

My name is Brittany Spugnardi and I am the Residential Care Director and Registered Nurse at Montello Commons in Lewiston. We are a 44 bed residential care facility that services the Lewiston/Auburn and surrounding areas.

Thank you for taking the time to consider all the testimony given in November and making positive strides towards compromise, but there are still some concerning facts as part of the LD 979 bill that I am in opposition of.

I have worked at the Montello Campus for over 10 years, from floor staff to upper management. I have seen the changes that assisted living and residential care has gone through, especially since the COVID 19 pandemic. Since COVID 19, we have experienced some of the most detrimental staffing shortages as we ever have before. We are having a hard enough time staffing our buildings for the current staffing requirements, as it is hard to come by steady applicants that will follow through with the hire process.

Increasing the staffing requirements is not only going to be devastating financially to our facility, but where are we going to find the staff? This month, I had almost 70 applicants for a position I have posted for a PSS. After reviewing the applicants, only 35 met hiring qualifications. After reaching out to those qualified applicants, only 7 got back to me, and 2 actually interviewed. This is never going to fill the staffing that I would need if this bill goes through.

Besides finding the applicants, who is going to pay for the dramatic increase in wages? We have already had to significantly raise our wages to be able to hire anyone. In 2019, a full time PSS would make approx \$13-15 an hour, depending on their experience and other qualifying factors. Currently, we are hiring to start with no experience at \$19. This is such a significant increase, for not a lot of gain with applicants. Furthermore, without some kind of reimbursement from the state to ensure we can manage the increase of staffing, how are we supposed to stay open for the 42 residents we currently have? This would put us at risk of closure, as does everyone else.

If there was some sort of plan for reimbursement to offset the increased wage cost, it would help us see that compromise is able to happen. Facilities are already struggling to stay open. Why put more facilities at risk for closure? Where would the residents go? Where would all the patients and people in the community already patiently waiting for placement go? We need to make sure we have the resources before setting unattainable regulations.

My ask is that we don't rush into any emergent changes with this bill, and continue to work together to find achievable and meaningful changes that will also be sustainable going forward to provide the utmost quality care everyone's patient population deserves.

Thank you for your time.

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Brittany Spugnardi