

March 21, 2024

Vermont State House
115 State Street
Montpelier, VT 05633

In Regards to Homecare Workers United AFSCME 4802

Dear Legislators,

Thank you for inviting us to speak today. I'll start by introducing you to the work that homecare providers across the state are doing, then to some of the people we are working for, and finally to what we need your support with.

The workers that we're talking about today go by many titles such as homecare provider, direct support professional, and caregiver. We support people to live in their community rather than in institutions. Sometimes we are their primary care providers, and other times we provide care so that their primary care providers can work and tend to other responsibilities. We ensure that the people we are caring for can live meaningful lives. Our jobs vary widely, from preparing and feeding meals, assisting with daily medical routines, showering and toileting, supporting people with mobility issues, guiding people through behavioral challenges, giving emotional support and companionship, providing transportation and assistance to access the community. If you ask five homecare workers to describe their jobs, you will get five different answers. But the themes you will notice are "giving, caring, supporting". People rely on us to prevent imminent and future risk to their health and safety.

Vermont Homecare United, AFSCME 4802, is the state-wide union that represents direct support providers who are employed through Medicaid-funded programs under the Agency of Human Services. At this time, the covered programs are

- Adult Family Care Respite
- Brain Injury Program
- Children's' Personal Care
- Choices for Care/Flexible Choices/Moderate Needs
- Developmental Services
- Family Managed Respite
- Participant Directed Attendant Care Service

There are thousands of Vermonters accessing these services. Since 2016, the number of providers enrolled in these programs has plummeted from over 7,000 in 2014

to 5,343 today, based on payroll data, putting many vulnerable Vermonters at risk. The impact of this shortage of workers goes much deeper than that though; family members who cannot achieve financial security because of caregiving responsibilities; children who cannot attend school or meet their own needs without in-home support to their parents; Shared Living Providers who burn out because they cannot get the breaks that their designated agency assured them they would get once they hired respite providers. We are talking about stability and quality of life for many thousands of Vermonters that are dependent on a vibrant and diverse workforce in every corner of the state.

When I asked a recipient of self-managed care from the Developmental Services program what they wanted you to hear, they told me “Be nice to the staff. Not mean. It is not helpful to me. Staff can’t quit.”

The young adult that I work for wants you to know that this support “lessens the burden on my family. It helps me build a relationship with someone who is focused on me. It provides flexibility so we can have a long-term relationship”. With agency employees, this person has seen continual turnover. I, on the other hand, have provided them with consistent personalized support for 14 years.

Why can't the state recruit more providers? It doesn't seem that they are trying.

#1, The wages are often terrible. The state creates care budgets based on a base pay rate of \$14.05 per hour. Could you survive on that? While some participants opt to receive fewer hours of care in order to pay a higher rate, many cannot do this. Other care providers are family members who have no choice but to accept this wage; otherwise there will be no one to care for their loved one. There are no benefits; no support to afford healthcare, no retirement account, no HR department to help navigate workers compensation claims or family and medical leave needs. Your wage is all you get, and most of us have to use a significant portion of it to ensure that we have a safe, reliable and properly insured vehicle and/or home to provide care in.

#2, Most of us are ineligible for paid sick time. Many home care providers work part-time, or work for multiple clients, meaning that they either are not allowed to accrue sick time, or they accrue it at such a low rate that it is useless. There is no programmatic support to help a worker find coverage when they need time off. And since in most cases we cannot work if our clients are sick, hospitalized, or out of town, we often find ourselves available to work but without a job to go to.

#3, Training and professional development is extremely limited. Vermont Homecare United is piloting the first paid CPR/AED/First Aid for contracted support providers this

weekend. This is life-saving training that community health agencies are funded to provide, and their workers get paid to attend. Since we are seen more as 'gig workers' than as professionals, we have been excluded from access to it until now. We will be doing this training on a Sunday because that is when client care would be the least impacted. We are also hosting a System of Care training with a retired State of VT policy specialist at the end of the month. Our hope is that this educational opportunity will allow more professionals to better understand the structures and funding of our positions to better protect our rights and livelihood. The state has provided us with some funding for these trainings, but not with support to coordinate or publicize them. With such a widespread workforce, getting workers the training that they need to excel and remain in this field is an uphill battle.

#4, There is no centralized job board or database to help people who need support connect with people available and approved to give support. We have asked the state repeatedly to work with our union to create or adapt an appropriate job board but have been denied this collaboration. When a care provider loses a client, either because a program changes, their needs change, or for a plethora of other reasons, there is no easy way for that provider to find a new employer, and they often exit the profession.

Someone said to me the other day "I don't support higher wages for workers. If it's not enough money, get a different job" Wow! Is that the world we want to live in? Where will that leave disabled and ill Vermonters? What did they do to deserve this treatment? When Brandon Training School closed in 1993, and Vermont took leaps forward to reduce the institutionalization of those who could not live independently, the state promised these people options for care in their homes and communities. We cannot neglect this promise and these people.

Furthermore, in 1938, the US government passed the Fair Labor Standards act, bringing protections and stability to tens of thousands of workers, creating the 'minimum wage', and shaping the direction of our modern employment standards. Because caregiving responsibilities typically fell to women, and most commonly to black and brown women, our industry was excluded from FLSA. Nearly 100 years later, we are still fighting to catch up. We are not seen as professionals. We are not paid a respectable wage. We are not offered a seat at the table where the decisions are made about programs and people that we have dedicated our lives to. If you want to be a part of solving the wage gap for women and people of color, supporting an increase in wages for homecare workers is an exceptional place to start.

Vermont Homecare United is currently in negotiations for a new two-year contract with the state of Vermont. I believe that the people we are negotiating with also want

what is best for our clients, and that employees of the Department of Health and Department of Aging and Independent Living do not want to see these programs collapse. I believe that Designated Agencies across the state understand the importance of self and surrogate managed care programs. Our hospitals, nursing homes, and community health providers are overwhelmed with unmet needs. Utilizing homecare providers is an effective, affordable, and person-centered way to meet many of these needs.

Our negotiations with the state are currently at an impasse. Vermont Homecare United recently proposed a livable wage BASED on the data in the most recent Basic Needs Budget report, and the state countered with an increase to \$14.36 per hour. They dismissed nearly all of our other proposals, including improvements to sick leave policies, collaborating on a job board, and smoothing the way so that we can provide more access to training, without discussion.

We need legislatures to support us by encouraging the Agency of Human Services, DAAL, and the Department of Health to ask for budget increases so that these services can be adequately funded. We need state leaders to seriously consider the livable wage data collected by your own committee when creating budgets that fund these care services. Without your help, our state will continue to lose homecare providers while the needs of our aging population increase. Please use your voice as our representatives to help us move towards a more equitable society. Reach out to us at any time for more information or to brainstorm how we can collaborate with you to help vulnerable vermonters.

Sincerely,

Shannon Dufour-Martinez
Richmond, VT
413-281-3730
s.dufour.martinez@gmail.com
Vermont Homecare United, AFSCME 48023
Executive Board Member