
Testimony of Dan Connors before the House Finance Subcommittee
on Health and Human Services
3-14-23

Chairwoman Carruthers, Ranking Member Liston, and members of the subcommittee, my name is Dan Connors, and I have the privilege of being the CEO of St. Joseph Home in the greater Cincinnati area. I am here this morning to share with you the critical need for further investment in the developmental disabilities system to address the staffing crisis that exists for individuals who need critical support from a front-line worker, such as a nurse or direct support professional, known in our field as a DSP.

St. Joseph Home exists to ensure that the individuals with developmental disabilities we serve, and their families, receive the valuable supports they need to live to their fullest potential as they choose. We employ around 250 staff to provide residential, respite and day services to over 200 individuals and we specialize in services to individuals with complex medical and support needs.

I want to start off by expressing my gratitude to Director Hauck of DODD, and to Governor DeWine for the investment made to the DD system in the Administration's budget. As you heard, the Governor's budget allows for our system to achieve a statewide average DSP wage of \$16/hour. While I support this considerable investment, my experience at St. Joseph Home has unfortunately shown that this wage will not be enough to stabilize a workforce that has been rocked by a historic pandemic, surging inflation and the changing demands of a modern labor market.

Two years ago, St. Joseph Home began to see a dramatic change in our ability to recruit and retain staff. Our staffing levels were trending in a direction that meant we had to consider eliminating or downsizing services. We felt we had no choice but to invest our reserves into raising our wage, and in doing so we brought our average DSP wage to just over \$18/hour.

I'm grateful that we had this option, however, our reserves are finite and this investment is not sustainable without increased investment in the Medicaid rate. Also, St. Joseph Home is a 150-year-old nonprofit and, as such, we are one of the very few providers in our system who can even temporarily invest in wages like this. This is why you are hearing of, or will hear of, stories of providers who are having to make difficult decisions to close homes and consolidate their services. These providers are

passionate about services to individuals with developmental disabilities, but with no other operational revenue outside the Medicaid rates, they have no choice but to reduce services to ensure that the individuals in their care are safe and well served.

It is also important to say that bringing St. Joseph Home's average DSP pay to \$18/hour allowed us to keep from closing services, but it did not solve our staffing challenges. We have had to prioritize residential services and still have non-residential services operating below their pre-pandemic capacity directly due to staffing challenges. Even within our residential program, we have front line worker vacancies over 30%, leading to surging overtime costs to make sure shifts are covered. I think this experience demonstrates the credibility of the coalition of providers' request to bring the average DSP pay rate to \$20.64/hour to stabilize our workforce.

Our continued staffing challenges have also caused us to halt expansion plans that we had to meet a surging demand for services that is, frankly, overwhelming.

We historically have maintained a list of more than 50 individuals who are waiting for an open bed at St. Joseph Home. We also receive regular calls from local children's hospitals seeking placement for children as young as 10 months old who are ventilator dependent and living in the hospital setting with no long-term placement options. As the staffing crisis in our state has increased, however, we have begun to see a staggering number of inquiries looking for service. In the last 8 months alone, we have received 321 additional requests for services.

If our provider system is not able to sustain our services or expand to meet these soaring needs, these individuals and their families, who are in crisis, will have few options available to them, and those that are, such as nursing homes and hospitals, will be at an even greater expense to the Medicaid system. More importantly, they will not be able to meet their needs.

In closing, I want to thank you for the opportunity to share our story with you this morning and I would be happy to take any questions you might have.