

Testimony Before the Legislative Committee on State Hospitals

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Topeka, KS 66612-1817

December 19<sup>th</sup> and 20<sup>th</sup>, 2016

Members of the Committee:

Thank you for the opportunity to address all of you today. My name is Lynette Lewis and I am one of the KOSE Union stewards at Larned State Hospital (LSH). I am not here as a representative of my Agency. I am here today as a private citizen and a representative of the Kansas Organization of State Employees (KOSE).

Reflecting back on the time that has passed since I testified before the KanCare Oversight Committee in April, I have seen some positive improvements occur. Our nursing staff received a much deserved raise. Staff was given the opportunity to use their vacation overage so it wasn't lost. Overtime has gone down due to utilizing our non-nursing staff and bringing in Agency to assist. Bill Rein became our Superintendent and Secretary Keck meets with KOSE on a regular basis to address issues that arise.

As always, despite the positive improvements there remain areas of concern. In my eighteen years of service, I've never seen a vacant job list as long as it is now. These positions are now unclassified which has opened the door for corruption. Positions are not being advertised and are filled based on favoritism rather than qualifications and merit. Then, position descriptions are changed to justify why the less qualified person was chosen, or so that the favored candidate meets the requirement of the job. There's no check and balance system. Policies are ignored or twisted to fit the task at hand. This corruption weakens the whole system. Why is this corruption allowed to continue and whose responsibility is it to hold these people accountable for their actions?

The next issue I would like to highlight is issues with our human resources (HR) department. The HR department is the heart of a facility. In order for this department to operate efficiently and correctly you need to have employees qualified for the job. New positions were created in our HR department and qualifications went by the way side. The direct result is seen on a daily basis. Emails are not answered, phone calls are not returned, staff are threatened, applications are lost/misplaced or are not followed up on at all, time is removed from timesheets without the employees knowledge, performance evaluations are returned to supervisors and they are told to lower the rating, employees are lied to and given incorrect information, and HR staff are on Facebook instead of working. Each week HR places a list of open positions in our internal newsletter. In many instances, staff have called HR to ask about an open position that was listed in the newsletter and are told, "the time frame for accepting applications for that job has passed" because the openings listed run a week behind. In summary, the department that is to be the heart of our facility creates hostility, mistrust and directly undermines the culture of respect and dignity that Secretary Keck and Superintendent Rein have worked tirelessly to create.

Next, I want to talk about how investigations and discipline have been handled and how this undermines lasting culture change at LSH. Investigations are not being handled in a fact based or professional manner. When an employee is accused of a wrong doing it gets reported to risk

management. An investigation should be completed to collect all of the facts from all of the witnesses. Many times the employee or the witnesses are not questioned or given an opportunity to tell their side of the story. The employee is disciplined without all of the facts. This also creates situations where manipulative patients can get staff punished for doing their jobs by filing false complaints. In fact, often time's staff files false complaints against peers they are angry with. Yet neither staff or patients repercussions for filing a false complaint, nor is the complaint usually investigated prior to the employee being summarily disciplines.

In regards to discipline, things have continued to be punitive and unreasonable in that regard. To illustrate, employees have been counseled and disciplined for time abuse when they missed work due to illness or because they were in the hospital. I received a call from a Licensed Mental Health Technician who has 22 years of service. She called in sick for two days immediately following her two rest days. She was off a total of four days and had a note from her doctor stating she needed to stay home. This was the first time this year she used any of her five hundred eighty-one (581) hours of sick time. She received a feedback from her Supervisor for time abuse because the two sick days followed her two rest days. She was literally counseled for being sick, despite this being completely out of her control. In April, I told the KanCare Oversight Committee about a nurse who was passing medications while puking into a trash can between patients because she was afraid she would be disciplined if she called in sick. I had hoped that things would change after I brought this to light, but it still continues and under recent leadership changes in the Nursing Department has gotten worse. This creates distrust, lowers moral and in many instances is just plain bullying.

Bullying is a huge problem at LSH. Employees are bullied by other employees, but bullying is the worst at the supervisor-employee level. Over seventy-five (75) percent of the complaints brought to me by the employees I represent involve managers abusing their status to bully employees. Employees are given impossible time constraints, workloads that cannot be completed, require a minute by minute breakdown of their day and the list goes on and on. Holding a management position does not automatically make you honest or trustworthy and most important it does not make you right. As an employee, I would call on KDADS and LSH to create a comprehensive anti-bullying policy in partnership with KOSE.

Finally, I want to highlight how hiring/advancement decisions are not made on merit or qualifications, but based on favoritism. Recently, three Assistant Director of Nursing (ADON) positions were created at LSH. We will now have an ADON on each of our three programs. I agree these positions have been needed for a very long time and feel it will help with patient care. What I don't agree with is how these positions were filled. The interim DON, who holds a Bachelors of Science in Nursing, was given first choice of which program they wanted. The current ADON, who holds the same degree as the interim DON, was given the second choice of which program he would want. However, the person who is most qualified for any of the three positions, as evidence by holding a Master's Degree in Nursing and being a licensed Advance Practice Registered Nurse, was told he would have to apply for the position if he wanted it. This is a perfect example of favoritism deciding who gets to advance, rather than qualification and merit.

Finally, as a steward, I have the privilege of attending Labor Management meetings. The only things that were accomplished in our past meetings were stall tactics, lack of attendance and misinformation. Then Bill Rein became Superintendent, Shannon Martinez was KDADS HR contact, and our meetings became quite productive and progress was made. I thought, "finally, a step in the right direction with a positive outlook." Changes in HR staff occurred. Shannon was no longer our contact

person. Once again, our Labor Management meetings have become unproductive with almost no progress being made at improving working conditions at LSH. In my opinion, the responsibility for this change falls on the shoulders of our HR department.

I am encouraged by the the steps Secretary Keck and his staff have taken to improve conditions at Larned State Hospital, but these are only the first steps. We need to remain on track and work to address the issues that remain. Thank you again for allowing me to speak to you. I am happy to answer any questions you have.