

## HEALTH AND SERVICES COMMITTEE

### OF THE

## SUFFOLK COUNTY LEGISLATURE

### *Minutes*

A regular meeting of the Health and Human Services Committee of the Suffolk County Legislature was held in the Rose Y. Caracappa Legislative Auditorium of the William H. Rogers Legislature Building, 725 Veterans Memorial Highway, Smithtown, New York on Thursday, June 17, 2010 at 2:00 p.m.

#### **MEMBERS PRESENT:**

Legislator Kate Browning, Chairperson  
Legislator Vioria Fisher, Vice-Chair  
Legislator John Kennedy  
Legislator Jack Eddington  
Legislator Tom Muratore

#### **ALSO IN ATTENDANCE:**

Presiding Officer Bill Lindsay, Legislative District No. 8  
Legislator Tom Barraga, Legislative District No. 11  
George Nolan, Counsel to the Legislature  
Tim Laube, Clerk of the Legislature  
Dr. James Tomarken, Commissioner, SC Department of Health Service  
Len Marchese, SC Department of Health Services  
Greg Blass, Commissioner, SC Department of Social Services  
Ed Hernandez, Deputy Commissioner, SC Department of Social Services  
Linda O'Donohoe, SC Department of Social Services  
Dominick Ninivaggi, SC Department of Public Works  
Scott Campbell, Vector Control  
Eric Naughton, Budget Office  
Ken Crannell, County Executive's Office  
Josh Slaughter, Aide to Legislator Browning  
Ali Nazir, Aide to Legislator Kennedy  
Ben Zwirn, County Executive's Office  
Diane Dono, Budget Review Office  
Craig Freas, Budget Review Office  
Paul Perillie, Aide to Majority Caucus  
James LaCarruba, Representing NYS Senator Brian X Foley  
Dorothy Kerrigan, AME  
Kathleen Reeves, John J. Foley Skilled Nursing Facility  
Linda Ogno, John J. Foley Skilled Nursing Facility  
Christopher Ogno, John J. Foley Skilled Nursing Facility  
Dom Ogno, John J. Foley Skilled Nursing Facility  
Maria Prepscius, John J. Foley Skilled Nursing Facility  
Peter Mastando, John J. Foley Skilled Nursing Facility  
Michael Sheehan, John J. Foley Skilled Nursing Facility  
Thomas Dean, John J. Foley Skilled Nursing Facility

Mary Fredette, John J. Foley Skilled Nursing Facility  
Nanci Dallaire, John J. Foley Skilled Nursing Facility  
Linda Chester, John J. Foley Skilled Nursing Facility  
Pat Rollings, John J. Foley Skilled Nursing Facility  
Chris Destio, John J. Foley Skilled Nursing Facility  
Other Interested Parties

**MINUTES TAKEN BY:**

Lucia Braaten, Court Stenographer

**MINUTES TRANSCRIBED BY:**

Lucia Braaten, Court Stenographer  
Kim Castiglione, Legislative Secretary

**[THE MEETING WAS CALLED TO ORDER AT 2:33 P.M.]**

*(The following was transcribed by Kim Castiglione, Legislative Secretary)*

**CHAIRPERSON BROWNING:**

Good afternoon. We will start the Health and Human Services Committee. We'll start with the Pledge of Allegiance, led by Legislator Viloría-Fisher.

***(Salutation)***

Okay. What I would like to do, I believe Dominick Ninivaggi is here. Before -- I just kind of wanted to get like a quick five, ten-minute brief from you. The summer season is coming and I know my District and many of the Legislators' Districts the question is going to be is mosquitoes. And so I would appreciate if you could -- and I believe we have Scott Campbell also; correct? You know, just a quick -- you know, what you've been doing over the winter and how you foresee this summer going to be. Because I can tell you, I got in my car not too long ago and a monster size mosquito already in my car, so we've got a lot of them by me, so I think we'd like to know --

**D.P.O. VILORIA-FISHER:**

We had a wet spring. We had a wet spring.

**CHAIRPERSON BROWNING:**

Yeah. What you think this season -- you know, we had a lot of rain this year, and how you see this year going.

