



**Testimony on the Current Workforce Challenges of
the I/DD Service Delivery System**

Presented Before:

**New York State Senate Committee on Disabilities
Chair, Senator John Mannion**

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Thank you for allowing us to testify at today's hearing.

The Civil Service Employees Association (CSEA) represents thousands of direct care workers who provide care for those with developmental disabilities in state run facilities and not-for-profit agencies.

For years CSEA has lobbied the legislature for more help in this industry. Budgets have been cut to the bone, which has resulted in fewer workers, more mandatory overtime and no work-life / home-life balance for our members. Needed services are lagging and now New York is at a real crisis point. It's not just a crisis in the developmentally disabled community, but for any area that uses direct care workers, including home care, nursing homes, and care for the mentally-ill. There are too few employees willing to enter these fields while the number of people in need of services continues to grow.

OPWDD currently provides 35,000 certified residential opportunities to New Yorkers, a decrease of 3,000 beds from 2016.¹ Thousands of New Yorkers are waiting for community-based and residential services but are unable to access them due to staffing shortages and lack of options. We need new investments to meet the needs of the developmentally disabled population. But let's be clear: to offer new services, and continue to offer what is currently available, we must ensure that we have proper staffing levels. Quite frankly, the state does not have the capacity it needs to care for this population.

Since 2010, full-time equivalent employees in OPWDD have decreased by 15%.² At this time, over 1,000 direct care positions remain unfilled within the agency. This is causing severe staffing shortages which continues to result in massive levels of overtime and the inability of the state to offer proper levels of programs and care to clients. According to the New York State Comptroller's "*New York State Agency Use of Overtime – 2020*" report, the average OPWDD employee worked six full weeks of overtime in 2020, on top of their normal hours. OPWDD accounted for 18% of all overtime payments made by the state, despite having only 8% of all state employees. In 2016, CSEA negotiated double-time for our members who are mandated to work over 16 hours in one day. This should have been a wakeup call to the state, yet, once again, in spite of our pleas to the Governor and the Legislature, nothing was done to provide the resources to alleviate the problem.

This massive level of overtime leads to burn-out for employees which inevitably results in them quitting. Due to the inability of OPWDD to recruit and retain new employees, a vicious cycle ensues which requires more overtime for employees, which results in additional employees resigning, and even more overtime for remaining workers. Employees are unable to take

¹ <https://www.nysenate.gov/legislation/bills/2021/S6305>

² New York State Workforce Management Report, 2020

vacations, have days off, or get out of work at scheduled times. This is no way to manage a workforce over the long term.

Recruiting individuals to work in direct care has been and continues to be difficult. The ongoing COVID pandemic made this staffing crisis worse. These jobs are undervalued, underpaid, physically and mentally draining, and unpredictable in their hours and schedule due to understaffing. For the past several years CSEA has worked together with OPWDD to recruit workers. But the fact remains that even despite these efforts we are failing to increase this workforce. Even when we are successful in recruiting an individual, a large number of them leave their job during their first 24 months. There are several causes, but the most spoken about reason is mandated overtime, which leaves workers with little time to spend with their families. In addition, mandated overtime presents significant child care issues that are not compatible with their unpredictable schedules. No one should have to go to work and not know if they can pick up their children from school or attend a school or family function because their hours and work schedule is so unknown.

The staffing deficit we are currently facing not only affects workers, but clients as well. For the past several years, OPWDD has operated community-based programs that offer respite and job training programs to clients. However, due to staffing shortages, these programs have never reopened since they were closed in March 2020 due to the COVID-19 pandemic. The inability for OPWDD to operate these programs due to this structural staffing deficit is directly harming clients and families who need these services. In addition, we know that thousands of New Yorkers are waiting for residential service opportunities. This includes individuals who currently live at home but have aging parents who are finding it more difficult to care for their child. However, the state is in no position to expand opportunities if they do not have sufficient staff to care for the existing clients.

