

Senate Local Government & Housing

02/28/2023 02:00 PM

SB23-111 Public Employees' Workplace Protection

Typed Text of Testimony Submitted

Name, Position, Representing	Typed Text of Testimony
Susan Eissenberg For themselves	I support giving public employees the right to organize.
Austin Amos For themselves	The right to organize into a collective body is a right fundamental to our democracy. Yet people who serve in the government have their right to organize stripped away. This institutional irony denies those who uphold our system of government from vindicating their rights as people and as workers. We as Coloradans need the PEWPA in order to better support those who serve in our government by allowing them the self-determination that our own system of government is built upon.
Anna Eissenberg For themselves	<p>I'm in favor of the bill because I believe that all government employees should have the ability to collectively bargain. This right is afforded to private employees as well as police and other emergency services, and all government employees should have that right.</p> <p>Collective bargaining has reduced sexism and improved working conditions, which Colorado should continue to work towards by giving collective bargaining power to all government employees with this bill.</p>
Macon Fessenden For themselves	<p>Hello members of the committee, my name is Macon. I am an ER nurse at University of Colorado Hospital, and am therefore categorized as a public worker. I have proudly served my community as a bedside nurse for almost 8 years, including hundreds of shifts in the ER and critical care units during the height of the COVID pandemic. As a public worker in Colorado, I am denied some basic rights laid out in the National Labor Relations Act, rights which are afforded to healthcare workers down the street at other hospitals that are not under a "public" banner. It does not seem just to give these rights to some healthcare workers and not others because of arbitrary distinctions.</p> <p>The public hospitals in Colorado took care of more COVID patients than any other hospital system in the state. It is unfair, unjust and unwise to</p>

	<p>continue to treat us differently than our colleagues at HCA, Kaiser, Intermountain Health and other non-public healthcare entities. We need these rights to continue to stand up for the safe working conditions that allow us to continue to deliver the world-class, community-based care that Denver Health and UCHealth are known for. I urge you to vote yes for this bill.</p>
<p>Neil Rudis For themselves</p>	<p>My name is Neil Rudis and I am a veteran nurse here in CO. I am writing in support of the passage of the public employees’ workplace protection legislation. As an experienced RN, I and my colleagues see the direction of healthcare and many other public institutions. As someone who entered nursing to care for patients, a motivation for the majority of my colleagues as well, we are becoming increasingly concerned with the state of public institutions, especially hospitals. Healthcare, care, is the focus of my work. Unfortunately, care is not the priority of the institutions where care is supposed to be provided. Instead, profitability is the number one priority, even in public, non-profit institutions. The reason we have a classification of “public employee” is because we are inherently intended to provide for the public good. Increasingly, our hands are tied and we can see firsthand how the priorities of administrations are not true to the mission of a public institution. Consistently we see profitability being prioritized over the public good. Patients, and your constituents suffer unnecessarily as a result.</p> <p>My colleagues and I are committed to our guiding mission of caring for people and providing the public good. As this becomes de-prioritized in hospitals and other public institutions, we need to be able to protect our patients and the communities in which we live. The passage of this legislation will allow us to fulfill our duty to prioritize the public and people over profits. In the same way that public employees have a duty to fight for the interests of the community and for what’s best for people, you as legislators have the same duty. This is where you and your colleagues need to take a stand, similar to that of myself and fellow nurses, will you stand for people or profits? Will you vote for people’s interests? Or, corporate interests? We expect you to do what is right, take a stand with the people of Colorado, and pass this legislation, Coloradans are listening for your answer.</p> <p style="text-align: center;">Thank you,</p> <p>Neil Rudis RN BSN CCRN</p>

