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Commission Urges State to Set Goal to Reduce Excess Overtime in State Health Care Facilities

Last year, nursing staff working in state facilities clocked 3.75 million hours of overtime at a cost of \$179 million, the Little Hoover Commission stated in a report released Tuesday calling for policymakers to cut that overtime use in half.

The bipartisan citizens commission, in a new letter report, *Time and Again: Overtime in State Facilities*, found the state's overtime is four times the national average – 18 percent of state nursing staff pay is for overtime as compared to an average of four percent nationally for registered nurses and health care workers.

Most of that overtime for the nurses and psychiatric technicians working in state facilities was voluntary, some 80 percent, but staff was forced to work 417,226 hours of overtime, an archaic staffing solution all but abandoned in the private and other public health care facilities.

The Commission study stemmed from a 2015 request by Assemblymember Sebastian Ridley-Thomas, who also serves as a Commission member, to look at mandatory overtime. Assemblymember Ridley-Thomas has a bill (AB 840) under consideration by the Legislature that would ban mandatory overtime for nurses working in state facilities

“The Commission began this review with a focus on mandatory overtime – the state's practice of forcing its nursing staff to work back-to-back shifts to meet required nurse-patient staffing ratios when there are vacancies or workers out on leave – but we soon realized this was a symptom of a much bigger problem,” said Commission Chair Pedro Nava. “Clocking 3.75 million hours of overtime in one year is a clear signal that the state is not adequately scheduling and staffing its facilities providing health care.”

These state facilities include prisons, state hospitals, developmental centers and veterans homes. Hiring nursing staff can be challenging in the best of circumstances but even more so when the patients are convicted felons and those deemed too mentally ill to stand trial. These facilities also are often in remote corners of the state, making recruitment even more difficult. The potential worker pool thins even more with the possibility that the state can force an employee to work back-to-back shifts, often with little advance notice.

In a public hearing last year, the Commission heard from state officials who manage these facilities and whose hands are often tied by budget and civil service restrictions and use overtime to meet regulated staffing requirements. The Commission also heard from nurses and psychiatric technicians who came from all over the state to provide first-hand stories of harrowing drives home from work after back-to-back shifts and colleagues whose lives had been cut short by the stress of working long hours.

Study after study has concluded that working long hours in a health care setting is unsafe for patients and for staff. Error rates increase as does the risk of injury.

In this letter report, the Commission recommends reducing all overtime, which would reduce or possibly eliminate forced overtime and should reduce risks for errors and on-the-job injuries.

In its letter to the Governor and Legislature, the Commission recommends:

- Set a target to reduce overtime by 50 percent by 2018 and use mandatory overtime only in well-defined emergencies.
- Continue to reform civil service procedures to make it easier to hire and retain qualified staff.
- Provide managers with appropriate flexibility in scheduling and structuring staff and then hold management accountable for reducing overtime.
- Assess trends in patient health care and staffing needs to safely and cost-effectively provide health care in state facilities. Based on that assessment, authorize adequate staff to reduce overtime.

The Little Hoover Commission is an independent state agency charged with recommending ways to improve the efficiency and effectiveness of state programs. The Commission's recommendations are submitted to the Governor and the Legislature for their consideration and action. The letter report is available at www.lhc.ca.gov.