The time is now for OPWDD to address the critical staffing issues that it is facing in both the State-operated and voluntary space. There are many factors at play that inhibit recruitment and retention of these direct care workers that need your immediate attention. The current compensation and benefits scale reflects the under valuing of these jobs. Pay scales cannot even compete with current minimum wage rates throughout the state. It is more likely that people will seek a job where work hours are definitive, pay is higher and the job itself is less strenuous. In addition, there is no career ladder in place for direct care workers making it hard to envision someone dedicating their working lives to this.

CSEA offers the following recommendations to make these jobs more competitive for workers to develop a staffing model that is sustainable over the long term.

Increase Worker Pay

Nothing drives recruitment and retention more than increasing an employees' salary. Direct care jobs pay at or near minimum wage and are extremely hard to survive on in most locations, let

alone areas of our state with very high costs of living. The salaries are not competitive enough to recruit new employees or retain existing ones, especially when workers can work in the fast-food industry for a higher wage with less stress.

To find new applicants for these jobs, the state must not only match the salaries of private sector employers but must significantly go beyond what they are paying. Direct care providers must find a way to create a workplace that stresses the value of the service they are providing while also paying an enticing wage for workers.

Pension Reforms

In the past, the guarantee of a defined benefit pension was a leading reason for people to work for OPWDD. However, over the years, with the addition of several new pension tiers, the value of a pension has been eroded and no longer serves as the recruitment tool that it once was. Under Tier 6, employees must work longer than employees in other pension tiers and, at the end of their career, they will receive a smaller pension. In addition, many are required to contribute a greater share of their pay to fund it.

The pension system should be reformed so that it once again serves as a recruitment and retention tool for individuals to enter state service. Possible ideas include creating a financial incentive for workers to stay with OPWDD longer, similar to other pension tiers, and lowering employee pension contributions in order to make the pension more appealing to new and long-term workers.

Making these changes would go a long way in creating a more appealing compensation package for OPWDD employees and would help to retain existing workers for a longer period of their working years.

Career Ladders

The direct care field generally fails to offer a career ladder for employees. Advancing in these positions is difficult. Generally, a person begins work as a direct support professional and can stay in the same job and title for their entire career, despite developing a valuable skill set. OPWDD and voluntary providers must develop a better-defined career ladder for direct care workers to appeal to individuals who view the field as too limiting.

Such a career ladder would allow someone to visualize their life in five or 10 years working in direct care, rather than just seeing the job as a temporary stop. A career path could serve as a gateway for direct care workers to achieve their long-term goals. As we visualize this, the state and voluntary providers could encourage and subsidize the cost for a direct care worker to gain additional training, or go to school to become a CNA, LPN, or even RN. In addition, experienced workers could be trained to be mentors to younger staff and help them learn while on the job and solve problems before they lead to a person leaving the field. Offering programs like this will

encourage individuals to continue working in the field while also giving them more training and responsibility.

It is past time that we ask: what and who are our priorities in this state? We have residents who need residential services but are told that they must wait. We have workers who want to dedicate their lives to those with a developmental disability but cannot survive with the wages that are being paid and must find work in a different field. We have direct care workers working 24 hours in a row because they have no staff to relieve them. We need to realign our priorities. Next year, you can seize this opportunity to make the needed investments in the direct care workforce. These investments will pay dividends. We will see better continuity of care, less burnout of staff, and the ability for staff to form long-lasting relationships with their clients.

Now is the time to make these investments. Both the state and voluntary providers are losing existing employees and potential future employees are being turned off from the industry by the low pay, lack of benefits, and lack of a work-life balance. Your failure to immediately begin transforming this industry with increased pay, benefits, and career ladder will create a generational gap that we may not be able to recover from. Those who will be harmed most are not those working in the industry, but those who require its services and are unable to advocate for themselves.

Thank you for allowing us to testify at today's hearing and we look forward to working with all of you on this issue over the coming months.