



# MAINE AFL-CIO

*A Union of Unions Standing for Maine Workers*

21 Gabriel Drive, Augusta, Maine 04330

Tel. (207) 622-9675

[www.maineaflcio.org](http://www.maineaflcio.org)



President

**Cynthia Phinney**

[Cynthia@maineaflcio.org](mailto:Cynthia@maineaflcio.org)

Vice President

**Grant Provost**

[GProvost@iwlocal7.org](mailto:GProvost@iwlocal7.org)

Secretary-Treasurer

**John J. Perry IV**

[jperry@usw.org](mailto:jperry@usw.org)

## **Testimony of Maine AFL-CIO Legislative & Political Director, Adam Goode, in support of LD 2067, “An Act to Include Certain Community Mental Health Workers Under the 1998 Special Plan for Retirement”**

Senator Tipping, Representative Roeder and members of the Joint Standing Committee on Labor, my name is Adam Goode. I’m the Legislative and Political Director of the Maine AFL-CIO. We represent 40,000 working people in the state of Maine. We work to improve the lives and working conditions of our members and all working people. We testify in support of LD 2067.

This legislation builds on the progress we made through the supplemental budget passed at the end of the first legislative session. As proposed in LD 579, that supplemental budget expanded the 1998 Special Plan to cover direct care workers employed at the Dorethea Dix and Riverview State Psychiatric Hospitals. As we learned through compelling testimony and through an independent investigation by OPEGA, these workers are frequently the victims of violent assaults from patients in their care, making the job far too difficult and dangerous to safely perform beyond the age of 55.

While the bill as originally filed covered all direct care mental health workers, the estimated, one-time retroactive cost of approximately \$12.1 million was too expensive to achieve in one budget. As such, the sponsors and legislative leadership agreed that the best approach was to make incremental progress by adding the workers at Dorethea Dix and Riverview, with the understanding we would seek to add additional workers as soon as possible.

This new bill, seeks to cover a group of approximately 40 workers holding the title of “community response workers” (CRWs). Like their counterparts in the state hospitals, crisis workers are also assaulted on a regular basis. However, unlike their state hospital counterparts, they work alone on 24/7 shifts responding to individual community homes, when individuals are in severe emotional distress and exhibiting violent behavior.

Crisis workers do stressful, difficult and dangerous jobs that can wreak havoc on both body and mind. These workers provide a great public benefit to everyone while facing danger, risking injury and being exposed to communicable diseases daily. The state acknowledges that there are certain jobs, like being a corrections officer, that you cannot do forever. Despite having little in the way of protection from violence on the job, crisis workers do not have access to the 25/55 retirement plans.

Few people realize just how many assaults crisis workers endure on a regular basis due to patient violence. Crisis workers have unique jobs and regularly go into private homes alone to provide

treatment for mentally ill individuals in crises. It is typical for a crisis worker to be reluctant to involve law enforcement as a backup for fear of escalating the crisis, resulting in the worker facing severe physical assaults, including broken bones and concussions. Asking that people do this work at age 61 or 62 after decades of grueling labor is unfair and just too much of a demand.

In addition to providing these workers with the appropriate retirement benefit for their job, we believe this legislation will also help with recruiting and retaining workers for these critical positions, which in turn, will improve care and reduce the state's growing reliance on the use of contract workers

We are aware that there are other efforts before this committee to make changes to the 1998 Special Plan that benefit working people. As you work on fixing the problems with the system that result in workers being left out of the opportunity to retire with dignity and respect, we ask that you make sure these crisis workers providing direct care are included.

