STATE OF NEW YORK : COUNTY LEGISLATURE
COUNTY OF ONONDAGA

In the Matter of
Resolution No. 181
Corporation Law Section 1411

to Consider Transfer of
Van Duyn Home and Hospital
to
Onondaga Civic Development Corporation

PUBLIC HEARING in the above matter, conducted
at the Onondaga County Court House Legislative
Chambers, Room 407, 401 Montgomery Street,
Syracuse, New York before, JOHN F. DRUBY, CSR,
RPR, Notary Public in and for the State of New
York, on November 26, 2012 at 7:00 p.m.

MEMBERS OF LEGISLATURE PRESENT:
1 Brian F. May 1st District
2 John C. Dougherty 2nd District
3 William H. Meyer 3rd District
4 Judith A. Tassone 4th District
5 Michael Plochocki 6th District
6 Danny J. Liedka 7th District
7 Christopher Ryan 8th District
8 Mark A. Stanczyk 9th District
9 Kevin Holmquist 10th District
10 Patrick Kilmartin 11th District
11 David H. Knapp 12th District
12 Casey E. Jordan 14th District
13 J. Ryan McMahon 15th District, Chairman
14 Monica Williams 16th District
15 Linda A. Ervin 17th District
16 Jamie McNamara Assistant Clerk
17 Lori H. Tarroli Chief Deputy County Attorney

Reported By:
John P. Deury CSR, RPR
Court Reporter 471-7397

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1 Compani
2 first speaker is going to be Bob Compani.
3 Bob, please state the organization
4 you're with and your address for us for
5 the record.
6 BOB COMPAI: My name is Bob Compani
7 and I am the director of the Private
8 Sector Division of CSEA. I would like
9 to thank the county leaders for allowing
10 me the opportunity to speak tonight.
11 Part of my job as the director of the
12 Private Sector is to negotiate first
13 contracts in the private sector. One of
14 my recent assignments had me negotiate a
15 first contract for one of our nursing
16 homes that was privatized. I'd like to
tell you all about that experience
17 today.
18 The Fulton County Nursing Home is a
19 public facility that was located in
20 Gloversville, New York. I live in
21 Gloversville, New York. Several months
22 ago it was stated in our local newspaper
23 the state officials announced that
24 Gloversville was the most poverty
Compani

stricken city in the State of New York.

There is few available jobs and the jobs

that do exist there are low paying with

little or no benefits. The County

Nursing Home was one of the few large

employers left in the county with as

many as 240 employees when it was a

public facility.

In early 2012 the Board of

Supervisors made the decision to

privatize the nursing home. It went to

a company called the Centers for

Specialty Care. Centers took over the

operation on April 1st, 2012. They

seemed quite reasonable and seemed like

a company we could deal with. In these

negotiations with the Centers we got the

following items agreed to.

They recognized CSEA as the

bargaining representative of those

employees. They honored the current

wages for ex-county employees who

remained in the home. They agreed to

honor seniority of the workers who

remained in that home. We negotiated an

agreements procedures with binding

arbitration and we got Centers to set up

a training fund for these employees.

Now that all sounds good, but as

they say on TV, wait, there is more.

The employees lost the right to have a

defined pension plan and was replaced

with a 401(k) savings plan that they

have to contribute to. Starting wages

for new hires were cut by over $2 an

hour. The longevity program that was in

place had rewarded dedicated long term

employees ended immediately. Holiday,

weekend, overnight shift differentials

ended immediately. Only Christmas and

New Year's if you worked did you get a

premium. Employees vacation time was

cut. The work week was cut from 40

hours to 37 and-a-half hours. Meaning

even though they kept they're current

rate of pay they lost two and-a-half

hours worth of that pay every week.

The financial department was closed

and about 30 to 35 people were not

offered jobs by the new employer.

Another 10 or so chose to leave on their

own. A handful of them were replaced

and the total workforce after the

transition to private sector was about

170. Down from about 240.

As of August 8, 2012 only 40

ex-county workers remain at that

facility. The rest of those workers

that were there long times have all quit

due to changes at the Home. The workers

felt that the quality of care was

suffering significantly since the

transition.

