



**Written Testimony of Jess Maurer on Behalf of
The Maine Council on Aging
To Joint Standing Committee on
Health and Human Services**

Testimony in Support of LD 958

Delivered in writing on April 5, 2021

Greetings Senator Claxton, Representative Meyer and members of the Joint Standing Committee on Health & Human Services:

My name is Jess Maurer. I'm the Executive Director of the Maine Council on Aging (MCOA). The MCOA is a broad, multidisciplinary network of more than 100 organizations, businesses, municipalities, and older Mainers working to make sure we can all live healthy, engaged, and secure lives with choices and opportunities as we age in our homes and communities. I am writing in support of LD 958, a Resolve Directing the Department of Health and Human Services to Conduct a Review of Rules Governing In-home Personal Care Assistance Services.

Justice and vision are intertwined concepts. When we see systemic injustice that will require real change to make it right, the critical path to success includes a clear vision for how we want the system to be reformed. We all agree that our current system of personal care includes a great deal of injustice - the worst kinds of injustice that leaves vulnerable people feeling more vulnerable and unsafe, and sometimes leaves them at risk for avoidable injury, hospitalization and institutionalization. We must have a clear vision for fixing this system and LD 958 takes a step in the right direction.

Today, and every day, there are tens of thousands of Mainers who rely on others for their most personal care. This is intimate care - dressing, toileting, and showering, and basic, life sustaining care - eating, wound care, and health monitoring. How would you want to receive this care if you needed it – whether you were paying for it or the state was? You'd want to trust your worker, feel comfortable in their presence, be sure they'd show up when you needed them to be there, and, most importantly, know who they were going to be, right?

Unfortunately, this is not the reality for most people receiving personal care today in Maine. In fact, right now, there are over 500 older and disabled Mainers who are nursing home level of care on Section 19 who have no personal care staffing at all. No workers are showing up for them. Others experience revolving and inconsistent care, different workers coming in and out, and sometimes no worker coming at all when one used to come. Some workers who show up are inexperienced and lack the skills to offer compassionate care. We can all agree this is a broken system of care that must be fixed.

This bill could be the start of a very important conversation this Committee should be having with this administration about their vision for the provision of essential care services in Maine. For far too long, you've been asked to focus on rates and workers – both extremely important parts of our care system – but this bill begins to focus attention on the most critical part of the system – the people who are supposed to be receiving quality care authorized and approved by the state. Of course, the only way that people will receive quality care is if we have an adequate number of essential care workers who are paid a living wage and who are trained and supervised. However, the discussion of these issues in the past have been focused on the wrong question. The right question is, how do we build a system of quality personal care that ensures people get the care they are entitled to in a person-centered way?

This bill requires the Department, in partnership with providers, to examine how entities providing direct care services to affected individuals provide information, such as advance notice of staff absences, termination of services and training requirements, and ensure supervision and quality care and protection of vulnerable people receiving care. This is a critical inquiry, but it does not go far enough.

We encourage the Committee to amend this bill to, at a minimum, require the Department to publicly report the number of unstaffed and partially staffed members, and the number of members who have experienced staff absences, staffing changes, and termination of services. We also think the state should be obligated to provide staffing to members who are entitled to it. We're not talking about people who are on waitlists, we're talking about people who have been approved for care who are not getting it. Currently, the understaffing or complete lack of staffing of older and disabled people, at least on Section 19, is an invisible injustice that does not motivate us to take the real action necessary to fix our system of care.

We urge you to consider the proposed amendment and to vote in support of LD 958.

Thank you.

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