



THE NEW YORK STATE PUBLIC EMPLOYEES FEDERATION TESTIMONY

Health Joint Legislative Budget Hearing

2021-2022 Executive Budget Proposal

February 25, 2021

Wayne Spence, President

Good afternoon Chairpersons Krueger, Weinstein, Rivera, Gottfried and other committee members. My name is Wayne Spence and I am the President of the Public Employees Federation (PEF). I want to thank you for the opportunity to speak to you on behalf of our 51,000 members about the potential impact of the Executive Budget if adopted without modification. Our union is made up of professional, scientific and technical experts who provide critical services to the residents and taxpayers of New York State. Our union represents nearly 10,000 nurses and health care professionals who work in the state's public hospitals, residential and correctional facilities and in various research capacities. Serving as the state's frontline essential workers during the COVID-19 pandemic, my members have risked their lives and those of their families to maintain the continuity and quality of services to New York's most vulnerable citizens. Our members care for the elderly, disabled individuals, the sick and the infirm; they work to ensure the state's roads and bridges are safe and secure; they help to rehabilitate those who have violated the law and to counsel and provide safety net services for at-risk youth. Our members take a great deal of pride in their work because they are professionals and they care.

PUBLIC EMPLOYEES HAVE BEEN THE BACKBONE OF THE STATE'S COVID-19 RESPONSE

I would be remiss if I did not begin this discussion by highlighting the fact that PEF members have been at the forefront of the state's response to the COVID-19 pandemic. Despite chronic shortages of personal protective equipment, inaccurate guidance on appropriate safety protocols, a lack of off-site housing, the imposition of mandatory overtime and forced redeployments, PEF members have filled the breach to keep their clients and all New Yorkers as safe as possible during this crisis.

Unlike many of the essential employees in private industry, my members have received no recognition or remuneration for their selfless and dedicated service. In fact, this proposed budget seeks to further privatize many of the critical public services they provide; it seeks to relocate their jobs to other regions of the state; and it proposes to cut the health insurance benefits that they have earned as faithful and dedicated public servants.

New Yorkers learned the importance of government and the need for enhanced government capacity during this crisis. How many of the state's private service contractors were performing their contractual responsibilities or servicing taxpayers at the height of this pandemic? New York needs to learn a lesson from this experience. New York needs to develop greater capacity to deliver services and to address current and future disasters in a timely, efficient and cost-effective manner -- that cannot be achieved with private contractors performing public services.

SUNY HOSPITALS – DISCONTINUATION OF THE INDIGENT CARE POOL TO PUBLIC HOSPITALS (Health and Mental Health (S.2507 /A. 3007) — Part D))

As we have seen throughout this pandemic, the SUNY hospitals are cutting edge facilities that serve the very unique needs of the communities in which they are located. The three SUNY hospitals (Downstate, Upstate, Stony Brook) provide vital medical education, research and essential health care services to their communities and specialty care services such as burn and trauma care units and stroke centers. They are especially important to the underserved, less affluent populations in the communities where they are located.

We thank you for restoring cuts to SUNY hospitals in the past and rejecting language that would have opened the door to private investments in public hospitals. We appreciate your

continued support for these incredible institutions and for the communities and people that they serve.

The Executive Budget would harm New York's public hospitals which were at the forefront of the COVID-19 response. At a time when hospitals, especially those that assist underserved communities, are facing high levels of use and are desperate for additional funding, eliminating this funding source is ill-advised.

We urge the Legislature to reject the discontinuation of the Indigent Care Pool for the public hospitals and to continue to work towards long-term streams of additional resources so these institutions can continue and expand upon their vital public purpose.

Due to the low salaries of public nurses compared to the private sector, the state and its agencies are having an increasingly more difficult time attracting and retaining talent. Every state agency suffers from recruitment and retention problems for licensed professionals such as nurses, doctors, dentists, pharmacists and nurse practitioners. These professionals are always in high demand, but this situation has been magnified by the COVID-19 pandemic.

However, in lieu of increasing compensation, benefits or improving working conditions, the state has imposed the use of mandatory overtime, the hiring of "contract" nurses; and redeployment of staff to meet critical staffing needs in other agencies or facilities. These "agency" nurses present an acute problem for morale as they typically receive substantially more pay, while often performing much lighter duty as compared to the full-time staff nurses.

These factors, coupled with the often intense nature of the clientele served, only feed the cycle of attrition and turn over in all of the agencies. In several facilities – Rochester Psychiatric Center, Capital District Psychiatric Center, Valley Ridge Center for Intensive Treatment,

Broome Developmental Disabilities Service Organization, etc. – we have had to ask for the members of the Legislature and the Commissioner to intervene with facility management to address staff bullying, the continued imposition of mandatory overtime, forced redeployments of staff and/or serious breaches in common sense application of COVID-19 safety precautions.

