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United for Quality Care

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Gabriela Bottino, LPN
Before the Appropriations Committee

Good Afternoon Senator Osten, Representative Walker, and members of the Committee. My name is Gabriela Bottino, I am an LPN for the DOC health services unit. I have worked as a nurse in DOC since 2011. Since then I have worked in multiple facilities, in multiple assignment roles. Today I am assigned as ID case manager and PPT case manager to the medical infirmary at Osborn Correctional Institute.

I am writing today to thank you for appropriating funds for inmate healthcare in last year's budget. In the last year DOC HSU has been able to expand HCV testing and treatment, we have inducted the MAT program into multiple jails and prisons, and we have been able to rid the process of UR review panel giving our patients the confirmation they will see the recommended specialty provider recommended by their facility providers. We know that progress is being made and are here to ask you to protect and continue to increase funding for inmate healthcare, because today we operate within staffing crisis levels.

Currently at Osborn we have an active nursing staff level of 44% per CMHC standard from 2016. This leaves the nursing to patient ratio 1:62. Osborn infirmary can hold 28 of our most acute patients; the ratio is 1 nurse 14 patients. The current medical provider ratio is 1: 653 patients. We need continuous resources to staff inmate healthcare units affectively.

As a 9-year medical employee with DOC I can tell you nursing staff is doing the best possible job they can with what we are given. We come to work every day expecting not to be reconnected to our families for the next 16 hours. Having a child to raise my career puts a tremendous responsibility on my loved ones and I would like to thank them for their continuous support. We cannot expect our friends or family to understand what a shift in corrections entails this is a lifestyle only the employees within can relate to. We have no HSU employee wellness programs. This year we lost a beloved staff member to suicide. We do not have cell phone to call home and check in. We are limited to 10-minute personal phone calls per administration. Frequently we have a 2-hour notice that we will be held and attention immediately turns to how to manage family obligations through a hurried phone call. Our commute time is not considered when mandates occur. I commute a total of 2 hours to Somers, which leaves 5 hours of rest between a mandate and the start of your next shift.

I could go on with examples of how HSU staff are stretched thin and burnt out, and I haven't even gotten to my experience as an Infectious Disease Case manager, but ultimately all of these issue come down to a lack of proper funding. To provide quality care to our patients, who we see as someone's brother, father, son, grandfather, uncle, we are asking for your support in 2020 to increase funding DOC HSU to educate staff properly and recruit/ retain staff at comparable rates as community health providers. Thank you.