I had the opportunity to work a floor shift at a home in Clackamas County recently, which is not part of my typical role. I was there as a third staff, supporting two very experienced Direct Support Professionals. As I assisted one individual to get ready for bed one of the DSPs called for help.

She was assisting a woman with the very end of her nighttime routine when the resident began to seize. We rushed in the room to assist. Time slowed with the urgency.

I carefully moved a few objects away from her in case they might hurt her. I helped to tuck pillows around the bars of her bed. The other DSP, in charge of meds for the shift, retrieved a rescue medication with a close eye on the clock.

My other team member spoke reassuringly to the resident. This woman doesn't use words and she isn't easy to understand unless you know her well. She can't tell us what she experiences when she has seizures, which happen frequently. Both DSPs knew I was new to serving in this home. They both told me it was important that if she can hear us that she hears good things.

At three minutes we administered a dose of the rescue medication. There was no change. We continued to time the seizure. We continued to speak reassuringly. One DSP started to rub the resident's feet and explained that stimulation in her extremities was suggested as a way to help her come out of a seizure. A bit later, per the protocol, we administered a second dose. There was no change. I retrieved the medical binder so it was ready for the paramedics we would call if the seizure lasted more than what the protocol called for. Her seizure ended before triggering call for emergency assistance.

The rest of our shift had us documenting, cleaning, and periodic checks of each sleeping individual. We chatted about the challenges both women were dealing with as they were raising small children while living with extended family. They talked about their hopes for moving soon to affordable spaces without their mothers in law. We talked about cars breaking down and kids outgrowing shoes.

The care these two skilled, compassionate, and experienced women delivered was both heroic and routine. Their drive to do this work well is clear. So are the sacrifices they and their families make for their career path. Without the care they delivered that night, the woman we served could have suffered enormous life-changing consequences. But she didn't. Her night ended cozy and safe in her bed.

Every day, DSPs across the state deliver services that are both routine and heroic. They keep the most vulnerable Oregonians alive, healthy, and playing vital roles in their communities. Those DSPs may well make more money working in fast food or retail positions. Please prioritize this legislation that would help organizations take steps to appropriately compensate this vital workforce.

Mer Stevens
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