**MR. NINIVAGGI:**

Okay. I think Scott Campbell can talk a little bit about the surveillance results of the season so far, so I'll turn that over to him.

**MR. CAMPBELL:**

Well, so far, we're only into the season for about five weeks or so, and we've compared this year to last and some of the years past, and we found that the total mosquito numbers are up about 60%. That's the bad news, but there is a silver lining. And currently, the mosquitoes that are involved in the cycles of the West Nile Virus and the Eastern Equine Encephalitis viruses, those appear to be the same as last year. So the increase is mainly due to the mosquitoes that have responded to the wet spring that we've had and which aren't the species that are involved in -- necessarily in the virus cycles. It is important, obviously, that as the season progresses, that any standing water that is out there needs to be gotten rid of, because the West Nile mosquitoes breed in containers and standing water. So they -- they may increase as the season progresses. So that's the quick of the mosquito numbers.

**CHAIRPERSON BROWNING:**

Dominick?

**MR. NINIVAGGI:**

Yeah. And as far as the control program goes, we've been continuing with our basic activities over the winter in terms of clearing out drainage ways, access to breeding sites, such as recharge basins. We did some wetlands management work in cooperation with the State DEC this past winter where there were a couple of marshes, one in Bayport and one in East Patchogue, that were -- they recognized had very poor tidal circulation, and we worked with them to open those marshes up, which should be beneficial, both from a mosquito control point of view and a natural resources point of view. We have our field crews right now, we're responding to service requests and going to the usual known larval sites. So we're continuing with our program, our preventive program.

In addition, we've been working closely with DEC on improving some of our procedures for control of adult mosquitoes. In particular, we've got a new protocol in for response to virus under a -- in the

past, we would declare basically an emergency if we had to treat for virus and there were wetlands involved. We now actually have a permit in place with pre-filed maps and pre-filed procedures. So, if we find virus in the places that we have found it in the past, we'll be able to respond a lot more quickly, and everybody knows exactly what's going to happen under a given set of circumstances. So that's a big improvement in terms of coordination among the agencies.

In the area in Southern Brookhaven, in -- Legislator Browning, in your District, DEC also recognized that that's a particularly difficult mosquito situation because of the breeding within the community, and also the influx from Fire Island National Seashore. And we now have a procedure where, if the infestations get particularly bad, even if we're not detecting virus, we can treat closer to wetlands. And I know that there are parts of the community, particularly in East Patchogue and the southern parts of Mastic Beach, where residents would get very frustrated because they actually lived either very near or in wetlands, and those were the most infested areas, but we weren't allowed to treat those for adult mosquitoes. Under the new procedures, we will be able to treat most of those areas. So we work with DEC to develop some good compromises as far as treating areas that need to be treated, while still, you know, protecting the wetlands as necessary.

So, we're going into the season, you know, as well as can be expected, but I think everybody needs to keep in mind it is very weather related. And one of the things that we know is that temperature seems to have a lot more to do with how much virus activity you see than necessarily things like rain. So the only thing we can do is keep an eye out and be prepared to respond.

**CHAIRPERSON BROWNING:**

Thank you. Does anyone have any questions? Mosquito questions, no? My God. Well, I'm glad to hear that you're actually getting more DEC approval, because I know there's some people here in the audience today that live in my District in the Mastic/Mastic Beach area. And, you know, do you -- because I know you do helicopter spray. How often do you do the truck spraying? I mean, is that based on complaints, or is that just you pick certain times?

**MR. NINIVAGGI:**

Well, we take into account, you know, service requests. We don't like to say "complaints", we like to say "service requests". Are --

**CHAIRPERSON BROWNING:**

It's a complaint.

*(Laughter)*

**MR. NINIVAGGI:**

They're part of our surveillance in that they help tell us, you know, if -- I mean, we have, obviously, our traps out and our crews out looking for larvae, looking for adult mosquitoes, but, obvious -- but the service requests from the public are also a tool for us to determine, you know, how well we're doing, and are there areas we're missing.

