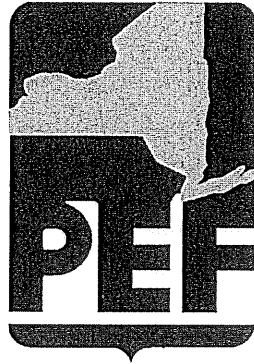


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Testimony, Health/Medicaid Joint Legislative Public Hearing
On the 2017-18 Executive Budget Proposal

By:
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February 16, 2017

My name is Nora Margaret Higgins, I want to thank you for taking the time out of the day to hear the concerns of healthcare workers throughout the very blessed state of New York. I say, and mean blessed, because those of us in healthcare have had the privilege of touching, and in some cases, saving thousands of lives. I myself have worked as a nurse for 30 years, 27 of those at SUNY Stony Brook Medicine.

Through the years the song for the state worker has remained the same. "Do more with less". Watching people leave and never get replaced, salaries stagnating, more limitations to the newly hired employee, and the downright despair and frustration one feels when wanting to provide the best care for your patients, while limited by time, inadequate resources and insufficient quality staff.

The shortage of nurses and other healthcare professionals in NYS is not discriminatory, it is everywhere. Most crucially in the hospital, and NYS facilities. To a great deal this is caused by the two opposing ends of the spectrum, the first the new nurses that are not willing to come or stay in NYS, and the other is caused by the multitude of nurses leaving the state due to retirement or for fear of losing their nursing license. (enter the Justice Center).

The exodus of registered nurses working for NYS is directly attributed to difficult working conditions including:

1. Inadequate staffing
2. Mandatory Overtime (even through there is a No Mandatory Law- state agencies continue to violate it with no penalty)
3. Insufficient compensation in comparison to the private sector that pays on average \$10,000 - \$15,000 more in annual salary.

PEF nurses are already wrestling with chronic understaffing and its ramifications in facilities throughout New York. Due to the fact that the salaries of nurses employed by NYS are not competitive with the private sector and poor working conditions found in many of the state institutions, NYS is dealing with a massive nursing shortage. Examples of the poor working conditions faced by many of the PEF nurses include:

- Increased incidents of assaults on nurses working in State Psychiatric Hospitals and Developmental Centers (assault).
- Frequently being required by their agency to cover 2 floors of 22 -24 patients or even be responsible for patients physically located in another building(s).(License jeopardy)
- Not be able to take a meal break (fatigue=mistakes)

- Being mandated to work double shifts or in some cases being pre-mandated to work on their days off or their off shifts even though there is a No Mandatory Overtime Law. The NYS Department of Labor does nothing to enforce the law in the state facilities and there is no fiscal penalty.
- The NYS Department of Corrections and Community Service is charged with the care and custody of people who violate the law in NYS, yet they are the lead violator of the No Mandatory Overtime Law. Since 2009 there have been 4,018 incidents of mandatory overtime involving DOCCS nurses have been reported. (DOCCS Monthly Health Services Report Nov 2016)
- Justice Center has not resulted in improved quality of care for vulnerable citizens, but has had a adverse impact by draining resources, limiting staffing options, and creating a negative atmosphere. Think of how the seasoned resident feels, now being cared for by entirely different faces when several people are pulled from an area during an investigation. Not to mention how the nurses are often put out for insignificant accusations that take months to investigate, all while that nurse's caseload is then dispersed among their already overloaded co-workers. In many instances the nurse was put out because of a lapse in best

practice due to an already unrealistic caseload and responsibilities, to then create more stress and anxiety for their fellow nurses when they have to absorb those patients.

The nursing staff shortages generally force nurses on duty to work longer shifts and get less sleep which can lead to life threatening mistakes. Studies site that many nurses have left the profession as a result of emotional exhaustion due to inadequate staffing ratios and excessive hours. Many of these same studies indicate that nurses could be persuaded to stay in the profession if regulations were implemented that address staffing ratios. In the case of NYS institutions, those employee seek stiffer penalties to the Mandatory Overtime Law.

The New York State Department of Civil Service has recently attempted to address the nursing shortage by awarding Geographic Salary Differentials to nurses working in the North Country as well as 13 counties in Western NY to make them more competitive with the private sector due to their inability to recruit and retain nurses. Even with these recent geographic salary differential awards along with the older downstate geo of \$12,871 (awarded in 2000) the state is far below the private sector in compensation.

The new, NYS public employee is faced with:

- a) 6 week lag payroll
- b) Tier 6 retirement package
- c) significant risks to their nursing license.

What new nurse would want to choose the State of New York as their employer?

Currently nurses working for New York State in a Nurse 1 (Grade 14) or Nurse 2 (Grade 16) have not had their Classification Standards amended since 1981. When the Class Standards were first drafted, the state was flush with nurses and institutions were then abundant. Fast forward to 2017. The emphasis is on pushing services out to the community and doing more with less, increased documentation and changes in medical technology and multiple threats against their license. Yet the grade level of the nurses and their job description has not changed. Nurses save lives on a daily bases, they keep patients alive, offer comfort to the families, and provide care to the neediest citizens, but they are still at the bottom of the Civil Service titles.

How have we allowed these situations to persist:

- a) inadequate compensation for nurses

- b) Noncompetitive salaries due to lack of a comprehensive review of the Nursing Class Standards and salary grade levels
- c) dramatically low staffing levels/ratios

As long as the nurses are overloaded and unable to provide quality patient care, they will continue to face increasing levels of frustration, stress, and on the job injuries.

Again I ask you what new nurse WILL choose the State of NY as their employer?

The key to encouraging more nurses to remain in state service, or return to working in the state system, is to improve working conditions and compensation.

Respectfully I ask that the New York State Legislature to:

- a) PASS Safe Staffing legislation (A.1532 Gunther/S.3330 Hannon), which will include state institutions and hospitals. Leaving this as an option, and not a mandate is truly not working out very well for the patients, or the nurses.
- b) INCLUDE a fiscal penalty to the “No mandatory Overtime Law” that also includes state agencies.

c) SUPPORT increased compensation for state nurses working in direct care titles, in order to recruit and retain more nurses into state service.

d) Revision of the Justice Center's approach of "ready, fire, aim"

In closing, again I thank you for your time and consideration... the life you save, could be your own.

