Testimony of David W. Pickus  
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Before the Public Health Committee, March 7, 2017

Supporting: SB 39, **AN ACT CONCERNING A PUBLIC-PRIVATE PARTNERSHIP TO PROVIDE QUALITY SUPPORTS AND SERVICES FOR PERSONS WITH INTELLECTUAL AND DEVELOPMENTAL DISABILITIES**

Representative Steinberg, Senator Gerratana, Senator Somers and members of the Committee. My name is David Pickus and I serve as President of SEIU 1199. We represent 26,000 health care workers in Connecticut. 10,000 of our members provide care through the Department of Developmental Services as public employees, private agency workers and home care workers.

Everyone in this room wants quality supports and services for individuals with intellectual and developmental disabilities. The concepts proposed in Senate Bill 39 will provide those services and help meet the needs of families, on and beyond the current waiting list.

Because we represent workers across the public and the private sectors, our union has a unique perspective on how best to marshal the strengths and existing resources across all sectors to create a responsive system of services.

You will hear from others today about resources that already exist in the public sector, how they are already integrated with private sector agencies and how integration could be expanded. These are resources that DDS has already invested in – like the aquatic therapy pool at the Grasso Regional Center, the three DDS dental clinics, and the respite center in Meriden equipped for people with specialized medical needs.
We have already put millions into equipping these centers and training the DDS workers who staff them. They offer a strong example of the concepts put forward in this bill: public services used by private sector clients to meet needs that most private provider agencies have neither the size nor the resources to provide on their own.

I’ve attached to my testimony a copy of Meeting the Need, our vision for the public-private continuum of services, which explores these ideas in greater detail. From interactions with our members, families and guardians, self-advocates and policy-makers, we’ve identified some key areas of unmet need, including:

- More frequent access to respite, for longer periods of time
- Medical services, including dental care and physical, occupational and speech therapy
- Appropriate long-term care services for the 300+ DDS clients currently residing in nursing homes

The most practical approach to meeting these needs is to use resources we already have to sustain quality supports and services for our families, friends and neighbors. But the concepts raised in SB 39 will not be possible unless we recognize this hard truth: a robust and sustainable continuum of services across the public and private sector can’t exist if we cannibalize one sector in the vain hope of feeding the other.

Decades of starving the private sector of necessary funding resulted in high turnover, broken continuity of care and a low-wage workforce reliant on public supports hidden in other sections of the budget. If we
are serious about providing quality care to people with disabilities, we must be serious about providing the funding necessary to pay a living wage. A wage enhancement program for private-sector direct care workers is a proven, effective strategy for ensuring quality services while stabilizing the workforce and reducing workers’ dependence on public assistance.

We believe SB 39 can be the impetus for an integrated system of care that builds on the strengths of both the public and private sectors to address today’s waiting list and tomorrow’s unmet needs, instead of short-term, short-sighted budget “fixes” that contract instead of expanding services for families.

Thank you for this opportunity.