

TO: Joint Ways & Means Subcommittee on Human Services

RE: House Bill 5525 ON: March 14, 2019

Chairs Nosse and Beyer, members of the committee,

For the record my name is Courtney Graham, and I am here on behalf of our members who work in the Oregon State Hospital. SEIU 503 members in the Oregon State Hospital (OSH) include mental health technicians, psychologists, psychiatric social workers and other workers who make it their mission to serve the patient on their mental health journey. OSH is a 24-hour facility that serves patients who require a higher level of care related to their mental illness. A growing number of patients are in OSH as the result of interacting with our criminal justice system.

I want to start by thanking the Superintendent for highlighting Staff Safety and 24/7 Staffing as challenges at the State Hospital in the recent agency presentation. I can tell you that I have heard stories from workers at the State Hospital about their experience, particularly in recent years. Workers feel overworked, they feel unsafe at work, and they want to make sure the Hospital has the resources it needs to provide the highest level of care to patients. Our concern is that any additional reductions in staffing as a result of potential budget reductions could be counter to that goal.

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1.800.452.2146 www.seiu503.org As recently as this past week, the Oregon State Hospital declared a staffing emergency. This staffing emergency was called because certain units were deemed to be "critically low," and staff needed to work mandated overtime to maintain even a basic level of patient care. In practice, members have recounted an increase in the frequency of mandated overtime, and a decrease in staff available to work on units. This could mean that someone starts a shift at 7am and works until 3pm. They then are mandated to stay for overtime, or a second shift, from 3pm to 11pm. That worker could then be scheduled for another shift at 7am - just eight hours after they left work last. This is not sustainable and is unfortunately all too common.

Mandates and understaffing are not only bad for workers and patients, but they are costly. Data from the State Hospital from this year shows that staffing the hospital with overtime costs nearly \$3 million more than if the hospital were fully staffed. We believe it's worth asking - why is this the situation, and what can be done to improve staffing levels and working conditions at the State Hospital? What would it take to get to Level 3 staffing? We are happy to participate in that conversation.

Thank you for your time, and for your commitment to this issue.

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