



New York State
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Governor David A. Paterson
Executive Chamber
State Capitol
Albany, NY 12224

Dear Governor Paterson:

I am writing to you out of grave concern for the significant increase in work related injuries for state employees and the associated increase in workers' compensation costs in fiscal year 2008-09.

Throughout the ongoing fiscal crisis your administration has placed a premium on eliminating waste and increasing efficiency in state operations. A conservative estimate is that work related injuries cost the state of New York between \$113 and \$227 million per year. This estimate includes direct and indirect costs, but excludes the costs of ongoing cases that originated in prior years. Even a small reduction in work related injuries has the potential of saving tens of millions of dollars for the state.

There is an urgent need to address the rising workers' compensation injuries and related costs to protect both the well being of the state workforce and to eliminate waste and inefficiency.

The human and fiscal costs of this rising tide of workers' injuries are documented in the latest Civil Service Department's Annual Workers' Compensation Report for New York State Government Employees FY 2008/2009.

Key findings in the report comparing FY 2008/09 to FY 2007/08 include:

1. Total compensation cost increased nearly 22%, from \$18,690,687 to \$22,770,590.
2. Total medical cost increased nearly 5%, from \$19,690,167 to \$20,636,439.
3. Lost work days increased to 268,896 compared with 247,975 a year, the increased total is the equivalent of 1,034 full time employees.

While there was just an overall 3% increase in the workers' compensation case rate the increase was not spread evenly across all agencies. In fact, some of the largest agencies have borne the brunt of it. Three agencies had a 15-33% incidence rate increase:

1. Office of Children and Family Services: 33% increase, to 19.6 cases per 100 employees;
2. Office of Mental Health: 21% increase, to 16.8 cases per 100 employees; and,

3. Department of Correctional Services: 15% increase, to 15.2 cases per 100 employees

The Office of Mental Retardation and Developmental Disabilities had a decrease compared to the prior year; however, it remains a large agency with an unacceptably high incident rate of 15.7 cases per 100 employees and accounts for 22% of the total costs.

Collectively, these four agencies employ 47.3% of the covered employees, but account for 76% of the incidents, 77% of the lost-time incidents, 76% of the lost workdays, and 79% of the costs.

Other agencies with high incident rates include the State University of New York (11.0%), the four Veteran's Nursing Homes run by the Department of Health (average of 12.9%), and Parks & Recreation (11.3%).

The injuries and costs described in this report have a direct impact on the quality of services provided by these agencies. The human impact on injured workers and their families, co-workers and clients is also significant.

Indirect costs are estimated to increase the total fiscal impact as much as five to ten times the direct costs. Indirect costs include overtime, retraining, hiring replacement workers, and administering benefits. On this basis we can conservatively estimate that this represents a cost to the State of New York of between \$113 and \$227 million per year.

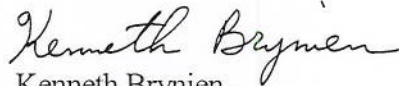
Industry studies estimate that on average for every \$1 dollar in prevention saves \$3 or more dollars in direct and indirect costs. As a means to address the increasing cost of work related injuries I recommend the following actions:

1. Establish a workgroup of representatives of the affected unions, GOER, and agencies together with the State Insurance Fund and Civil Service Department to develop detailed analyses describing the causes of the injuries, the occupations effected, at each affected worksite and implement comprehensive prevention efforts to address issues that are identified.
2. Develop a comprehensive occupational health and safety management program, staffed by occupational health and safety professionals for the agencies listed above. Investing the money necessary to staff these programs should result in significant net savings. In the recent past, requests to create positions at OMH and OCFS have been denied by Civil Service and the Division of Budget.
3. In OMH, OMRDD, and OCFS client/patient assaults against staff are a leading cause of injury. An initiative to address this type of violence prevention and injury reduction initiatives should be developed. Preventive programs can be piloted that focus on clinical, staffing, client programming, policy, and environmental changes. Additional staff training should also be considered.

4. Invest in safe patient handling programs for the nursing homes, hospitals, OMRDD, and DOCS Regional Medical Units to reduce injury related costs. Patient transferring is a leading cause of injuries at these sites. Many peer reviewed studies have demonstrated that properly implemented programs can significantly reduce back injuries to caregivers as well as prevent patient injury.
5. A leading category of injury is slips, trips, and falls. A specific evaluation should be conducted to identify causes and solutions in the affected agencies.
6. Make use of existing negotiated Health & Safety Committees and funding to address these problems to the extent possible.

I look forward to working with you on this important health and safety and fiscal management problem.

Sincerely,



Kenneth Brynien,
President

cc: Robert Megna, Director, DOB
Valerie Grey, Director, State Operations
Brian Fischer, Commissioner, DOCS
Michael Hogan, Commissioner, OMH
Diana Jones Ritter, Commissioner, OMRDD
Gladys Carrion, Commissioner, OCFS
Richard Daines, Commissioner, DOH
Carol Ash, Commissioner, Parks & Recreation
Nancy L. Zimpher, Chancellor, SUNY
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