<p>Leslie Albeth For themselves</p>	<p>Dear Colorado Legislators:</p> <p>I am a physician in Colorado who works for a public entity, writing in support of SB23-111. I am writing under a pseudonym for fear of retaliation should my identity become known.</p> <p>As an experienced physician, I would have thought that I would have more of a voice in how my workplace is run. My colleagues and I regularly express, with each other in private, our frustration with our lack of voice. Policies passed down by the C-Suite that support the bottom line consistently win over the best medical practice. In addition, staffing of our practice has been at times too meager to be safe for patients or sustainable for providers. When we try to speak up about these problems, it is not looked upon well by the managing team, and there is little action to remedy them.</p> <p>During the past 3 years, taking care of patients during the COVID pandemic and staying up to date on how best to take care of patients and stay safe, I became aware that some of my coworkers and patients used practices that were unsafe for them, me, and my fellow health care workers. When I was outspoken with patients and staff about this, I was discouraged from talking about it at all, and eventually felt that my attempts at education of others resulted in threats to my employment.</p> <p>A measure such as SB23-111 would provide support for better communication about these issues, helping to solve some of these basic problems, so that we can do well the job we have studied and trained so long and hard to do.</p> <p>My fellow doctors and I are reticent to testify in person or speak out effectively about a lot of the issues that are so frustrating in our practice. Medical culture has seemed to become more driven by administrators who appear to be content to hire less-experienced or less-caring people to fill our places should we question their drive to prioritize profitability over care.</p> <p>We need your help in order to stand up for the doctor-patient relationship in Colorado. Please support SB23-111.</p>
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	<p>Sincerely, Leslie Albeth, MD</p>
<p>Lynn Carter For themselves</p>	<p>As a former employee of a public sector Colorado medical facility who experienced retaliation as a result of advocating for better patient care, I am asking you to pass SB23-111, Public Employees' Workplace Protection Act.</p> <p>As a dedicated healthcare provider who served on the frontlines during the COVID pandemic, I routinely spoke out about staffing issues and unsafe patient care conditions. Not only did my employer ignore my concerns about prolonged wait times and staffing levels that resulted in patients spending hours without being seen, but I was actually targeted and disciplined as a result. When I asked necessary questions to improve patient care, I was chastised and accused of being unprofessional. I eventually felt that I had no choice but to resign, which caused me to forfeit pay and benefits and a career that I loved.</p> <p>This is why we need you to pass SB23-111, Public Employees' Workplace Protection Act.</p> <p>I am not appearing before you in public today due to a fear of ongoing retaliation. Regardless, I feel so strongly about this issue that I was compelled to write this testimony to ask for your help: we need your help and are asking you to sponsor SB23-111 and help it pass the Colorado legislature so that no other healthcare provider is put in the same situation.</p> <p>I am using a pseudonym due to fear of further retaliation.</p>

My name is Siobhan Keleher, and I was an on call clerk at Denver Public Library for over ten years before my termination without warning, investigation, discipline or counseling in August 2022. An on call clerk is a substitute; I covered open work shifts at DPL Central and the 26 library branches. My direct supervisor was Head of On Call. His supervisor was the Circulating Services Manager, supervisor above all clerks. Every DPL location has a lead clerk and a senior librarian. With 27 DPL locations, I literally had 56 supervisors. You can't get 56 people to agree on what movie to see, much less policy is followed or how an employee should do their job.

DPL also has a thing called "Informed Judgment"; it means every employee has flexibility in how library policy is followed and enforced. This means that every location is doing things a little differently from every other location. During and after the pandemic, when many rules were suspended or altered, the variation in how branches performed their job duties became much broader. These new differences were rarely communicated to me in advance. When I had difficulty at a branch a few years ago, the head of on call told me that anyone working at DPL could give me orders or correct me, even if they weren't supervisors. So I essentially had a couple hundred bosses. The head of on call and the circulating services manager had made it clear over the years they didn't want to hear any concerns. There was no feedback on my work, no performance reviews. What I heard from my coworkers at the various locations I worked at was mostly positive, but there was no official record.

Working with the public in '21 and '22 was challenging. Far more library patrons were difficult, even combative. Many of my coworkers were stressed. A few of them would take out their frustrations on on call staff. I had the misfortune of coming into conflict with two coworkers in two different library branches within a month. When the head of on call said he needed to talk to me, I expected discipline and a warning. I hoped for a chance to give my side, and voice concerns. What he told me was the Neighborhood Services Manager of the two locations had ordered me fired, even though she was not in the chain of command above the on call department. When I suggested that I just not work at libraries she supervised, that was rejected. She said I was a toxic presence at DPL. I was also told I adhered to DPL policy too closely. How can you be fired for following policy?

The on call jobs at DPL are impossible. No one can please 200+ people all the time, satisfy 56 supervisors, and be able to be fired by any supervisor, any time, for any reason, without process, even if they're not in the chain of command. It is a completely unsafe position. This is why public employees need protection. Please pass SB23-111. Thank you.



SB23-110steveparry to: committees.lcs.ga@coleg.gov 02/14/2023 11:26 AM

Committee: I am a resident of Lone Tree, Colorado, married with children and grandchildren and sit on several volunteer committees including elected positions on Metropolitan Districts. I am representing myself in this case, not any particular entity. I am now semi-retired but spent over 40 years in the land development and homebuilding industry. I have extensive experience in Metropolitan Districts over most of those years, sometimes representing a developer, other times simply being a Board member of an impacted Homeowners Association. I have presided as president of many newly formed HOA's that have Metro Districts, some without Districts. So I totally understand the issue presented here. I support Senate Bill SB23-110.

