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Good afternoon, my name is Kevin Hefty I'm a Vice President at SEIU Healthcare Pennsylvania overseeing our work with the roughly 1,200 registered nurses who work for the Commonwealth in state prisons, state hospitals, the Department of Health and other settings. These nurses are the backbone of the Commonwealth's public health infrastructure.

SEIU Healthcare PA is the state's largest and fastest growing union of nurses and healthcare workers, uniting nearly 45,000 nurses, professional and technical employees, direct care workers, and service employees in hospitals, skilled nursing facilities, home and community-based services, and State facilities across the Commonwealth.

I appreciate the opportunity to testify regarding Governor Wolf's proposal to potentially close one or more State Correctional Institutions because of budget concerns.

First and foremost, we should all be clear on why we are here today. For the past two years Governor Wolf has introduced responsible budget proposals that include increased revenue to deal with structural deficits and fund the services that Pennsylvanians need and want.

Republican legislators have responded by refusing to consider these proposals to either make corporations and the wealthy pay their fair share or enact an excise tax like every other state with gas fracking. And the result is a gaping budget deficit that we all knew would result.

The Commonwealth's corrections nurses oppose these potential closings and instead encourage the legislature to enact common sense, sustainable revenue increases.

Unfortunately, based upon what we are seeing from the Republican leadership, this will likely not happen again in this budget cycle.

So here we are - forced to make hard decisions that will potentially mean job losses and other hardships for Commonwealth employees and major disruptions for inmates and their family members.

As we move through this process, the Commonwealth nurses encourage DOC decisions to be guided by a number of criteria:

- What is best for the public's health?
- What is least disruptive to Commonwealth employees?
- What is most fiscally sound in the long term rather than looking for shortterm savings?
- And finally, what is the best use of existing facility capacity?

An example of how we should be using these criteria applies to potentially closing either SCI Pittsburgh or Waymart. These two facilities have the highest per inmate cost and, on paper, look like they will save the Commonwealth the most money if closed.

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These facilities also have the highest number of mental health and medical beds and which likely drives the high cost per inmate. It is also well known that SCI Pittsburgh's proximity to health facilities allows the Commonwealth to treat some very sick inmates at a lower cost. It has an oncology unit and those inmates if transferred would likely need to travel to Pittsburgh hospitals for treatment.

Closing either or both of these institutions means transferring these expensive inmates to other facilities that may not have the capacity or experience with such a challenging population. Any short-term savings will likely be offset by longer-term per inmate costs in the receiving institutions. In fact in 2005 SCI Pittsburgh was closed before only to be re-opened in 2007.

I want to be clear – I'm not recommending closing Frackville, Mercer, or Retreat instead of Waymart or Pittsburgh. I'm only saying that what may look like a good deal in the short term may not be the best choice based on the criteria mentioned earlier.

Finally, I would encourage the Commonwealth to also consider its plans for Norristown State Hospital at the same time as it considers looking to Corrections for savings.

As the state transitions the Norristown State civil population into the community, should we consider expanding the forensic population there to relieve pressure at SCIs across the state that will see their population increase if there is a closure?

Pennsylvania already invests heavily in treatment services provided by the Department of Human Services, including forensic units that specialize in treating psych patients who have been convicted of crimes or have charges pending. These units are better prepared to treat inmates with serious mental illness than correctional facilities, and should be expanded to alleviate the overcrowding in our prison system. Pennsylvania made changes to its treatment of the mentally ill in the correctional system following a US Department of Justice investigation but moving individuals to facilities specially focused on the care of the mentally ill may better serve the interests of the impacted individuals as well as the public.

The Commonwealth's inmate population is essentially at operational capacity and moving beyond operational to emergency capacity creates potential costs and hardships for employees and inmates. If we have facility and employee capacity that can be used in a cost-effective way, we should consider it and not be solely driven by the desire to save money in the current budget cycle.

Again, I thank you for this opportunity to testify. I appreciate that the Wolf Administration and DOC have been put into a very difficult position because of the failure of Republican leadership. I'm at least encouraged that responsible public officials are trying to solve this challenge and the Commonwealth nurses look forward to continued participation in this process.

Thank you.