The cost of health insurance for

these employees was also greatly

impacted. What used to be free for the

individual now costs them $20.00 a week.

That doesn't sound bad, but hang on. If

you want full family coverage it costs

an employee out of pocket $980 a month;

out of pocket. That's an astounding

$245 a week if you want your family

covered by health insurance at this

facility. The new plans don't cover as

much and they have out of pocket co-pays

as well.

As more and more qualified employees

quit this facility it becomes harder to

staff the facility and more of the

qualified employees are ending up

getting mandated beyond belief. The

enormous amount of mandated hours can

create a huge effect on these workers

and cause a huge amount of stress.

Since the privatization, morale in

the work force has suffered significantly.

And as stated above only 40 of those

experienced, ex-county workers remain at

that facility. This means about 130

highly experienced people quit. And

they quit in Gloversville, New York,

which is considered the poorest city in

the State of New York.

The exodus of qualified workers

together with the paltry starting wages

and non-existent benefits is creating an
Compani

and atmosphere where the quality of care as well as worker morale is certainly going to suffer more. In the long run the poor morale and paltry benefits have driven good workers from the facility and replacing these workers with inexperienced low paying workers will cause the quality of care in this facility to plummet. All this means that the elderly who reside in these homes and depend on the care of these workers and depend on the county's obligated to provide this care to these people, they'll suffer more and more.

On a personal side, you need to be aware my wife's aunt is in this facility. So not only did I negotiate this contract but I witnessed first hand how some of the quality of care has declined significantly in these few months.

I want to point out a couple of these before I add. Orange juice was cut from the menu completely. It was replaced with apple juice, cheap apple juice, no nutritional significance whatsoever, nothing more than colored water. And the only reason they did that was to save money. Because of the short staffing situations I've seen first hand or heard of these following instances.

A non-speaking resident was lost in this facility for a few hours and they could not find her, due to the inexperienced work force. When an experienced worker showed up they found her between the bed and the wall where she had fallen and she laid there for hours.

Another resident disappeared from the Home and was found wandering up the road. And just recently a meth addict from the Bronx was admitted to this Home on the same floor as my wife's aunt.

And they had taken up residence in the Home with elderly citizens. I do not consider that a safe situation at all, but perfectly legal.

Compani

And finally, my wife's aunt had a roommate at the Home who passed away; rest her sole. They moved my wife's aunt from the room awaiting the coroner, they put her in a comfy chair in the lobby, with my wife and my mother-in-law present. Her aunt sat there for hours. Until my wife complained to me, and I picked up the telephone and called the administrator of the Home because he knows who I am, because he negotiated the contract with me. Surprisingly they found a room at that time. And that disturbed me just as much as if they didn't find her a room because it's not -- it shouldn't have been because of who she was and who she was related to that she got that room. It should be for the simple reason that she was a fragile elderly Fulton County resident who needed love and care.

Residents are now admitted from outside the county based on their ability to pay, and county residents.

Compani

And Wright need to look elsewhere if they need a place to put their elderly and their fragile. I'm urging you not to let this happen here. Do what's right for this county and do what's right for the people who live in that Home and depend on you. Thank you.

CHAIRMAN McMAHON: Thank you, Bob.

Jeff Wright. And Jeff, just give us your address.

JEFFREY WRIGHT: Yes, sir, Mr. Chairman. Jeffrey Wright, 153 St. Louis.

