Sandra Donohue 3255 Sheridan Ave, N. Minneapolis, MN 55412

February 26, 2024

Chair Hoffman and Members of the Committee on Human Services MN Senate MN Senate Building 95 University Ave, W. St. Paul, MN 55155

Dear Chair Hoffman and Members of the Committee on Human Services:

My name is Sandra Donohue from Minneapolis. I am writing to you in support of SF 3841.

I became a FRS provider in 2004. Because my home was handicapped accessible, we were unique and could take people needing wheelchairs for mobility. Over the next 20-year period, and because the people we supported tended to be those with progressive diseases, we focused our home on those needing hospital level of care. We have supported over 20 people in our 20 years of fostering adults.

We have had people on vents, having tracheostomies, g-tubes, colostomies, ileostomies, straight catheters, pubic catheters, supra-pubic catheters, wounds and pressure sores. The people we support come with all types of complex medical needs like MS, paraplegia, quadriplegia, ALS, Cancer, and we provide hospice services at end-of-life so that they can stay at home and die with dignity.

In 2022, my daughter took over my 245A program. She has been working with me since she was 15 years old. She was 35 years old when she moved herself, her fiancé, and her young son into our home so she could take over care.

We have a doctor that supports us by coming to the home once per month (more if necessary) and we have access to him 24/7 through a medical portal in case we have needs after normal business hours. In 2023, we hired a full-time registered nurse to oversee our medication administration program and we added Therap to our software arsenal to ensure we are doing the best job we can in meeting the 245D requirements for both medication administration and goal tracking.

The people that we hire (because our clients need additional staffing per their CSSP's including awake staff and 1:1 staffing) become extended family to us. Their kids are included in that. We share holidays together, we share kid's birthdays together, celebrations like weddings, baby showers, life-happenings together because we are a family. In fact, we have a mother-daughter and mother-son working for us going back the full 20 years I have been a 245D/245A licensee.

Our program is completely person-centered. It is one of the foundations of who we are as a program. The people we support are in full charge of what they want their best life to look like, not force-fed programming because of being short-staffed or because that's the corporate way of doing things. Our clientele come directly from nursing homes, hospitals, and parental homes. We are a one-of-a-kind program and when we have an opening, it is filled within days of when I announce it.

I strive to make each person we support feel as if this is not only our home, but their home as well, that we are part of their extended family for as long as they are with us. Of the people that have passed away in our care, we still speak to their families and continue to include them in all of our summer and fall festivities. I have included a letter from a daughter whose dad passed away after 12 years of living with me (Attachment 1), a Facebook shout-out from a daughter of a person who lived with us for over 6 years after her dad passed (Attachment 2) and from a case manager who I have worked with for several years (Attachment 3).

Since my daughter took over the 245A program I ran for almost 20 years, I have devoted myself to working with programs that already have their 245A license, but either have applied for or don't qualify to get their 245D license. Using a satellite practice and the same person-centered programming we do in the home I and now my daughter own, we support a total of 29 individuals in 18 homes across 8 counties in Minnesota. I took on a partner, Angela Strasser, in 2023, and she and I are working together to support the people in those homes along with the providers who run them.

With the push to be person-centered and provide individual programming so that the people we support can live a quality life of their choosing, it is difficult, as a provider, to hear that person-centeredness only goes as far as programming, but is not used as the foundation of the rates we are paid.

The people we support are not alike – they are not all the same. I have a gentleman we support currently that has a tracheostomy, g-tube, is incontinent of both urine and bowel and has the cognitive level of a toddler in a 29-year-old's body. His current language is pinching and pulling hair as he doesn't use language to tell us something is wrong or that he doesn't feel good. Because of his cognitive level, he does not understand to let go and we have had multiple situations where we have had to pull someone's hair out because he won't disengage, and we can't use a scissors for fear of cutting him. He must be micro-prompted for his every action and we have to direct him in his every task, or we can't get them done.

If this bill isn't passed, where does he go? We will not be able to sustain our programming as we will not be able to hire staffing, nursing and pay our bills. Currently, when we file for an exception using DHS-5820 (attached), we can usually get additional monies above what is already built into the DWRS framework for the following categories:

- 1. Average hourly wage of staff providing direct care
- 2. Wage for staff who are generally asleep, but available to respond to unplanned events during the night
- 3. **Absense** is the overhead cost adjustment based on costs still present even when the person is not there and the provider cannot bill **Utilization** is costs associated with costs to maintain a licensed home such as licensing fees, etc.

