



THE NEW YORK STATE PUBLIC EMPLOYEES FEDERATION TESTIMONY

Mental Health Joint Legislative Budget Hearing

2021-2022 Executive Budget Proposal

February 5, 2021

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Good afternoon Chairpersons Krueger, Weinstein, Brouk, Gunther 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 52,000 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. 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, 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.

I. 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 are 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, and 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. It should be noted that our members who worked in congregate settings and directly with COVID patients have borne a disproportionate burden in serving the state's neediest citizens.

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 privatize the critical public services they provide, relocate their jobs to other regions of the state, and cut the earned health insurance benefits that they have earned as faithful and dedicated public servants. The most egregious of these cuts and closures occurs in the state's already overburdened and undervalued programs that provide mental health services to New York's most vulnerable citizens.

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 needed services and to address the current and future disasters in a timely, efficient and cost-effective manner – all of which cannot be achieved with private contractors performing public services.

I. CLOSURE OF ROCKLAND CHILDREN'S PSYCHIATRIC CENTER (Mental Health and Mental Hygiene (S.2507/A.3007)-- Part X)

In lieu of generating appropriate revenues to spread the burden of addressing this crisis fairly, the executive has offered a short-sighted proposal that privatizes various mental health services and the closure of several state facilities to help balance this year's budget. The closure of RCPC and the reduction of the state's psychiatric bed capacity undercut the state's laudable long-term goal of addressing criminal justice reform in a meaningful and lasting way. The state cannot hope to reduce the long-term correctional facility census without providing enhanced mental health services to individuals in crisis.

This nine-year-old facility provides intensive, individualized inpatient and residential treatment for mostly low-income children and youth with serious mental health issues. This is the only state-run children's hospital south of Albany serving six counties - Orange, Putnam, Rockland, Ulster, Dutchess and Westchester.

This facility was originally designed with a 56-bed inpatient capacity. It was subsequently reduced to 20 beds. While the Executive points to lower utilization, staff indicate that they receive several calls daily from area hospitals to accept severely ill individuals on either an outpatient or residential basis. It is important to note that most of the referrals received by the RCPC are low-income patients and families in serious crisis.

The majority of individuals the state serves have serious family and psychological issues that require intensive and costly mental health, counseling and other services. We know that private providers are strapped for resources and this can lead to gaps in needed services for the most difficult, time-consuming and resource intensive cases. We also know that when private providers are unable or unwilling to deliver effective services, the state becomes the default for treatment. We cannot forget that the services provided by the state – especially those cost-intensive services rendered by OMH, OPWDD, OASAS and OCFS – are often the very last service option for people in serious crisis. Without those services being accessible in every region of the state, many of these people would be left untreated, increasing the chances of interactions with the criminal justice system and other state or local social services providers.

We urge the Legislature to reject the closure of the Rockland Children's Psychiatric Center.

II. CUTTING ADDITIONAL STATE PSYCHIATRIC UNIT BEDS (Mental Health and Mental Hygiene (S.2507/A.3007)-- Part X)

In addition to specifying the closure of RCPC, the Executive Budget proposes to authorize the Commissioner of Mental Health to unilaterally “close, consolidate, reduce, transfer or otherwise redesign services of hospitals, other facilities and programs operated by OMH and to implement significant service reductions and reconfigurations.”¹ While the supporting documentation calls for the closure of the RCPC, this language authorizes the commissioner to take action unilaterally across the agency.

One of the stated goals of the Office of Mental Health is to seriously reduce beds and services across the entire mental health system. This proposal would cut 292 inpatient, youth and forensic psychiatric beds across the system. These closures would come on top of the 99 beds that were eliminated administratively in November-December 2020. Bed reduction and facility closures will dramatically impact New York’s most vulnerable residents and force them to travel greater distances to receive services.

We urge the Legislature to reject this proposal, to maintain the continuity of services for the state’s most at-risk residents, and to require legislative oversight and authorization for any future facility closures, program consolidations and/or service reductions.

III. CAPACITY REDUCTION AND SERVICE CUTS AT OPWDD

In addition to the explicit facility closures and service reductions authorized in the Executive Budget proposal, the budget also proposes to transition individuals with developmental

¹ Executive Health and Mental Hygiene Budget Proposal (S.2507/A.3007) - Part X

disabilities in state operated residences into voluntary-operated programs.² This proposal cuts and privatizes the important services that OPWDD provides to individuals with profound disabilities and remands their care to outside service agencies that do not maintain the professional staff or operating capacity to meet their unique needs. This proposal, which is strictly advanced as a cost-saving measure, would separate clients and families from the staff who have cared for them for years.

We urge the Legislature to reject this proposal and to provide additional resources to OPWDD so it can continue to maintain the staff and supports necessary to provide these needed services to New Yorkers with developmental disabilities.