My mother is a resident at Van Duyn. And you just heard a horror story of what can happen. We can't predict what will or won't happen. But I assure you that the people in the County of Onondaga need to be loyal to the people that are working in Van Duyn. Because those people in Van Duyn are loyal to the residents. It's amazing, the care that is being provided up there. And to take the chance that you risk losing any of that care should not
Wright
2 happen. You as leaders in this county
3 need to ensure that we continue to
4 provide the care that is being received
5 up there and ensure that the employees
6 up there will maintain their standard of
7 living. We cannot act like corporate
8 America, we cannot act like Verizon and
9 destroy middle America. Where is the
10 American dream?
11 It's your responsibility to be loyal
12 to these people because they're loyal to
13 the residents. Do not let this happen.
14 Find a way to fund this facility. Ask
15 the county residents what they're
16 willing to pay. Because I'll tell you
17 it's a great security to know that we
18 have this facility and the care that
19 they give to people that we need to look
20 out for. I hope some day, that should
21 this go through, you don't have to go:
22 I wonder if we hadn't done this. If I
23 or my family member would be receiving
24 inferior care? Don't put yourself in
25 that position. Think about the older

Graham
1 doors of their former nursing home for
2 good, leaving their residents to be
3 hastily relocated hundreds of miles away
4 from home and family, and leaving
5 taxpayers holding the bag for over half
6 a million dollars owed from the original
7 sale. Before the facility closed, the
8 quality of care provided went seriously
9 downhill, and promises to the community
10 for better care were completely broken
11 and abandoned. We do not want this to
12 happen here.
13 Second, we believe that you are
14 using the transfer of county property to
15 an LDC in a manner and purpose that goes
16 completely against the original intent
17 of what LDC's are for, that is, economic
18 development. It may be illegal and CSEA
19 is looking at potential legal challenges
20 to privatizing vital public assets by
21 transferring their ownership to LDC's.
22 We've already seen Lewis County back
23 down from creating an LDC after we
24 warned them that a legal challenge would

Graham
1 Americans, the older county residents
2 that are living up there. Thank you.
3 CHAIRMAN McMAHON: Thank you, Jeff.
4 Phil Graham. Phil, we know your
5 organizations, if you can just let us
6 know your address.
7 PHIL GRAHAM: I'm Phil Graham, 120
8 Vanida Drive, Camillus, New York. Good
9 evening Chairman and Legislators, I'm
10 Phil Graham, CSEA Local 834 President.
11 First, CSEA is completely opposed to
12 the privatization and sale of Van Duyn.
13 We believe that this is abdication of
14 our responsibility as a community to
15 care for our elderly and infirm
16 citizens, and it completely rejects the
17 185 year old legacy of caring we have
18 continued since the county poor house
19 was built in 1827.
20 As we stated at the recent budget
21 hearing, privatizing Van Duyn sets into
22 motion a chain of events that we lose
23 direct control over. In Delaware County,
24 this recently caused them to shut the
25 Lots of questions surround this
Graham

1. particular transfer of Van Duyn to an LDC that need to be answered before this legislative body votes on the issue.
2. First, why do we need an LDC for this sale? A buyer has already been determined, and that buyer should be required to meet all the thresholds of a direct sale if one is to be made. Why would we spend public monies to assist the buyer in getting a mortgage to assume the ownership of Van Duyn? Can they not get a mortgage on their own? If we spend public money to assist, aren't we lessening the amount of money we get from the sale?
3. Speaking of money, how can we go ahead with this transfer if we don't even know how much money would be realized with this sale? Why are there not exact figures being provided? Would the county be guaranteed full market value when the LDC sells the property?
4. Isn't it irresponsible to vote on a transfer when we don't know in advance what the financial impact would be in this county?

Graham

1. open door and that we would be part of the ongoing conversation regarding Van Duyn's ownership. Why was our local union leadership not contacted by any legislators regarding the transfer to an LDC?
2. As elected officials you are public advocates and have an obligation to the community to make sure the community has a safety net to fall back to, especially since we paid for it with decades of public investment through our taxes.
3. How can you get rid of this vital public asset without first going to the public and explain what could be lost? CSEA will consider any vote to transfer Van Duyn to an LDC as abandoning our social responsibility to our community's seniors, and we will hold you accountable if the promises are not kept.
4. More importantly, the people who live at Van Duyn and who might some day live at Van Duyn, will hold you accountable for the actions you take.

