

March 30,2022

Senators and Representatives of The Bob Bethell Joint Committee on Home and Community Based Services and KanCare Oversight

Dear Senators and Representatives,

I am writing to you today as testimony and support for a wage increase for our direct support workers (DSW's) or personal home care attendants (aka caregivers). Currently, through the State HCBS Home & Community Based Services PD Waiver, my workers are paid a maximum of only 10.60 per hour for my personal care. Other agencies and organizations and home care services are paying 12.50 minimal to 16.00 and up. I cannot get interest, hire or retain people at 10.60 an hour and zero benefits, when they can also begin at 15-17 an hour at fast food chains, Walmart, Target, Home Depot etc . People with physical disabilities are hurting out here when we cannot attract workers.

I see in the headlines listed at the end of my letter, that money has been allocated for raises for Corrections and nursing jobs. A second headline increased pay for frontline hospital workers. Today, I read state worker's pay is increasing. **Still, there is no salary increase for our absolutely necessary workers who get paid through Independent Living Resource Centers like TILRC or RCIL or Independence Inc. There haven't been any even yearly pay raises. They have no benefits.**

I cannot financially afford on my social security to pay out of pocket for any care or wage raises for workers. My parents and siblings are deceased. It's only me to handle my life with or in the absence of home help. Friends work and are unavailable as well. I do not have anyone to help me in a bind.

I want to tell you a bit about me and why I absolutely must have Home Direct Support Workers. I am a lifelong Kansan, resident of Topeka all 58 years. I have had juvenile rheumatoid arthritis since age 2 ½. I graduated with university and national academic honors from Washburn University with a B.A. in psychology. Later I received my Master's degree in clinical psychology (specialty in health psych). I worked as a MA. clinical psychologist in a rehabilitation hospital, counseling persons with a variety of physical conditions, including COPD, chronic pain and traumatic brain injury. I was fairly independent (with minimal help) throughout much of my life, using a wheelchair for mobility from junior high on. In the mid 1990's, I required a few hours of assistance for myself daily, and the remainder of the day/night I could care for myself and helped care for my mother who had colon cancer and eventually breast cancer.

In 2009, my van was forcefully struck by a speeding driver. I was ejected from the vehicle as it spun west bound to landing east bound. I was life flighted to Stormont trauma, underwent emergency surgery to remove a shattered kidney and also sustained shattered right arm humerus bone. My condition was life threatening in ICU. A week to twelve days later upon discharge, I had a home nurse to check on my vital signs and surgery healing. I still had significant pain and now needed around the clock care help. I could not use a transfer board to get in my chair on my own, but helpers used a hooyer lift to get me out of bed. It took me months to get my body strength and energy back. I went from being physically active before injury to immobilized in a hospital bed. It's not good to restrict movement in arthritis as joints, tendons etc. get constricted and locked up. My right arm had been too shattered for any orthopedic pins or surgery. My orthopedist said it would be like pinning oatmeal, my arm was that damaged. I could no longer reach my face, drink without a straw, put my eyeglasses on, fix my hair, eat, or grip a pen to write. I began physical therapy and was making slow gains in movement and strength, but I could not make gains fast enough for Medicare/Medicaid to continue so therapy was terminated. I kept working on my own as best as I could and have regained some use and can write and type again.

My life was permanently altered with my accident. I can no longer get in or out of bed on my own or use a transfer board. I cannot bathe, dress or do any touching of my face. My arm will not allow me to blow my nose, put eyeglasses on, scratch my face, apply lotion or eat by myself many foods. I cannot care for my own bodily needs or toileting. I receive 56 hours a week of help. I still need workers here 9-2:30, then 6-8:30, then overnight. I am in bed, unable to get up until someone arrives in the morning. I do not have funds to make my bathroom accessible, so I get a bed bath but no shower. I need help bathing, dressing, transferring to my chair, cleaning and putting glasses on, hair care (washing or fixing), nail or foot care, and toileting using a bed pan to pee/defacate. I can eat some items with a longer fork, but the damage to my arm prevents me from using spoons or drinking without a straw. I can assist with cooking as I know what needs to be done as a knowledgeable cook, to give instruction. I need help lifting pans, stirring, baking etc. I require help to do my laundry, mopping, taking trash out, vacuuming, running errands and most things. Without a daily helper throughout the day or someone at night, in case of emergency, I would be left in bed. With my hours allotted, I am still alone 8-9 hours a day. In the early morning when a worker leaves, I have 3 hours I must lay bed pads down as I can't get off and on a bed pan on my own.. Someone is here from 9 until 2:30 then I have 3 plus hours in the afternoon alone, help in early evening and then alone a few hours before my night help arrives. I have to make my time I am allocated work the best that I can.

I have one kidney and am supposed to hydrate, however, I have to manage my time and deliberately not drink (dehydrate) when there is a gap between someone not being here. In case you wonder, Depends products worn against the body with wetness or otherwise, can set you up for horrible infections, so I won't do that.

I manage to take care of myself, eat healthy, take vitamins and herbal supports and I am rarely sick, as my physician could attest. Aside from restrictions in physical mobility and musculoskeletal limitations, I am otherwise a healthy individual.

I used to have workers continue working for me for years.(6 or more). I only lost workers due to their age or their own health issues. Since 2020, I have gone through many helpers and most leave due to low wages, and they find better paying jobs. None were lost due to fear of covid and work in a private home. My father was a pharmacist so I know and my workers know how to be sanitary and safe.

Again, I see in the headlines, money has been allocated for raises for Corrections, state workers, and frontline nursing jobs.. **Still, there is no salary increase for our absolutely essential workers who get paid through a payroll agent such as Independent Living Resource Centers like TILRC or RCIL or Independence Inc. There haven't been any even yearly pay raises nor do they have any benefits. Not even an option to buy into an affordable group insurance plan. I do not get the option to pay my workers more. The payroll agents like RCIL or TILRC decide what we as employers can offer as a maximum wage, established by the legislature.**

I realize there may be economic and budget difficulties but the article links below, will show you the amount being spent on helping other workers. It appears there is funding for certain groups and interests. Certain populations fall through the cracks and I am not sure anyone really cares. I know there is funding for a Direct Support Worker pay wage increase from a measly \$10.60 to at least 12.50-15 an hour, if not more.

Your consideration for our P.D. Waiver caregivers/direct workers paid through state funding and independent living centers appreciated. They are OUR vital frontline workers!! And often there is no backup or alternate coverage.

Regards,

Joanne Bauman Topeka, KS

<https://www.wibw.com/2021/11/23/kansas-increasing-pay-address-shortages-state-corrections-nursing-jobs/>

<https://www.wibw.com/2021/10/11/gov-releases-50-million-keep-frontline-hospital-workers-kansas/>

<https://governor.kansas.gov/governor-laura-kelly-announces-pay-raise-for-state-employees-in-24-7-facilities-to-address-staffing-shortages/>