



April 9, 2026

**Subject: Testimony in Support of H-7031, Joint Resolution Creating a Joint Legislative Study Commission on Safe Staffing in Hospitals — Submitted by a Member of SEIU 1199NE**

Dear Chairwoman Donovan and Honorable Members of the House Committee on Health & Human Services:

I have worked as an Activities Therapist in the adolescent unit at Butler Hospital for almost 25 years. I am submitting this testimony in support of House Bill 7031 to create the Hospital Staffing Commission.

In the adolescent unit, we treat youth as young as 12 years old up to age 18 who are seeking treatment for depression, anxiety, substance abuse, and the onset of psychosis, including schizophrenia. Since COVID, social media and isolation have had a major impact on youth. Many of them lost important years of social development, and we are now seeing much higher levels of acuity.

For many of our patients, coming to Butler is the first time they receive any mental health treatment, and this experience shapes how they view the entire mental health system. As minors, they require a significant amount of individual care. But when units are short-staffed, it becomes impossible to provide that level of support.

If a patient becomes violent, we may be able to request one-to-one staffing, but it is ultimately left to administrative discretion. There are no clear numbers or guidelines defining what safe staffing actually is. That's because no standards exist.

When the unit becomes very acute, short staffing can lead to unsafe conditions where staff and even patients get hurt. I personally experienced a serious injury when the unit was extremely acute and staffing levels were unacceptably low.

Staff and patient safety should be non-negotiable and the bare minimum expected. Our patients are there to heal, and short staffing should not mean essential parts of treatment—like group therapy—fall by the wayside.

We need to examine the criteria for how current staffing ratios are determined, as patient number or acuity does not seem to be the driving factor. These decisions appear to be financial rather than clinical. But there is very little accountability because hospitals are not breaking any laws, as no safe staffing laws exist.

For many years, people assumed hospitals would simply do the right thing. But hospitals have increasingly become businesses, and patient-centered care is no longer the top priority.

As Butler staff, we have learned the hospital often does not do the right thing until it is forced to. Many of us went on strike to address issues that we could control—now we need help to change what is out of our control.

That is why we are asking for your support to establish the Hospital Staffing Commission.

Sincerely,

Beth Iiams, Activities Therapist  
Butler Hospital