

From: [Julia Ansberry](#)
To: [JWMHS Exhibits](#)
Subject: In favor of HB 5026 and POP I/DD 126
Date: Monday, February 25, 2019 2:21:54 PM
Attachments: [Client Letters.pdf](#)

Dear Ways and Means Committee Members,

I am asking you to consider voting in favor of HB 5026 and POP I/DD 126, Workforce Expansion and Development.

I am the Executive Director of Trellis, Inc, an agency that provides community integration services and employment services to adults who experience Intellectual and Developmental Disabilities in the Portland Metro Area. During this time, our 1:1 services have not received a rate increase in over 6 years.

When I started my business 8 years ago, I provided 1:1 supports with our clients to help them live independently in their home or to learn new skills so that one day they could move out. Trellis DSPs helped clients to clean their home, learn to cook and be safe while cooking, budgeting and grocery shopping. Attending doctors appointments and providing medical advocacy is another area that our clients need 1:1 support in as they may not always know how to express to a doctor what is going on with their health or remember what the doctor told them. Housing is another area that Trellis has assisted with our clients. We also provided 1:1 time in the community meeting up with others. These are all vital services to our clients!

I have had to make changes to our services in the last 2 years due to our rates not increasing for 1:1 care. Our rates for groups has gone up so my agency has been making the switch to taking our clients out in groups of 1:3. In doing this I can pay staff more but am unable to meet the personal needs of our clients in 1:1 settings.

The issues have made it difficult for my agency with the current 1:1 rate:

- Current job market and finding qualified staff
- Minimum wage has increased, which means DSP wages need to be higher in order to bring in new staff
- Pay Oregon Sick Leave, which I agree with but it is a business cost that has not been able to be recouped by not receiving a rate increase
- Spending more time training new staff and sending employees to trainings to ensure they are providing quality services
- Have additional supervisor staff to support current DSPs and prevent burnout

The majority of our clients have enjoyed going out in groups but we do have about 25% who will not go out with others for a variety of reasons so we keep them in 1:1. However, Trellis is no longer taking new clients that do not want to go into a group. Weekly I turn away several clients who I otherwise would have agreed to work with.

Unless we receive funding for a higher rate to pay people more for 1:1 care then I believe we are headed towards a crisis. People with I/DD receiving services from agencies:

- Will not be able to receive the services they need to live independently, limiting their choices of where they can live.
-

Will not receive the medical advocacy they need

- Will not receive important housing supports
- Those with significant health and behavior issues will have difficulty with finding support services

We need your help and I strongly encourage you to vote yes on HB 5026 and POP I/DD 126, Workforce Expansion and Development to help us to provide quality services with a well trained and accurately compensated workforce.

Thank you for your consideration in this. I am attaching letters from our clients.

Julia Ansberry
Executive Director
Trellis, Inc
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704 Main St. Ste 232, Oregon City, OR 97045
www.trellis-or.com

TO whom it may concern:

2-21-19

My name is Tyler Detton. I am a client of Trellis, Inc. I used to have 1:1 care but because of no rate increase I am now only provided 1:3 care.

I miss my 1:1 time because I liked having more choices and being able to be helped with more independent skills. This is very hard to accomplish in a group setting.

I feel that only being in a group setting has impacted me by taking away some of the skills I want to learn or improve because I am in groups only and not all

activities can be worked on with a group.

Please consider increasing the rate so people like myself can have 1:1 care again and help me increase my independence by learning to cook, clean, do laundry and other independent living skills on my own.

Sincerely,

TJ TYLER Dettler

To whom it may concern: 2/21/19

I have cerebral palsy and I have only one-on-one care one day a week. It impacts me only having one day now because I do not get to independently be taught and assisted by my provider in the area of personal living skills which greatly impacts my home in cleanliness and safety.

I am a client with Trellis, Inc. and I have 7 hours a week of 1:1 time and my other two days had to change to 1:3 care. This has greatly impacted my independence and the ability to work on my independent living skills, as some things can not

~~DEAN SHERIDAN~~

be worked on in a group.

Please raise the rate for

1:1 care - so we can continue to have

1:1 care.

my name is Ricardo Cue,

I live in Milwaukie, OR.

Rick Cue

To whom it may concern:

My name is Megan Mahoney. I live in Oregon City, OR and I am a client of Trellis, Inc.

I do not have any life care at all. This greatly impacts me because I really need help with all aspects of daily living. I am hoping to learn to cook, clean, and be more independent than I currently am. I live with my family who are aging and I would like to learn more independence so I can be more helpful to them and also to learn to take care

of myself if I need to.

Please consider raising the rate of 1:1 care so that I could have help to teach me to do more things independently.

Sincerely,
MEGAN MAHONEY

to whom it may concern,

Having a provider 1:1 would be a huge benefit to me. Unfortunately, because of the low wage for 1:1 providers, I am unable to do so. Without a pay increase for 1:1 providers I will be unable to get the personalized care that I need. The following are examples of ways that I believe 1:1 care would be beneficial to me. 1:1 care would enhance my independence, especially around transportation. It would also help me learn skills around the house such as cooking and laundry. Healthcare is another area where 1:1 care would make me feel more comfortable. Lastly, I believe that 1:1 care will give me the opportunity to have a more open, honest conversation with my provider. This is especially important when it comes to personal matters such as health and emotions. Having 1:1 care makes me feel more comfortable and safe sharing this information.

These skills are things that I simply cannot learn in a group. Unfortunately, I am unable to have a provider for 1:1 care because they cannot make a livable wage. Please take care of our providers.

Alex Hackleman

Sincerely,
John Sobes

Alex Hackleman

JOHN SOBES

2/21/2019

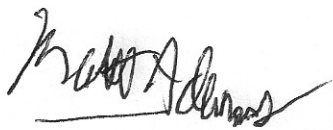
Dear Oregon Ways and Means Committee,

My name is Matt. It is important to have one on one care because it helps me gain confidence in daily tasks. My provider guides me in shopping, food preparation, laundry, budgeting and problem solving.

I like being with my provider in a group, but having one on one time gives my individual attention and that helps me.

I am asking that you please raise the rates on Attendant Care.

Thank you,



Matt Adams

My name is Eleanor Baily and I have downs syndrome as well as serious walking disabilities

It is vital for me to receive as much personal $\frac{1}{1}$ care as possible since I would really appreciate being out in the community. Group settings are^a serious stresser for me since I become overwhelmed and this could continue being a very negative impact on my disability.

Please keep attendant care
as a vital part of
our community plan.