



# MAINE AFL-CIO

**A Union of Unions Standing for Maine Workers**  
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## **Testimony of Maine AFL-CIO Legislative & Political Director, Adam Goode, in support of LD 579, "An Act to Include Certain Crisis Outreach and Crisis Services Workers Under the 1998 Special Plan for Retirement"**

Senator Tipping, Representative Roeder and members of the Labor Committee, 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 579.

LD 579 adds employees who provide direct care to persons in need of mental health services in a community-based or residential setting or to residents or patients of mental health institutions in this State or have responsibility for providing crisis outreach and crisis services to adults with developmental disabilities or intellectual disabilities in a community-based or residential setting to the 1998 Special Plan.

Workers at Maine's two state psychiatric hospitals and workers who do mental health and crises work provide a great public benefit to everyone while facing danger, risking injury and being exposed to communicable diseases daily. These workers do stressful, difficult, and dangerous work. The state acknowledges that there are certain jobs, like being a corrections officer, that you cannot do forever. Despite dealing with the same population of patients as corrections officers, and having fewer protections from violence on the job, mental health workers do not have access to the 25/55 retirement plans.

This issue has not been resolved despite workers recounting horrific stories at hearings during past legislatures. When we last weighed in on this issue, the workers had gone through a weekend with 53 vacancies. At times, they have had just one mental health worker for eleven or twelve patients when they are supposed to have a one to six staffing ratio, according to the 1990 AMHI consent decree.

These workers need to retire at the earlier age because of the physical and emotional stress associated with the job. Few people realize just how many assaults mental health 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.

Patients who come to the state psychiatric hospitals have committed murders, rapes and other heinous crimes. Courts have deemed them at imminent risk of harm to themselves or others, incompetent to stand trial and not

criminally responsible by reason of mental illness. These mental health workers don't judge their patients for their crimes and they have been trained to effectively de-escalate patients when they have a psychotic break without the use of restraints, pepper spray or tasers.

These jobs are made even more dangerous due to short staffing. Access to the same special retirement plan that law enforcement, firefighters and corrections officers receive in recognition of the risks they take every day to protect our communities would improve staffing and workplace safety. We know that people in these jobs have left to work in corrections because they can receive this benefit. This bill would both improve staffing and allow workers to retire from doing dangerous and physically demanding work at a reasonable age.

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 mental health and crisis workers providing direct care be included.