

Chair Bowman, Vice-Chairs Drazen and Pham, and Committee members,

My name is Cristal DeJarnac, and I have been a Homecare and Personal Support Worker with the State of Oregon for 9 years now. I am also the President of Homecare for SEIU 503, representing about 27,000 Homecare and Personal Support Workers and Personal Care Attendants. I am asking you today to please vote “yes” on HB 3838 to establish a workforce standards board for care work in Oregon.

Being a State paid Care Provider, I currently make \$20.75 an hour, which is lower than what the majority of Agency Care Providers make. I live in Bend, where housing is the most expensive in the State. Up until this year, housing costs haven’t really affected me personally, because I have had stable housing up until now. This week, that is all changing for me. Due to the State’s Estate Recovery Program, I am having to move so the property I’ve lived on these last 9 years can be sold to pay back the State. We are a family of 5 and have three generations living here, and now we are all going to have to move by the end of April. With the costs of housing in Bend, we are going to end up living in a RV and a 5<sup>th</sup> wheel trailer.

Everyone knows there is a massive shortage of Care Providers in this State. We State paid Care Providers saw that gap grow even larger over the past few years due to Agencies poaching our Care Providers with the promises of higher wages of \$24-\$30+ an hour and unlimited hours available to work. Over the past few years, we’ve had over 4000 Personal Support Workers move to Private Agencies because of this discrepancy in pay and hours. We State paid Care Providers are under a Contract with the State that limits our wages and caps our hours at only 60 a week. Currently our base wage is now \$20 an hour.

When a Consumer has more than 60 hours a week available, the Case Managers will usually bring in Agency Workers to fill the gap. Now mind you the State paid worker and the Agency worker are doing the exact same job with the exact same Consumer, but they are getting paid two totally different wages for doing so. There have been cases where Agencies have told Case Managers that the hours available for them to fill are too few and they were refusing to send anyone. In most of these cases, the State paid worker ends up with their hours cut or completely taken away so the Agency can come in and take over all the hours.

We’ve had Consumers and their family members complain about the quality of care these Agencies provide and they want their State paid worker back, but were told that can’t happen unless the Worker leaves the State Program and goes to work for the Agency instead. I’m sorry, but isn’t that considered Union Busting and what happened to Consumer choice? Once a Worker leaves the State paid program and goes to an Agency, they are no longer eligible to be a Union member and will lose all their Benefits.

I have personally seen advertisements for some Agencies offering wages of \$26 an hour or more, medical, dental, vision, 401k, sick pay, HSA, and life insurance. Through our State paid plan as long as we work 40 hours a month we then qualify for medical, dental, vision, EAP, PTO, and for retirement we get Oregon Saves.

In order to become a State paid Homecare Worker, Personal Support Worker or Personal Care Attendant you have to apply to the State, pass a background check, go through a 6 hour New Employee Orientation, get your Provider number, then take 8 hours of self-paced online training, which you are tested on after each class. You have 120 days in which to complete all of this before you can even begin caring for a Consumer. If you are already an established State paid Provider, you have to take 12 hours of Continuing Education training every 2 years, just to renew your Provider number, some are online and some are in person. With most Agencies, you can be working with a Consumer in just a few days to a week, oftentimes before your background check is completed.

I have been told of cases where Agency Workers watched a 20-minute video and were then sent out to a Consumers home. This is how things go wrong; the Consumer can get hurt or the Worker can get hurt, and it has already happened. I met a Care Provider who worked for an Agency, and she was literally trained via watching a 20-minute video and then sent out to a Consumers home, she went about her shift doing basic housekeeping, etc. Then she proceeded to try to transfer the Client and didn't know how to do it properly and they both fell, and she ended up with a broken back on her first day of work.

As Care Providers, there is a lot more to the job then just housekeeping, there's toileting, bathing, physically transferring a consumer, meds management, there can be wound care, preparing meals, feeding a consumer, driving a consumer to run errands, taking them to medical appointments, being their voice when there are cognitive issues involved, getting them out in the community, and saving their life. For instance, I had a Consumer who had cognitive issues and every time she went to a Doctor's appointment I had to be there to tell the Doctor and staff what was going on and to inform her about what they were asking/saying, this also means that every time she went into the ER or was admitted to the hospital, I was basically admitted too, even though I wasn't paid for doing so because Medicaid won't pay me and the Hospital at the same time. I now have a consumer I've had to perform the Heimlich maneuver on twice because they choked while taking their medications and couldn't breathe, luckily, I was there and knew what to do thanks to my CPR/First-Aid training, otherwise they literally could have died. Our Consumers become a friend and a member of our families, we spend holidays and special days with them and are there for them in emergencies whether its health related, weather related or even wildfires, and yes, even when they call us 3-4 times a day just to have that connection when they are lonely.

I support this Bill because I think all Care Providers should be fully trained for what their job entails and should have on-going training too. I think all Care Providers should be paid a livable wage and shouldn't have to work more than one job to make ends meet. In our current Bargaining Survey taken by our Union member State paid Care Providers, 68% live paycheck to paycheck, 40% have a household income of \$30,000 or less, more than half of them have at least 1 dependent, 1 in 4 work multiple jobs, 30% are on some sort of public assistance, 18% don't have access to or can't afford internet service, 71% are housing

insecure, spending more than 50% of their paycheck on housing, and 7% have been without housing or are currently unhoused.

We are an invisible workforce, we don't have a shared workplace, but that doesn't mean we don't deserve a livable wage and a secure, stable, equitable life. This is why I support this Bill, things need to change.

Thank you for your time and support.

Cristal DeJarnac