The shortages within the DOCCS Healthcare system remain a major concern. The vacancy rates in the titles of Nursing, Dental and Pharmacist have continued to increase over the last year -- vacancy rates for nursing exceed 27%, dental 31% and pharmacy is now over 10%. While these numbers are bad, the reality is far worse. We have facilities managing 24-hour care for both inmates and staff that are at vacancy rates exceeding 50%. Some facilities are even higher: 58% at Cape Vincent, 62% at Green Haven, 64% at Sing Sing. We have 12 facilities (up from five last year) in total that have greater than 40% and 23 facilities with vacancy rates higher than 30% in nursing alone. An alarming percentage of our nurses are forced to work short-handed. These nurses not only attend to inmates' needs, but just as importantly, they attend to all staff. They perform critical services related to medical emergencies, inmate fights, staff injuries and drug overdoses. At Elmira, there are currently more "agency" traveling nurses working at the facility than actual full-time state employed nurses.

INTERSTATE LICENSURE PROGRAM (Health and Mental Health (S.2507 /A. 3007) — Part D))

In order to address this on-going problem, the Executive proposes to authorize the Commissioners of OMH, OPWDD, DOH, and OASAS to issue regulations for the creation of an interstate licensure program for nursing and other licensed titles to allow health care and other licensed professionals from other states to treat patients and render services here in New York.

Health care professionals and their unions have been urging the state of New York to develop a pipeline program for nurses for years. The state of New York should be facilitating the entry of new students into nursing and other programs not outsourcing health care needs to workers from other states with lower licensure standards.

We urge the State Legislature to REJECT authorizing state agencies to develop and implement an interstate licensure program for nurses and to take a more active and visible role in agency oversight and to encourage agencies to deal with workforce issues collaboratively and productively.

OTHER TOOLS NEEDED TO ADDRESS NEW YORK'S NURSING SHORTAGE

The state's nursing corps has served with distinction in the battle against COVID-19. These frontline workers have persevered despite inadequate and inappropriate personal protective equipment, long and difficult work shifts, understaffing, re-deployments, child care issues, the emotional and psychological impact of treating many chronically-ill and terminal patients, separation from their families and/or the heightened risk of exposure to COVID-19.

Preferred Entry into CUNY/SUNY

We were pleased that the Governor included one of PEF's legislative priorities in his State of the State message. It is only right and just that the state's nurses receive preferential treatment into SUNY and/or CUNY institutions so they can maintain and expand their professional credentials. While we are all still waiting for the introduction of legislation to effectuate this program, clearly even more needs to be done to address this looming crisis.

Increase Base Pay for Nurses and Other Health Care Professionals

The larger state agencies such as DOCCS have been forced to rely on geographic pay differentials to try to avoid staffing shortages. Unfortunately, these are short-term fixes that do

not address the real need which is increased salaries. Actual salary-based monies will help to stabilize our staffing needs.

If the state is serious about attracting and keeping skilled nurses, it is imperative that we look at increasing the base pay for our nurses. A much-needed pay increase would help with the recruitment and retention of qualified nurses. Increases are needed for all medical titles within the state workforce.

Other Benefits to Attract, Retain and Reward Our Heroes

There are other tools that are being offered in the private sector to attract and retain nurses and other healthcare professionals. We believe the Legislature should enact a broader program to recognize the services our nurses have rendered, for the sacrifices they have made and to begin the process of rightsizing the salary and benefits package needed to compete against private employers:

- A. Income Tax Credit: Establish an annual tax credit of \$500 for professional or practical nurses, nurse practitioners or clinical nurse specialists; and
- B. Annual Loan Forgiveness Program: Establish a competitive \$1,000 annual loan forgiveness program for nurses who are employed in a licensed health care facility and who have an outstanding loan from having attained a degree from an accredited public university or college; and
- C. Hazard Pay: Nurses and all essential state employees should be provided hazard equal to \$2,500, plus an extra week of vacation accrual.

CONCLUSION

New York State maintains the most qualified, highest caliber health care workforce in the nation. Now, we need to implement the strategies needed to attract and retain more people in the health care profession. Unfortunately, this budget proposal does nothing to address these issues. In lieu of investing in our workforce and the services our citizens need, the Executive proposes to close state facilities, cut public services and reduce critical staffing.

Budgets are about making hard choices. We ask that you reject the Governor's agenda of closing facilities, reducing services and cutting staff. We ask that you secure the resources necessary to invest in providing the critical health care and other services all New Yorkers need.

I appreciate your time and the opportunity to address you today. Thank you.