## **Provide Workgroup Recommendations**

(FY2019 Appropriation Act - Public Act 207 of 2018)

## March 1, 2019

**Sec. 1060.** (1) The department shall continue to convene a workgroup that meets at least quarterly in collaboration with the chairs of the house and senate appropriations subcommittees on the department budget or their designees, labor union representation, civil service, and any other appropriate parties to recommend solutions to address mandatory overtime, staff turnover, and staff retention at the state psychiatric hospitals and centers, including, but not limited to, permitting retired workers to return and permitting hiring of part-time workers.

(2) By March 1 of the current fiscal year, the department shall provide a status update on the implementation of the workgroup's recommendations to the senate and house appropriations subcommittees on the department budget, the senate and house fiscal agencies, and the state budget office.



**Background:** In 2017, the MDHHS Office of Human Resources worked in coordination with the Bureau of Hospitals and Administrative Operations to explore options for use in the State Hospital system that could be implemented with the intended goal of reducing the use of mandatory overtime in the system, as well as staff retention and staff turnover.

In January 2018, the Michigan Department of Health and Human Services (MDHHS) Bureau of Hospitals and Administrative Operations convened an initial workgroup to review the identified options to address mandatory overtime in the MDHHS state inpatient psychiatric hospitals and centers, and to receive input and comments regarding the possibility of implementation of one or more of them as recommended solutions.

The workgroup further discussed the potential of permitting retired workers to return to work within the state hospital system.

Members of this workgroup included representatives from the MDHHS, House and Senate appropriations subcommittees, labor unions, Civil Service Commission, Office of State Employer, and the Fiscal agencies.

The following potential solutions were reviewed and discussed with the workgroup:

- Permanent Intermittent positions
- 12-hour shifts
- Job sharing
- Pay study for Registered Nurses (RN)
- Increase in salary levels
- Expedited recruitment process
- Varying schedules, such as every other weekend

The workgroup further discussed the potential of permitting retired workers to return to work within the state hospital system and what action(s) would be required to permit it.

**Summary:** In March 2018, a report was submitted. Subsequent to that date, the MDHHS complied with Civil Service Rule 5-6.16, which allowed a one-time retention bonus to all Registered Nurse Managers (RNMs) continuously employed since September 30, 2017. These payments were paid on September 30, 2018. The payment of this retention bonus provided an incentive for RNMs to remain with the state.

Additionally, the MDHHS continues to comply with Civil Service Rule 5-6.15, which provides for all newly hired RNMs to be paid a signing bonus of up to \$5,000. The sum of \$2,500 is paid at time of hire and the balance of \$2,500 is paid after completion of 2,080 hours of satisfactory service. This pilot program expires on September 30, 2019.

Due to the nature and complexity of the potential solutions that were discussed for consideration, including, but not limited to, the potential return of retired workers to the state hospital system, additional staffing will need to be in place. Solutions such as

12-hour shifts require staff to volunteer and actively participate in the solution. With insufficient staffing levels, it is difficult to implement such solutions.

MDHHS will continue to work with the Office of Human Resources and the state hospitals to explore solutions to address mandatory overtime.

Follow up discussions have continued with all the hospitals regarding the above recommended solutions. Based on these discussions, the Walter Reuther Psychiatric Hospital was successful in working with its RN staff and union representation to reach an agreement, so the RNs have every other weekend off. Due to the success of these efforts, this same opportunity has been extended to the residential care aides (RCAs) and licensed practical nurse (LPN) staff and will be implemented with the pay period beginning May 5, 2019. The pilot will be monitored for success and consideration for implementation in other state hospitals.

The remaining solution to bring back retired workers is subject to legislation and further approval from various levels of state government.

House Bill 4156 has been introduced to amend the State Employees' Retirement Act to allow retired mental health professionals who retired prior to October 1, 2015, in a bonafide termination of employment, to provide services without forfeiting their retirement benefits. The definition of a mental health professional includes licensed physicians, licensed psychologists, licensed registered nurses, and licensed Masters level social workers, all of which are utilized in the state hospital system.

If House Bill 4156 is passed, and MDHHS determines that hiring the retiree because of the retiree's specialized expertise and experience and because it would be a cost-effective option for the state, the retiree would be hired as a mental health professional in the state hospital system and be able to retain their retirement benefits.