

Testimony Before the Legislative Committee on State Hospitals
Submitted by: Kyle J. Nuckolls, KOSE Union Steward at Larned State Hospital
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Ladies and Gentlemen of the Committee:

My name is Kyle Nuckolls and I want to thank you for the honor of speaking to you today. I am a Union Steward at Larned State Hospital, and I am speaking to you today as a private citizen and a representative of the Kansas Organization of State Employees (KOSE); not as a representative of the State of Kansas or any of its agencies or programs. Today, I want to speak to you regarding the working conditions at Larned State Hospital and Osawatomie State Hospital.

I have taken great pains to ensure that my testimony before you is representative of the whole body of employees that KOSE represents at each state hospital. To begin, I want to highlight the positive changes that have occurred at both State Hospitals since I spoke before the KanCare oversight committee in April of this year. The first positive I should highlight is the appointment and confirmation, of Secretary Timothy Keck to head the Kansas Department of Aging and Disability Services (KDADS). Mr. Keck has been a pleasure to work with at each State Hospital and has shown himself to be dedicated to improving the working conditions for all employees. He is responsive to employee concerns and does his best to find a middle ground that results in a mutually beneficial resolution of the issue. Secondly, I want to commend KDADS and Secretary Keck for is the hiring of Bill Rein and John Worley to head each state hospital. Both individuals have built on the work of Secretary Keck to build a culture of dignity and respect for employees to work in. Finally, I want to recognize KDADS for making improvement in the overall staffing shortages at each state hospital. While there remains significant work to be done on this issue, there have been noticeable improvement reported to me from employees at both state hospitals.

Next, I would like to address the significant problems that remain at each state hospital. The most pressing issue affecting retention and morale at both state hospitals is severe, persistent, and widespread workplace bullying at all level of the organization, but most significantly at the supervisor-employee level. For the purposes of my testimony today, workplace bullying is defined as (American Bar Association, 2012):

persistent, malicious, unwelcome, severe and pervasive mistreatment that harms, intimidates, offends, degrades or humiliates an employee, whether verbal, physical or otherwise, at the place of work and/or in the course of employment

Examples of workplace bullying include, according to the American Bar Association, but are not limited to (American Bar Association, 2012):

- Staring, glaring or other nonverbal demonstrations of hostility;
- Exclusion or social isolation;
- Excessive monitoring or micro-managing;
- Work-related harassment (work-overload, unrealistic deadlines, meaningless tasks);

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- Being held to a different standard than the rest of an employee's work group;
- Consistent ignoring or interrupting of an employee in front of co-workers;
- Personal attacks (angry outbursts, excessive profanity, or name-calling);
- Encouragement of others to turn against the targeted employee;
- Sabotage of a co-worker's work product or undermining of an employee's work performance;
- Stalking;
- Unwelcome touching or unconsented-to touching;
- Invasion of another's person's personal space,
- Unreasonable interference with an employee's ability to do his or her work (i.e., overloading of emails);
- Repeated infliction of verbal abuse, such as the use of derogatory remarks, insults and epithets;
- Conduct that a reasonable person would find hostile, offensive, and unrelated to the employer's legitimate business interests.

About seventy-five percent of the complaints addressed by KOSE at Larned State Hospital are directly related to incidents of workplace bullying, most frequently by the employee's direct supervisor. This directly undermines morale, retention, and the culture of respect Secretary Keck has tried to cultivate. I would strongly encourage KDADS work together with KOSE to create a comprehensive anti-workplace bullying policy for both Larned State Hospital and Osawatomie State Hospital.

The next issue that is challenges both State Hospitals is understaffing. Currently the Kansas Jobs website lists twenty-seven different positions as vacant at Larned State Hospital, with some of the listings encompassing more than one vacancy (Kansas Department of Administration, 2016). At Osawatomie State Hospital there are thirty-one different positions vacant, with some of the listings encompassing more than one vacancy (Kansas Department of Administration, 2016). While the vacancy rate is influence by numerous factors, two of the most significant for those I work with are low wages and poor supervisors. While the legislature did raise wages for direct-care staff, and we are very thankful for those increases; these gains have been largely off-set by the increase in health-insurance premiums. Also, not all State Hospital staff received raises, nor did all direct care staff. Licensed Mental Health Technicians, Licensed Practical Nurses, Psychologists, and numerous other staff were passed over for pay increases despite severe understaffing in these jobs.

At Larned State Hospital, one of the biggest issues is that lasting culture change has not been obtained due to ineffective promotion practices. Just as I testified in April, advancement is decided based on a game of favorites. In this game, decisions about who to promote are made based on who is "owed a favor" or who someone's friend is, not on the qualifications the candidate has. To illustrate, there was recently a senior leadership position advertised and interviewed for in which none of the candidate who applied and interviewed were chosen, but instead an outside party was approached and offered the job. When negotiations with the chosen

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candidate began to fall through they approached a candidate who did not meet the minimum educational requirements when they had another candidate that did. What is even more notable is that the candidate who met the minimum qualifications has been called and specifically told to interview for the position after withdrawing their name from the running. State employment is not a game of favorites, and if there is to be any lasting improvement at the State Hospitals it is imperative that qualified individuals be recruited and promoted.

Finally, the final issue I want to highlight is that employees are still nailed for the wall for the smallest mistakes. To put it simply, there is no desire to attempt to grow and develop employees. There is no positive feedback from their immediate supervisors to praise the good things are doing, nor is there any constructive feedback to help them improve as employees. Instead things are completely punitive. Making the smallest mistake will land an employee in Risk Management where they are automatically assumed to have been in the wrong and summarily punished. In fact, the one thing I remember from New Employee Orientation is being told that whenever I see someone make a mistake, no matter how small, I need to report it to risk management. I was never told to take the employee aside and let them know what they did wrong, or to inform the shift supervisor so they could address the issue immediately. Basically, I was told not to work as part of the team, but to make sure everyone was so concerned someone was watching them that they didn't dare make a mistake. This creates and continues a culture of fear and isolation where employees don't stop making mistakes, but instead cover them up out of fear of losing their jobs. I would strongly encourage KDADS to take steps to ensure that mistakes are addressed through training and constructive discipline as often as possible so that they can grow and develop high-quality employees and build a winning team.

I appreciate the willingness, both by Secretary Keck and his staff and by this legislative committee, to explore the issues existing at the State Hospitals and to look for solutions. It is my sincere hope that employees, KDADS, and the legislature can continue working together to improve working conditions at both State Hospitals. Thank you again for the chance to speak with you today. I am happy to answer any questions you may have.

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