Co-Chair Campos, Co-Chair Valderrama, and Members of the Committee,

I am a Public Employee, Member of the Oregon Commission on Autism Spectrum Disorder, Committee Chair to programs serving disabled youth, and a mother to disabled children. Developmental Disability services is a very impactful part of my family as two of my children are currently receiving services. They receive access to OHP Open Card, allowing us greater choice in providers, which is especially beneficial while residing in rural Columbia County. They receive access to ancillary services such as Professional Behavior Services and the development of Positive Behavioral Support Plans, along with access to equipment such as door alarms and special needs car seats.

They also have access to attendant care services. Now this one comes with a caveat. Prior to the Public Health Emergency, attendant care was not accessible to our children, not for lack of need but due to the extreme needs of our children and a lack of adequately trained providers in our area. Attendant care needs for children like mine include 6 or more injections a day, manually monitoring blood sugar, one on one support in the community to prevent elopement, mitigating meltdowns, days of verbal support leading up to hygiene tasks, support throughout the entire night for children who sleep minimal periods a day, direct monitoring of eating to prevent choking, navigating severe food allergies, safeguarding to reduce susceptibility to vulnerability, and providing 24/7 mental health support.

I ask that you fund ODDS beyond current service levels as there are additional bills to consider this legislative session which, if approved, will affect the budget. Senate Bill 820 would allow children experiencing mental health crises to be eligible for developmental disability services. House Bill 2457 would increase payments to agencies to pay direct support professionals 150 percent of state minimum wage and to cover costs of employer and employee contributions for family and medical leave insurance benefits. Along with Senate Bills 91 and 646, which would allow children like mine to choose their parents as their direct support professionals.

There has been a lot of discussion regarding maintaining service levels, especially between children and adult services. I would like to clarify this imaginary line being discussed. Children experiencing disabilities (hopefully) become adults with disabilities. Many adults experiencing I/DD lack a safety net of "natural supports". The same is true for children, who may only have one family member providing care while also having to financially support the home. I personally know very few families with either a child or adult experiencing I/DD who have sufficient supports available to them. Instead of this imaginary line, we should be viewing support needs as a trajectory where more supports available to children at an earlier age equals less supports required at a later age. Time and time again research has shown the benefit towards early intervention and support leading to greater outcomes in the future. Of course, I strongly advocate for full funding of children and adult services, this should never be a question of either, or.

Finally, I want to call to your attention the overwhelming amount of time and money that has been directed towards increasing the direct care workforce to both adults and children. Bills such as SB 91 and 646 would alleviate the discrepancies between need and availability, allowing parents to become paid providers to their children, increasing the number of available providers to adults, and decreasing the need for additional funding in recruitment and retention. Frankly, it is mind blowing to see and hear so much effort and funding going into increasing the direct care workforce while at the same time hearing that increased utilization of attendant care hours is financially unattainable. If we are unable to meet the fiscal needs of increased attendant care utilization, why are we allocating millions of dollars into increasing and maintaining the direct care workforce?

I appreciate your time and interest in these issues, Jessa Reinhardt Vernonia, OR