IV. STAFFING REDUCTIONS AND PROGRAM CLOSURES DISPROPORTIONATELY AFFECT THE STATE’S NEEDIEST RESIDENTS

This year’s Executive Budget continues a disturbing decades-long policy of reducing staff at facilities that render services to our most at-risk individuals and youth. We believe that the downsizing and privatization of these critical services undercuts efforts to reform the state’s criminal justice and social services systems.

Under the budget proposal, staff will be reduced by 9% at OCFS and 3% at OMH from 2020 levels. A simple comparison of the 2010 and 2020 NYS Workforce Management Reports reveals a disturbing trend in the reduction of staff that deliver these needed services.

² “*Manage Access to Residential Programs Based on Need,*” 2021 Executive Budget Briefing Book; Mental Hygiene, page 6

NY State Human Resource Allocation for At-Risk New Yorkers

	Staffing 2010 ³	Staffing 2020 ⁴	Diff	Percent Decrease	Proposed Reductions 2021
OCFS	3,750	3,268	-482	13%	-285
OASIS	941	900	-41	4%	NA
OMH	17,566	14,640	-2,916	17%	-446
OPWDD	23,973	20,371	-3,602	15%	NA

The executive cites underutilization at the facilities targeted for consolidation and closure, however, there are several important factors inherent in the consideration of these claims:

A. COVID-19: Many, even those with the most severe conditions, have shied away from seeking residential or other treatment for fear of contracting and spreading the virus. In fact, we know that residents at nursing homes and other congregate settings are high-risk areas for contracting the virus.

B. Management Direction: We believe that at certain facilities, management has directed staff to reject the placement of clients in certain programs targeted for closure. Additionally, we believe that regional hospitals continue to seek placements of individuals in the state's psychiatric programs. We do not know the extent of this practice or the role it may play in the determination to close or consolidate the facilities. However, it seems counterintuitive that during a global public health crisis, fewer persons would require psychiatric support at state facilities. In any event, the state should be working to expand its services for mental health as a means to help secure meaningful reform of the state's criminal justice system.

³ 2010 New York State Workforce Management Report; <https://www.cs.ny.gov/businesssuite/docs/workforceplans/2010.pdf>

⁴ 2020 New York State Workforce Management Report; <https://www.cs.ny.gov/businesssuite/docs/workforceplans/2020.pdf>

C. Pent-Up Demand for Services: Mental health experts agree that the pandemic has aggravated the mental health issues affecting thousands of New Yorkers. Additionally, data indicates that the pandemic has affected minority and poor communities on a much greater scale in terms of deaths, illnesses, community spread and the mental health challenges that stem from the stresses associated with these factors.⁵ Even before what many have termed the “dark winter,” Governor Cuomo stressed the effects of COVID-19 fatigue: “It is frightening, COVID, and it has caused significant anxiety among many people... Yes, we see it in the numbers, you see it in substance abuse, you see it in domestic violence, you see it in the number of people calling for mental health treatment.”⁶ The move to telehealth provides great advantages for treatment during a pandemic, but will it provide the appropriate level of mental health support after the pandemic is over?

State providers have always handled the most complex and difficult cases. This diverse and high-level care that such individuals need has helped to create a state workforce that is seasoned and highly specialized in caring for the developmentally disabled. Additionally, state employees do not and cannot put operating budget considerations before the care of the people under their charge. It is for these very reasons that the state must maintain its existing role and responsibility as the entity charged with caring for our most vulnerable citizens.

⁵ “COVID-19: The mental health impact on people of color and minority groups;” Medical News Today; <https://www.medicalnewstoday.com/articles/covid-19-mental-health-impact-on-people-of-color-and-minority-groups>

⁶ <https://www.nbcnewyork.com/news/coronavirus/cuomo-says-mental-emotional-stress-caused-by-covid-fatigue-is-serious-problem/2680467/>

We urge the Legislature to reject divestiture from these important programs and we urge the Legislature to dedicate the resources and staffing necessary to rebuild the state's mental health safety net.

V. REVENUES AND THE BUDGET GAP

We also urge the Legislature to identify and secure some other mechanisms to increase state revenues so that the state can continue to deliver the services that so many New Yorkers need. Multiple options have been advanced to increase income and other taxes on the state's most affluent individuals so that everyone can share in the sacrifice to close this year's budget gap. We encourage you to consider and advance one or more of these proposals so that closing the budget gap is not achieved solely by cutting the programs and services needed by our most vulnerable residents.

CONCLUSION

New York state maintains the most qualified, highest caliber state workforce in the nation. Unfortunately, this budget proposal continues to undermine the state workforce by initiating plans to privatize and diminish the services that New Yorkers need.

As we have seen from the state's response to the COVID-19 pandemic, the public interest is best served by high-capacity state agencies that render needed services and which are staffed by talented, dedicated and professional public servants hired pursuant to the state's rigorous civil service system. We urge you to reject these proposals, to enact revenue increases that meet the state's operating needs and to dedicate resources necessary to ensure the continued delivery of high quality public services to all of the state's residents.

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