Another question on finances. Why is Onondaga Civic Development Corporation projecting nearly a $400,000 operating loss over the next three years in their four year financial plan contained in their annual report? Can we as taxpayers trust that our investment in Van Duyn would be properly maintained by a corporation that is patiently going to run deficits the next three years? If this sale doesn't go through as expected will they have enough money to properly maintain the facility?

Finally, when CSEA met earlier this year with Legislative Chair Ryan McMahon to discuss our concerns related to Van Duyn, we were told that we would have an
Graham

going forward. Shame on any of you who violate the public trust that you have been invested with to care for our seniors if you vote to go ahead with the transfer of this sale.

For 185 years we have taken care of the less fortunate in Onondaga County. Van Duyn nursing home will go into the red for the first time in 2013. And the county has decided that we can no longer care for the residents at Van Duyn. Can we walk away from our obligation as a community to have a true safety net? For our needy elderly? The new buyer has promised to keep Van Duyn as a safety net. But they are in the business of making money and not losing money. Promises are easy to make and easier to break.

If this county is walking away from its obligation what will happen to our elderly in the future? Let’s all take a deep breath and get all the facts before we make such a big decision. Do we want

Graham/Denton

our elderly to face an uncertain future?

When we have to travel up to two hours away to visit our elderly family members in the future if the safety net is not there anymore? Can we all look at the financial numbers at the Van Duyn, talk to the residents, the families, the workers. How would we all feel if our family member was a resident at Van Duyn? Would we take a better look at this and not make such a hasty decision?

These people that are up there are the baby boomers, considered the greatest generation in America. Now let’s not let them down. They built this great country, now it’s our turn to take care of them. Thank you.

CHAIRMAN McMAHON: Thank you, Phil. Virginia Denton. Virginia, if you could state your organization and address for us.

VIRGINIA DENTON: I'm a retired architect, I no longer, I'm not representing an organization. I'm

Denton

speaking on behalf of retaining Van Duyn as a public entity. And I certainly do appreciate this opportunity. Please know that I fully understand and appreciate the dilemma you have regarding the budget deficit projections that you say you are facing. I spent most of my professional career managing multi-million dollar current year budgets for a non-profit.

But we have a choice here in this instance. I have had my aunt, who is 94 years old, suffers from dementia, at Van Duyn for slightly over two years. And it has become very clear to me that the reason you have a deficit is because Van Duyn is so well staffed with uniquely caring and competent people. I've observed this personally over and over again as I visit my aunt three times a week for the most part; something one doesn't see or hear about with privately owned facilities. Just doesn't happen.

There are horror stories out there.

Denton

The only way a private firm can overcome that deficit and make a profit is to make considerable reductions in staff and related services that are provided. Under those circumstances this puts people looking for other work.

And likely on public assistance for a period of time. Since you also pay benies, I think you still do, which I doubt a private firm would, the administrative staff is able to be more selective in hiring good staff. And I would plead with you to consider those two aspects of what I'm saying.

Having said that I would like to offer an alternate proposal. And I know you don't want to hear this: Raise the property taxes to cover the deficit.

Here's my arithmetic. You're projecting a deficit of $115 million over nine years. That translates to 12 million or $12.7 million per year. According to your property tax office there are 180,000 property taxpayers in the county.
Denton

That translates to somewhere between 69 and $70.00 per year in increased property taxes. I'm tempted to say that's chump change but I don't want to be rude. Since I would guess that many in this room will no doubt need help for either themselves or loved ones over time and some in due time. And private firms simply cannot provide the kind of care a public institution can.

And as a taxpayer what I'm saying translates to a sound investment in the future. Rather than what seems to me to be a shortsighted loss of a municipal asset which is critical to how I see we should be responding to our elders and the care of elders. I'm serious about it. Who knows what's going to happen to any one of us? And Van Duyn is a very very special place. I've watched it, seen it, over and over again as I already said. So I would hope that in the very least that perhaps there would be, I don't know if you would have to

Seitz

passed his condition got worse. PT at the hospital was unsuccessful. Our family physician told us we could no longer care for him at home. He was then transferred to an extended care facility, which I choose not to name. He was there for three days, and because of the very poor care he received there he ended up back at Crouse Hospital in the intensive care unit.

