

Jessie Dawn Mathieson
Stockton Springs
LD 1932

FAMILY TESTIMONY: (edited to offer a perspective that was missing from other's testimony. This is the testimony I gave in front of the committee)

My name is Jessie Mathieson. I am a generational Mainer and family member of multiple people with disabilities as well as a Direct Care worker.

I am here to tell you that this bill is a matter of life and death. Ten years ago I took over my brother's care. He was severely malnourished and came close to dying. His cocktail of 15 medications caused him to stop eating and repeatedly fall into unresponsive states. The group home was advocating for him to be put on more medications, but I stepped in and asked for an evaluation of his current ones. After consulting with a neurologist, we discovered that two medications were interacting and affecting his vital organs. As his doctor and I went through his long list of medications, we realized that he was on antipsychotics without indicated reasons, anti-anxiety meds for autistic stims, abnormally high doses of sedatives, and medications to treat symptoms from other medications. This kind of oversight happens when low pay leads to low worker retention, when staff are working unreasonable hours, and when the wage does not match the needed professional standards of the field.

This was not an isolated incident. My brother experienced this 3 times over the ten years he lived in the home managed by Group Home Foundations. When I pulled my brother out of the group home, it was revealed that leadership was mismanaging funds, including paying their CEO upwards of \$300,000 per year. These companies pay their boards 6 figure salaries while barely paying minimum wage for the people doing the bulk of the work. This leaves the homes under-staffed and without the ability to compete for quality workers. People who don't know what they are doing, who are overworked, who are working alone on a shift, will make mistakes. Mistakes in this field can be deadly. Studies have shown a direct correlation between low pay and increases in abuse and neglect in care facilities. My brother experienced this firsthand.

Since taking over my brother's care, I have faced challenges every step of the way. Due to staffing shortages at community support programs my brother is constantly being denied access to day program. This is a form of discrimination, but is allowed because these programs cannot offer competitive wages to attract workers. My brother does not get an opportunity to build community independently of me due to the low pay of DSPs. This also puts the majority of his care on me, when his waiver allows for 25 hours of community support per week. Families like mine save the state money, but the low pay and lack of supports makes it unsustainable. I can't imagine being able to make this work without a caring, loving husband who immigrated to this country in order to support me in caring for my brother. My husband's job as a postal worker is paid twice what DSPs in homes are paid and 7 times my stipend for 24/hour care.

Families and Direct Support workers do this work because we love the people we care for, but we also deserve to be compensated fairly for our work. I strongly encourage you to pass LD1932 for the sake of the workers and for everyone, including many people here, who need care or will need care at some point in their lives.