP Workforce Instability

As you know, **we are in the midst of a workforce crisis, as we continue to operate with reimbursement that funds an average DSP wage of \$11.23 an hour.*** Prior to our receiving the 4% increase to many of our rates January of 2015, this model funded an average wage of \$10.80/hour. This crisis started brewing when we continued to go year after year without a COLA increase after 2009 (on top of a 6% rate cut from 10/2010 – 10/2013). It has been further exacerbated by Oregon's economic recovery leading to workforce competition from industries outside of the IDD field. And we are about to be hit with our greatest challenge to DSP recruitment and retention yet: significant, annual increases in minimum wage without associated/comparable IDD funding adjustments. For our agency, in July of 2017, in Columbia County, the gap will further tighten between minimum wage and how much we are able to pay our employees. And in the Portland Metro area, our agency starting rate will be the minimum wage. This does not even speak to the issues we will face in subsequent years, when minimum wage increases exceed the rate of pay assumed in our funding.

Better Understanding the Complexity of the DSP Position, and why DSPs are leaving our field

Why is it that we cannot sustain a viable workforce at the current rate of pay? As costs groceries, utilities, insurance, vehicles and HOUSING continue to grow, without a living wage, our **DSPs are often forced to work more than one job to make ends meet.** This is a tremendous burden on them and their families, particularly given the personal, individualized, skilled work that they do every day, for many of Oregon's most vulnerable citizens. **They can only sustain this for so long.**

Furthermore, working as a DSP is rewarding, yet incredibly demanding, which also drives many to leave for industries that pay more, for less stress. Examples of the complex care provided by DSPs include the following: support in communication, behavior supports (low to high intensity), relationship building, systems navigation, banking and budgeting, identification/securing/retaining of housing, independence skill building, employment skill building, mobility support, support in making and attending medical appointments/ following physicians/medication administration; very personal care: i.e. support in changing, bathing, transferring, eating, and performing nurse delegated tasks such as: G tube feeding, CBG checks, insulin, superficial suctioning, catheterizations, and ostomy support.



The Risk to Those We Support

We are already putting those we support at risk with our current level of reimbursement.

Our inability to pay competitively has resulted in a workforce that is stressed, overstretched, and more at risk for making mistakes, which compromises the health and safety of the children and adults we serve who experience intellectual and developmental disabilities.

It also puts provider agency viability further at risk, as the costs associated with this level of turnover are simply unsustainable. **More providers will end up going out of business or deciding to decrease capacity to survive, if we are not able to pay our DSPs competitively and fairly. This would further exacerbate the capacity crisis, which puts even more of our most vulnerable citizens' health and safety at risk.**

A Note Re. Training and Credentialing

The other key ingredient to a sustainable, increasingly skilled and consistent DSP workforce is a credentialing program that supports a true career path for those who choose to apply and advance themselves in our field. This bill includes this critical ingredient, which we appreciate and support, whole heartedly.

What's the good news?

The path to sustainability, health and safety, and fairly compensated DSPs is clear. We understand the challenge is in the need for additional revenue generation to make this happen, and we support your work in and dedication to this critical effort. Please let us know if there is anything we can do to further these revenue increase efforts.

We are all partners in keeping Oregon's citizens with IDD healthy and safe. And the path is clear.

* There is some confusion about the actual DSP wage assumed in our DHS funding model. In our supported living, crisis and "tier 7" (most complex support needs) budget formats you will see \$10.80 calculated as an average pay rate, with a 4% increase calculated at the end to reflect the increase provided in 1/2015 by the legislature to bring this average up. But in the full DHS "rebar" funding model breakdown there are places where a rate of \$12.94 is plugged in as an average wage. When you dig further, you will find that the rebar rate model also assumes a staffing pattern that reflects far fewer staff hours than we actually provide in our programs, so the number of staff hours assumed in the model is grossly insufficient. We are trying to address this in modeling of the new rate structure, so that we can be in a position to pay the average rate assumed, which we desperately want for our DSPs. Another DSP cost that is not included in the rebar model is the cost of OT and temporary staffing, which we are also trying to build into the new model. The other point of confusion seems to be around the \$11.23/hour rate – this is an assumed/budgeted average. Not an assumed starting wage. Our agency DSP wage average is \$12.40; we start at \$11.25 (above the average assumed) and the full range of CAS DSPs is currently \$11.25 - \$16.00/hour. All while grossly "over staffing" according to the DSP hours assumed in the rebar rate model; the hours of support we provide are based on individualized support needs, health and safety, and to meet Individual Support Plan goals, necessary for compliance and to sustain quality of life of those we support