Now the fight began for a new facility. Not one nursing facility would accept my dad. Here was a man who had fought for his country, had spent most of his adult life doing for others, was Commissioner of Buildings and Grounds for the County of Onondaga, and they said that he needed too much care. The social worker handed me a list and stated, try to call some of these places, maybe you can beg them to take him. I did.

I called every nursing facility in Onondaga County. Not one person would

Seitz

mull this over, whether there could be a referendum on taxpayers as to whether or not they would be willing to support that. But to me it's an investment in the future. Thank you very much.

CHAIRMAN McMAHON: Thank you, Virginia. Michelle Seitz. Michelle, if you can give your organization and your address.

MICHELE SEITZ: My name is Michelle Seitz, and I'm a resident of the Eastwood area of Syracuse. I'm here because my dad was a patient at Van Duyn. He was a long time county employee and a veteran of World War II, and he spent most of his adult life helping people whenever he could.

In December of 2003 he fell at home and fractured his hip. He had surgery on the 26th of December, and then suffered a massive stroke. This was the second stroke that he had had. He was able to be cared for by my mom and the family at home prior to this. As time

Seitz

take him. They said they didn't have the chairs, they didn't have equipment to get him up. Granted he could not -- he was unable now to speak and he could not walk. But there were a lot of people that I've witnessed at Van Duyn that were in even worse condition than him. But nobody would take him. They said to us, if you know anybody or anybody that could do you a favor now is the time to call.

Mr. Pirro has been a lifetime friend of my dad's and had offered to help if there was anything he could do. So I put a call in to Nick Pirro. Someone screened him from Van Duyn and he was transferred there and remained there until his death in 2008. No one can know how frightening the situation was for my family. We were told he could be moved to a facility possibly one to two hours away. We are an extremely close family. So many questions arose. How often could we get there? What if there
Seitz/Langley

was an emergency? Would my dad think that we had abandoned him?

Van Duyn is our safety net. A place that will accept our most fragile and vulnerable people when everyone else says: Took too much care. Van Duyn is just not a geriatric population, there are young children there, there is middle aged people and older people that call Van Duyn their home. I would like to think that Van Duyn will continue to be county owned and be our safety net.

If you or I or a member of our family could no longer live at home I'm sure you would want your loved ones to remain in Onondaga County. Thank you for the opportunity to speak.

CHAIRMAN McMAHON: Thank you, Michelle. Susan Langley. Susan, if you can give us your organization and address please for the record.

SUSAN LANGLEY: Thank you for the opportunity to speak. My name is Susan Langley, I'm a writer, nothing to do

Langley

other people have mentioned that a private facility, if they do not make enough profit, what are they going to do down the road? Are they going to resell it? Are they going to close? It would break my heart.

I hate to tell you this because some people think I'm crazy, but I see Jimmy almost every night. I go up and have supper with him. I hold up two books and I say Jimmy, which book would you like to read tonight? And he'll go (made a motion). And then when I leave I say Jimmy, I says, will you give mom a kiss good night? And he pulls his head right over. He may not be able to speak like we can speak but he understands and he is no less a person than any of us here in this room.

One of the reasons that -- there is three people that I'd like to mention tonight. Because they kind of personify Van Duyn. One of them was the young man named Carl Ehrlick, who was a few doors down from Jimmy. And Carl had been in his car with his fiance. There was a car crash, Carl had thrown himself over his fiance, and he was severely handicapped and he saved her life and she was fine. Nobody went to visit Carl. And Carl had a voice just like a radio announcer. Whenever you went by, he'd say, hello like that. And the nurses, the staff, the aides would all go in. They were Carl's family. I hope I was a small part of Carl's family.

As Carl became very ill he got pneumonia. Who was around Carl's bed when Carl was dying? It was the supervisor, it was the CNAs, it was some of the visitors. They felt just as badly as if a member of their own family had died.

