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Testimony

on

Services in the Office of Mental Health and Office for People with Developmental Disabilities During the COVID-19 Pandemic September 8, 2020

Assembly Committee on Mental Health

Chairwoman Gunther and members of the Assembly Standing Committee on Mental Health, thank you for allowing us to testify today regarding the impact that COVID-19 has had on access to mental health and developmental disability services and programs.

The COVID-19 pandemic has dramatically changed life in our state, country, and the world. Daily routines have been altered in ways that were unimaginable at the beginning of 2020. What hasn't changed is the dedication of CSEA member to serve the public.

While many New Yorkers' began working from home in mid-March, direct care workers never had this option. These employees continued to show up to hospitals and group homes to provide care to those with severe illness and care needs. They braved what suddenly became dangerous commutes, attempting to avoid an invisible killer, because of their dedication to their patients and clients. Sadly, since the beginning of this pandemic, 14 CSEA-represented OMH and OPWDD employees have died from COVID-19 while many of their co-workers have contracted the virus. We owe every direct care worker an immense level of gratitude for their commitment to their patients and clients during this pandemic.

The COVID-19 pandemic has caused unprecedented economic turmoil across the country, including New York. State and local government tax revenue has decreased precipitously since March. The state is facing a \$30 billion deficit over the next two years and, absent additional federal aid, will be forced to make severe and harmful spending cuts to balance the budget. To alleviate these cuts, CSEA has strongly advocated the New York Congressional Delegation to pass additional aid for state and local governments to stop the worst of these cuts. However, as of today, the outlook for new funding looks bleak. The failure of the federal government to enact additional funding will, amongst many negative actions, result in tens of thousands of New Yorkers with a mental illness or developmental illness receiving fewer hours of care and being denied access to programs.

The effects of the dire economic constraints caused by the pandemic are already being felt in OPWDD and OMH. In April, the Division of Budget ordered a hiring freeze for all state agencies. Hiring has ceased within these two agencies, despite years of being understaffed and extreme levels of overtime. A long-

term hiring freeze in these two agencies will only further increase mandatory overtime levels and increase burnout and resignations among staff.

The state's current budgetary condition will result in massive cuts to programs and services in OMH and OPWDD. We worry that critical programs such as the Care Demonstration Program, which allows state-supported clients with a developmental disability to find work in the community, will be eliminated. We also have significant concerns of additional closures and downsizing of OMH hospitals. Any closure or bed reductions will create additional strain on the state's inpatient mental health system. Since 2014, OMH has reduced available adult and children inpatient beds by 21% - a reduction of 575 adult beds and 131 youth beds (see the attached chart for more information). According to the most recent OMH monthly report, the average occupancy rate of an adult facility was 96% and youth facilities were nearly 90%. These numbers show that there are not any additional beds to cut if you want to ensure that patients have access to inpatient services.

We also have concerns about the downsizing of state-operated residential programs within OPWDD, especially *Individualized Residential Alternatives* (IRA). IRAs are small community-based facilities that allow clients to receive high-quality residential care while also receiving community-based supports such as day habilitation, prevocational services, and supported employment programs. Over the past several years OPWDD has closed and suspended services at IRAs throughout the state. Under state law, OPWDD must give 90 days' notice when closing an IRA, however, this does not apply when they are suspending services. On its face, a suspension of services means that a program or service will be brought back. However, OPWDD has recently begun using that when there is no intention to reopen the IRA. Facing such a dire economic outlook, we are bracing for additional suspension of state-operated IRAs. The closure or suspension of additional IRA facilities will decrease the level of supportive residential housing available, causing significant harm to those with a developmental disability who wish to live in a community-based setting.

In 2019, the legislature recognized the importance of these facilities and the role that they play for those with a developmental disability when they passed A. 7199 (Gunther) / S. 5315 (Carlucci). This legislation, which was vetoed, would have required OPWDD to give notice prior to suspending service at an IRA. Considering the possibility of cuts to IRAs throughout the state, we believe it prudent for the legislature to reexamine this legislation to ensure that clients and staff have adequate time before a program is suspended.

We are not blind to the state's fiscal condition. However, we have real concerns regarding any actions that the state may take that will limit available services for those with a developmental disability or mental illness. Budget cuts in these areas, especially within inpatient services or residential programs, will only cause additional costs for the state in the future. We welcome the opportunity to work with you in the future to protect the state's OPWDD and OMH systems and ensure access is available for all New Yorkers.