

**Public Hearing on:**  
**H.B. 6439 An Act Concerning The State Budget For The Biennium Ending June Thirtieth, 2023,**  
**And Making Appropriations Therefor.**  
**Health Subcommittee**  
**Tuesday, March 2, 10:00 am**

Good afternoon Senator Osten, Representative Walker, Senator Miner, Representative France and distinguished members of the Appropriations Committee:

My name is Diana Giordano and I am a Licensed Professional Counselor for the private non-profit agency, United Services. I have been working in the mental health field since 2007 and with United Services for just over two years. I have never worked at an agency that has this fast paced of a revolving door. Simply put, lack of funding = lack of pay, which in turn = lack of stability for all.

In particular, United Services has lost a large number of employees from the beginning of 2019 to present day, leaving us with a handful of new and unexperienced employees. We have no bonus incentives for our hard work, or loyal years spent on the job, and raises do not exist unless you earn a higher degree. This being said, I personally earned a \$0.20/hr increase in wages for attaining my license last year. \$0.20. That comes out to an extra \$8/wk.

Clinicians are coming in green from school, earning their supervision hours, and once they attain their license, it's back out the revolving door to find a considerably higher paying job for equal, or at this point, less responsibility. Working for an agency that does not show gratitude for its loyal employees, creates an environment of low morale, low job satisfaction, and high burn out.

And what about our clients?

- Is it fair for them to not know if they will walk in to a new clinician every few months because their assigned clinician has left? No.
- Is it therapeutic for our client's to have to start over every few months, and break the progress of their treatment because their therapist can't afford to work for the agency anymore? No.
- Better yet, is it fair for our clinicians that do remain, to take on larger and larger caseloads? No.
- Can one clinician give the same therapeutic treatment to 85 clients, as they would be able to if they had a more reasonable caseload of 45 or 50 clients? I don't see how.

Our structure within, is weak and non-existent in parts. Hiring is just not happening. Why? Because "outside seasoned clinicians" laugh at those of us who struggle with where we are in the non-profit sector. Clinicians leave, their caseload goes to the managers. Managers have left, their caseloads go to the directors. Directors are now leaving, and the responsibility TERRIFYINGLY is left to the CEO with no clinical background. What's next? When will our badges stop working to let us in the building because our agency has self-imploded and ceases to exist?

We want to stay because we like working with each other. We want to stay because we love what we do. But when clinicians start breaking down because they are overworked with no clinician support, and

given the responsibilities of another, or two other clinicians, we collectively become weak. We are not working at our optimal best, therefore, we cannot provide our optimal best. And this is not only NOT fair to our clinicians, but unfair, non-supportive nor therapeutic for our clients.

Being the Lead Mental Health Agency of Wyndham County, we should have clinicians knocking down our door, wanting to be a part of this great agency... And clients knocking down our door for the best services around. Yet, we are struggling with this. We struggle to hire. We struggle to retain. WE STRUGGLE TO STAY!

This is not about greed and making the most money we can. This is about the real life struggle for a middle-class employee to earn a living and be able to support their families with incomes that are

\$1,500/yr less than the average salary in the Wyndham Area

AND

\$3,400/yr less than the National Average for Clinicians

Personally, I started as a “green” employee at United Services because they were willing to take me with no experience and provide supervision for my license requirements. But now that I have my license, it is a strong personal struggle to remain motivated to stay as an employee. As I stated earlier, part of me WANTS to stay with my colleagues, and continue to work with the clientele I’ve built a rapport with. I want to continue helping others and become better at my role in the mental health field. But now that I have my license and experience, I can’t help but look around and notice my peers working similar jobs for much higher pay and less (reasonable) responsibility. So do I stay and struggle to pay my bills, but keep the relationships I have built professionally? Or do I leave this agency, leave my clients, leave my staff short-staffed, and join everyone else through the revolving door?

As you all know, Minimum Wage is increasing to \$15 an hour in 2023... In order to be on a level playing field with this trend, our clinicians would need an \$8/hr increase over the next 3 years. And when we go to our President/CEO and ask, where is the money going? We are told, “there is no money. We struggle to pay what we do.”

I will leave you with this thought... After hearing what we have brought to you about our agencies struggles, the struggles of our clinicians, and in-turn the struggles we place upon our already susceptible and vulnerable clientele... Would you want to work for a place like this? Would you go for help, to a place like this?

Always remember, the grass is always greener where you water it. Please help us during our drought.