One of the other stories I would like to tell you is a few years ago there was a thing call the Berger Commission. And the Berger Commission's aims were to close as many hospitals and
of course nursing homes as possible. Nick Pirro's mother was one door down from Jimmy. This is on 3A, the floor 3A. So we had gotten acquainted, and Nick Pirro was just a super guy. My mother, even though Mrs. Pirro had had a stroke and couldn't talk very well, while I was taking care of Jimmy she'd go over and she'd say, she says Mrs. Pirro, her name was Camille, she says that Nick is the nicest son any mother ever had. Even though Camille couldn't understand perfectly, you know, she understood. While I was standing at this Berger Commission meeting and Nick Pirro was standing right next to me. And this little lady raised her hand. She looked to be about 80. She said for 50, 60 years, I forgot which, she said, I've seen my husband every day of my life. She says, he's in a nursing home in Oswego. I took the bus here to be -- to come to this meeting. She didn't say this because she wasn't allowed to speak at that meeting. She told people around her this, including myself and Nick Pirro. And she -- when she raised her hand to tell people this, that he was going to be moved two hours away, and at 80 years old with no transportation and only the bus she was afraid she would not be able to see him. And she raised her hand and they just said to her, no questions. That's why I appreciate you people so much. She says no questions, no questions are allowed here. And she started to cry. I'm telling you when I think about it it's still breaks my heart. There is one more person I'd like to tell you about up at Van Duyn who kind of personifies the spirit and the care at Van Duyn. His name is Bob. I met him when Jimmy was down at the clinic. Bob is a World War II vet. And we got to chatting. He was a pilot in World War II in the Pacific Theatre. Bob told me, and he's very proud of this, he told me that when he was flying he would have to spin and roll to avoid the flack. I would call them bullets, they called them flack. Okay, so twice he was shot down. Twice he parachuted out of his plane. And then he'll say, the first time he got out okay. The second time, and this was Bob's absolute climax of his whole point, he would roll up his pantleg and show off the bullet holes in his leg. There are many veterans like Bob at Van Duyn. Bob's favorite thing now is to go out on the Van Duyn's grounds. He's in a walker, and he faces the woods up at Van Duyn. And he saved up some bread crumbs and things. And if any of the squirrels and rabbits and foxes and deer come by he feeds them. But the point of all this is there is love. These people are still people. They are human people. They might not be able to walk and talk and act exactly like you or me. But they're inside the same people. After a while if you've seen, you know, like enough people there, they don't look like handicapped people to you, they don't look like the disabled, they don't look like Alzheimer's, all you see is the person inside. And in closing I'd just like to say, human beings and people like these, I don't think they should be privatized. Privatize everything else, privatize everything in the whole wide world, but please don't privatize human being. And I thank you very much. CHAIRMAN McMAHON: Thank you, Susan. Tom Law. If you could state your address for the record. TOM LAW: Thank you 135 Pulaski Street, Apartment 2. 35 years here. I'm sure Mark Stanczycyk can solve this whole thing as a minority person here, he has to think hard. He's a finance person. I'm joking, you know a little
Law

bit with this. But I'm from his old neighborhood so we talk to each other a little bit.

First of all, I have a copy here for you Mr. Chairman and for the clerk each of you, from the Catholic Worker Community. You have this with the title to it but it gets at, it's a pretty unique document. It took about four years to create, of discernment in personalism. Christian personalism. It's been called a pretty unique document by other Catholic workers and workers in the vein of Dorothy Day, in the dignity of the person, and care-given bureaucratic systems. It's addressed in here pretty thoroughly as far as morality of preserving dignity of the aged, of the infirm, of the vulnerable. And I really think it's a foundational type document that's uniquely available here because of this local process. So it may seem like a lot to get through because it's about 20 pages, but I'll tell you if it were used as a guiding document going forward to help preserve the thoughtful dignity of caregivers and of institutional care it probably could be a reference for the next hundred years. I'm very serious about that. Because it has some very deep statements of the issues, the challenge and preserving the dignity, human dignity. So that's a gift to the Legislature and to the whole community. I really would hope it could be shared, copies made and it could be shared.