I have witnessed firsthand the positives and minuses of Metropolitan Districts from both the community developer as well as the ultimate resident that assumes the financial responsibility for payment of the taxes related to these Districts. Here are my conclusions in brief summary:

- Metro Districts create affordable funding for infrastructure and related improvements upfront thereby assuring their completion in a timely manner. Without this upfront funding, many if not most of the projects would not have been built. This is key.
- Metro Districts provide funding for affordable home opportunities that otherwise would not have been built. We have a shortage of housing, including affordable housing that Metro Districts address.
- There are tight controls on Metro Districts that protect the public and ultimate home purchaser. I do not see significant abuse by developers in this area in any sizeable way pertaining to Metropolitan Districts. Abuses are quite rare from my experience. Eliminating Metro Districts would be like throwing the baby out with the bath.
- We need more housing. Metro Districts allow for such by providing affordable financing.

In my 40+ years in the land development business I have seen very positive benefits to society in Metro Districts. We could argue the fringes of the subject, but on balance I believe it is a "no brainer" to not only permit but promote this vehicle that provides new and affordable housing to the consumer. I would be happy to amplify my comments, but I suspect brevity here is appreciated.

Steve Parry
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Paul Paratore, Denver Health Workers United

My name is Paul Paratore. I am a pediatric and critical care pharmacist at Denver Health Medical Center and part of the group of frontline workers that went public with Denver Health Workers United in 2020. I spent time chairing the organizing committee and the steering committee in 2020 and 2021 and remain an active member and organizer.

Every day I and my colleagues see the critical work done at Denver Health for our most vulnerable patients.

Frontline healthcare workers have spent the last three years working tirelessly to hold our country together and yet we continue to be overworked, largely underpaid—maligned and abandoned by our management and hospital executives, and forgotten by our legislators.

I believe Denver Health is one of the greatest places to work because of our mission to serve the most vulnerable patients in our city. We have had recent leadership changes and I am hopeful for a new era of partnership and a change in our administration's attitude toward our staff and the challenges we face as a government, not-for-profit hospital. In the past, our attempts to organize and discuss workplace issues have been met with intimidation and a union-busting campaign. After going public, all workers had to meet with their supervisors and go over a document alleging that we were driven by outside agitators and operating an illegal unionizing campaign. Later in the year I and a number of other providers signed an open letter to Denver Health clinicians and were accused to the entire organization of breaking employee policies.

As a pharmacist, I fought hard for our ability to protect ourselves during the pandemic with appropriate protective equipment, yet we were barred from using any PPE until the state mandated masking in hospitals and were not allowed to utilize N95-level protection until December 2020, 10 months into the pandemic. In the meantime, our administration either did not care to or willfully refused to know that many of our job functions place us in direct patient care. When union posters were put up in areas around the pharmacy, I was approached by management asking questions. I had executives stop in to have a conversation with me. While a conversation with leadership is desirable, it was quite frightening as a relatively new employee and clinician given the overall anti-union tone our leadership had taken and my public association with organizing efforts. Their actions in other areas didn't seem to line up with what I was being told by my leadership and executives I engaged with.

Over the last 3 years or so, I have heard stories of nurses, paramedics, and even long-serving physicians in leadership roles and managing critical grant-funded programs being intimidated and targeted by leadership at the highest levels in the hospital's administration. Inconsistent hiring and compensation practices, as well as long-time managers playing favorites have led to many providers leaving or being ousted, notably amongst women in our surgical services areas. Many employees have left Denver Health and returned in order to increase their pay, as

merit-based and tenure- based compensation increases are disproportionate and make it difficult to advance while remaining at the institution. Those of us that have remained have been rewarded with shift assignments that dramatically impact our quality of life for the worse, demands to increase productivity based on metrics that do not reflect our actual clinical work, increasing staff shortages, drug shortages, and now suspension of cost-of-living increases in order to deal with a worsening budget crisis. Many of these issues were raised by employees, both union and non-union members, over the last 3 years, but our voices were redirected or completely ignored—at the peril of the institution incurring the consequences we predicted. Employees do not trust our administration to take our feedback seriously and do not trust the channels we have for grievances and arbitration. This is a massive cultural issue at Denver Health and needs to be taken seriously.