It is unlikely we can get additional monies above what is already built into the DWRS framework for the following categories:

- 1. Costs for a provider to supply health, dental or life insurance, retirement benefits, wellness programs, etc.
- 2. Costs to provide access to the community or care in the home such as supplies/equipment, not available through MA, reinforcements outlined in the CSSP, expenses related to staff costs for accessing community, etc.
- 3. Overhead costs related to providing the service, such as conferences, fees related to licensing, background checks, city or business licenses, record retention and storage costs, training and recruitment of program staff specific to the extraordinary needs of the person

- 4. Standard overall costs common to all businesses, such as staff wages/benefits, banking fees, office utilities, office equipment, phone, etc.
- 5. Cost related to providing transportation related to the person accessing the community in either a standard or adapted program vehicle

We need to level the playing field for FRS's as we deliver the same services that CRS homes offer, have the same rules, regulations, and state mandates that CRS homes must follow, all the while providing the people we support with a family, love, continuity of care, we do it with less staffing, no corporate entity to do all the paperwork so the load is heavier because we have to do the direct support as well as the paperwork needed to stay compliant. We need a seat at the table of whatever task force or advisory committee is set up that affects us including Waiver Reimagine, the DWRS Advisory Committee, and the one being proposed in HF 3712.

If you go to a flat-rate system and you take away our ability to file exceptions on top of it, of the almost 1,800 FRS homes currently operating in Minnesota, over 70% of them will have no choice but to close. Where are the 29 people I support with my 245D going to go? What about our flagship program where the people we support come directly to us from hospitals and nursing homes that can't handle their level of care long-term? What are you going to do to accommodate the wishes of the people that want to live in a family home rather than an institutional setting when we can no longer afford to operate?

I encourage you to talk to any of the case managers or social workers I work with and they will tell you that it is FRS homes accepting people needing the highest level of care in both mental and physical health for various reasons including staff shortages, yet those providing those services are in constant fear of being shut down because of the need to hire supplemental staff to provide the services that the people we support need and deserve.

I encourage you to talk to the guardians and case managers of the people we support. Ask them what impact we have had on their lives, their extended family, and the overall community in which they chose to live. We need to be seen as adding a valuable service to the State of Minnesota, not feel as if we are stuck in a mud bog just trying to survive and worried every second that the people we love are going to be removed from our homes.

I encourage you to come see our flagship home and talk to the people we support, hear what they have to say about their previous placements compared to the care they get in our home.

Chair Fischer and Members of the Human Service Policy Committee I want to sincerely thank you for your time and the work you do at the legislature.

Sincerely,

Sandra Donohue Donohue Foster Services 245D License #1069139

Attachment 1

Testimonial for my experience with Sandra Donohue:

Sandy took in my dad, Richard Wagner, from a terrible nursing home that was closing down. He was her second foster client. My dad went from a place that didn't care for him at all to a place that we considered a HOME with new family. My dad was loved and adored in Sandys home.

What stood out to me most about my father's care was that he was genuinely loved. They paid attention to him. Sandy and her staff knew before the doctors that he had an infection going on and would not allow anyone to ignore them, including doctors/nurses. They would fight for his best interest. Sandy and her staff were on top of my dad's special needs— and he had many. Sandy would go with me to doctors appoints, she didn't have to, but she wanted to make sure all the Ts were crossed, and the I's were dotted. Eventually she just took him herself, which was so helpful to me so I didn't have to miss work and I trusted her completely. As the years went on and he became more fragile, Sandy and her staff fought even harder to keep him as healthy as possible. I'm talking protein shakes with nothing but the best organic nutrients to boost his health and well-being.

The care my dad received in Sandy's home is second to none. He was cherished, loved, and taken care of better than I could have ever imagined. Not only did this extend the quality of his life, it extended the years of it as well. Sandy's strength is that she doesn't always take no for an answer if she thinks there is an alternative to help care for your loved one. She will try and she will fight on behalf of those she cares for. We celebrated holidays with Sandy and her staff and other families, and when we couldn't make it, she made sure all those in her home were included in any festivities. They grilled out, order pizza in, hung out at bonfires in the backyard.

She made my dad's life a life with fun – this may seem little to some, but it's a big deal for a handicap person, and it extends their life since its filled with so much more fun. She worked hard and with intention to make that happen for everyone in her home.

You or your family members will be the lucky ones, if you are able to work with Sandy in any way. She gives nothing but 150% to everything she does. And she does it with fierce loyalty, dedication, and love.

I will owe Sandy a debt of gratitude for the remainder of my life for making my dad's life bright and happy, even when it was hard for her too.

Attachment 2:

Just wanna take the time to thank everyone who reached out means a lot. I also want to give thanks to Sandra A Bathurst Donohue for coming to our rescue when my dad needed you the most and opening your home to him (and us) couldn't have asked for a better home for my dad! Also giving thanks to 2 of my favorites there (even though all are great and deserve thanks as well) Tawnee Henry and Michelle Pastorius-Lapinski for loving my dad and taking care of him and his best friend Brian for being his best bud and trouble makers! Sandy, I am so appreciative of you and your work. Thanks for being such an important person in caregiving.

You are always very attentive to details and organized. You always have an open mind when collaborating with the county. You utilize past experience and networking to achieve goals for those to whom you provide services.

I am very grateful for the support you provide to your host homes. You are on top of all tasks you are responsible for, and you are very attentive to your clients' needs. You always look for ideas and innovation in favor of benefiting the clients.

The care for the clients whose cases we share is better than I could expect. You ensure the clients that live at the homes you work with are receiving the best care!