CHAIRMAN McMATHON: We'll put it in the minutes.

(Added to end of transcript).

TOM LAW: My own comments to start with this, to this kind and dignified body I put it that way; dignified body. Some folks have limited, the following things limited, means faculties, health and family members alive and available. Limited. Limited by small things, maybe old age health to get in and out of bed.

Law

even such as that.

This deserves a pro and con list I would say, and are in simplest terms to make a decision like this. And I would think it needs an appendix, financial appendix that supports the financial conclusion. So I'm saying like the old Abraham system, Lincoln system, you know, line down the middle of the sheet, pro let's do this, these are the advantages; con let's not do this because it's got too much disadvantages, and linked up with the finances, you know for the weight of the taxpayers money, as a taxpayer decision.

But going in the creative direction I would say this. My family has been in insurance for, since 1954, '55 my father, so what's that 45, 57 years, my brothers, Mass Mutual's general agent now the last five years or so, about a hundred employees, the largest life and a health - a plug here, not a plug, a fact.

Law

So where I'm going with this, insurance is about sharing risks and pooling resources and covering those who are needy at that time in that two years for that incident, that hospital stay, and you know, going forward long term care. I don't see why in a county that's already self insured, an arrangement of an insurance type nature with some type of surcharges, some type of annuity. I mean people who die here could say, well, we have the Onondaga County Elderly Plan, I'll give them some stock. You know when I die I'll give them a life annuity, before I die, give a third of my assets and it will pay me $400 a month. And the annuity will go on after I'm gone to provide the health care for the elderly in the county.

So I think what I'm saying here is there is an outreach potential here that's not only general but also selective. Doesn't have to be everybody being taxed although that does make some
Law

sense. I mean maybe it could be partly funded by that. But I'm going at the greater financial solution. And that would be a creative annuity situation. Also we have a strong history in Tarky Lombardi here of taking care of people in their homes. A lot of you probably know the history of that, that he proposed in about 1972 or so, maybe '74, home health aides. And we became a national model I think through his initiative and whoever was feeding him and helping him support it. So we already have a pretty substantial tradition in terms of Van Duyn, its own history locally. And Tarky Lombardi's attempt to keep elderly in familiar territory here, people, neighbors, church they know, street they know, rooms they know, gardens they know. Those are some pretty good substantial starters. But the goal I would say is not to abandon the elderly even to career

Law

oriented professionals. Without the career oriented professionals being named as graceful, quote graceful, familial surrogates. That I would say is our ideal. That people taking care of our elders be graceful familial surrogates. I think we can all see eye to eye with that, you know, with that as a starting model, as a statement. As far as blindly accepting a proposal without having a board of visitors, say appointed, that follows this through and monitors some baseline of care. That wouldn't be a bad idea either, I think that's the way a lot of small county supervisors work, like, you know, let's go visit this place, you know. So maybe not as a group, maybe a little more clandestine, like let's just stop in on the fly. You know, like foresight accordingly but I'm saying just so you know on the ground of what's happening, you know, reality check. What else can I say? Our nursing

Law

home situation grew, I mean if you look at the story of Father Fahey, our nursing home situation nationally grew through the availability of dollars. So that high-rises, maybe like Van Duyn in some sense about its age, high-rises, large elderly care centers were you might say bulkified because the dollar flow became there. Well, this is a way to deal with it. And we've got families moving away, the elderly need care and the families aren't available, you know. Let's get them together. You know, group it up. So we don't, in that model you know was a little bit profit driven at its end. It started maybe in the '70s but I think by about 1990 there was, shall we say, a somewhat wanting looking at how many dollars per month can we charge, you know. Is it 1,700, is it 2,100, is it 1,395? You know, what can we charge per month, you know. So that's not the basis of an ideal system I think

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necessarily. You know, how much money can be charged. So there is also driving this a legal harvest, in that people try to protect their assets when they go into the nursing home. So the question becomes from a moral standpoint about means testing. Some people are fragile, some people have small families. Some people have low assets. Some people even have negative assets. I mean they might even, their house you know, maybe they've already taken out, they come to 83 and they've already taken out all the reverse mortgage. So you know, they can't even pay for their pharmaceutical drugs anymore. Well, do they need Van Duyn more than -- more this year than somebody who is worth, you know $189,000 but it's off the books? Now there is a moral question for you. But it raises means testing. And I don't think that's a false question as far as means testing,
Law

...and stringing people out into the system that they can afford, you know, and where they can afford it. What else? Well, general welfare is a question of government and faith in government. If we're going to have an attractive government here we probably want our faith in government as a part of the quotient for the quality of local life to be seen as, yeah, our local government, not national government, it's local government. And they do a lot of good stuff here. They do a lot of good things, they do a lot of good services, they take care of business. They watch taking care of people so people feel like they belong here, they feel good being here, they feel there is a future here. They get a look around, they can breathe and say hello.

CHAIRMAN McMAHON: Mr. Law, if you can wrap it up please.

TOM LAW: Yes, thank you. Finally just that some people aren't independent.

Goodwin

...maybe everybody is who is a Legislator here is independent in a lot of ways with their health and with their earnings. But there are people who become dependent. And that's not bad. Weakness can show, point to the dignity in the Christian person. Weakness can maybe show the glory of God. That's maybe not a bad thing, the glory of God.

CHAIRMAN McMAHON: Thank you, Mr. Law. Patrick Goodwin. And if we can have your organization and address for the record please.

PATRICK GOODWIN: I'm a nurse through a local agency, I live at 3 Wilson Drive, East Syracuse, New York, I'm a taxpaying citizen. I worked at Van Duyn for a year and-a-half. So I know the skeletons in the closet. I also know the fact when I first started there we were told in the meeting that the place was losing $3 million a year. They implemented electronic records. And that was supposed to save close to 2 million.

Goodwin

...I resigned from the facility due to things I'd rather not discuss here today. And I read in the newspaper they were still losing $2 million. So as a county taxpayer I would like to know why. Especially when the administrator who's running the organization said that was the cure-all.

There is a lot of fine people that work up there. After I graduated from school in 2008 I gained quite a bit of experience after leaving the nursing home on the east end. I hate to see these individuals lose their jobs but I don't like to see my taxes go up either. So what is the solution here?

I elected you folks to make that decision. Look into it to see how you value life. As a nurse I have to be their advocate. I was their advocate when I worked there. It cost me, but I can look back and I'm proud of what I did there. I'm not proud of what happened but that's for another day.

And all I can say is that we can't go ahead and look at this in dollars and cents. There are human lives at stake here. There is a lot of folks there when I worked as a nurse weren't happy with the facility. And they told me this. I went ahead and advocated for them because that's what a nurse does. It's great that a lot of folks did have wonderful care, because like I said, there is probably 98 percent of the people that work there are there for the residents.

Okay, I also worked short staff there. And we were supposed to, under the mandate of Medicaid and Medicare have the proper staffing. I worked shorthanded. So these are things that those individuals do as employees, they suck it up.

So what can we do as taxpayers? When I heard the woman say there was only 70 to $80, I'm willing to suck it up.
Goodwin

up. Thank you.

CHAIRMAN McMAHON: Thank you

Patrick, is there anyone here that wants
to speak and have not signed up? Anyone
else here that would like to address
this body? Hearing that, Mr. Kilmartin?

LEGISLATOR KILPATRICK: Mr. Chairman,
I move that the meeting be adjourned.

CHAIRMAN McMAHON: Public hearing is
adjourned.

[Conclusion of Public Hearing].

* * *

CERTIFICATE

This is to certify that I am a
Certified Shorthand Reporter and Notary
Public in and for the State of New York,
that I attended and reported the above
entitled proceedings, that I have
compared the foregoing with my original
minutes taken therein and that it is a
true and correct transcript thereof and
all of the proceedings had therein.

[Signature]

Dated: December 3, 2012