In that particular area, very often it's the salt marsh mosquitoes that start to generate a lot of the service calls, and we use that. We combine that with the surveillance, with the trap numbers. And, under this new permit procedure, if they reach the threshold that's set in our long-term plan, we can treat up to four times close to these wetlands by truck, and up to twice by air, more if there's virus. And we think that that should be sufficient, because what we're hoping now with the new procedures in place, we'll be able to treat more of the areas and not leave any places for the mosquitoes to hide, so we should be more effective. So it will be interesting to see how well that works when we actually get down to it, but, if we get a particularly severe infestation now, we won't have to wait to find virus, we would be able to treat by air.

**CHAIRPERSON BROWNING:**

Okay. And one last question as far as notification, because I know I have a couple of constituents in

Mastic Beach that say they don't want to get sprayed, and then I have probably the majority of the people in Mastic Beach that say, "We want spray." What kind of notification -- I mean, how do we let them know when you're coming around to spray, so that they can take precautions if they wanted to?

**MR. NINIVAGGI:**

Well, have the County Spray Notification Law and we try to get that out in the media as much as we can, in addition to the web pages. For people who are on our no-spray list, if we don't have virus in the area, we avoid them from about 150 feet out. If there's virus and we have to treat them, or if there's an aerial application, what I do is, even though it's not required by law, I will call them the day before to let them know.

**CHAIRPERSON BROWNING:**

Okay. Thank you.

**MR. NINIVAGGI:**

So we try to do the notification as best we can, but it's always a sore point, because, as things have gotten more boring in the virus front, it's hard to get the media to pick up, and it's very difficult to get word out to a lot of people in a short notice without using the media.

**CHAIRPERSON BROWNING:**

Okay. Thank you. Anyone have any questions? Well, I appreciate it. I know, Dominick, you know, we're a thorn in your side in the summertime, but we appreciate what you do for us.

**MR. NINIVAGGI:**

Well, you're also the reason for our existence, so I have to thank you for that.

**CHAIRPERSON BROWNING:**

Oh, okay. Thank you.

**MR. CAMPBELL:**

Thanks.

**CHAIRPERSON BROWNING:**

We will -- we do have a presentation on John -- for John J. Foley, however, we are going to do public portion first. And we do have -- James LaCarrubba is here from Senator Foley's Office, so I know you have somewhere to go afterwards, so if you'd like to come up and speak first. Hold the button.

**MR. LA CARRUBBA:**

Hold the button, oh, while I'm talking, okay. Good afternoon. Thank you for the opportunity to come and speak on the Senator's behalf. It's a brief statement that I'd like to have read into the record, and then I will leave copies for the permanent record. And I'll be reading it in the Senator's voice, so just so that's clear.

*(Laughter)*

**CHAIRPERSON BROWNING:**

Is it possible?

**MR. LA CARRUBBA:**

Do my best. "Chairwoman Browning, Vice Chairperson Viloría-Fisher and Members of the Committee, thank you for the opportunity to have this statement read into the record on my behalf. I wish that I could be here myself, but I am in Albany working on State matters.

For the record, my name is Brian X. Foley. I am New York State Senator, representing the Third Senatorial District of the State of New York. I write to offer my comments and concerns regarding

resolutions that are before this committee today that would dramatically affect the residents of Suffolk County. These resolutions are about the sale of the John J. Foley Skilled Nursing Facility in Yaphank.

The John J. Foley Skilled Nursing Facility provides some of the highest quality care on Long Island. This high level of care is due in large part to the dedicated staff of County employees who care for our residents and become part of their everyday life. These employees have sacrificed a great deal to see the success of this facility grow, and they are proud of their accomplishments. It is because of their selfless dedication and hard work that my family and I are proud to have the facility named after our father. Selling this facility would certainly impact the quality of care provided, and most definitely do a disservice to the man it was named after.

One of the main reasons the John J. Foley Skilled Nursing Facility is so successful is because of government oversight, and privatization will definitely diminish the quality of life currently enjoyed by its residents. I was recently made aware that there was a waiting list for this facility, which, once again, highlights the quality of care that has remained a constant and the reputation the facility rightfully earns. Additionally, changes in administration at the facility has led to increased savings for the County, which cannot be overlooked.

When this facility was first scrutinized, cost was the prime target. The Legislature correctly addressed the issue, making changes at the top by bringing in a quality Administrator, and millions of dollars have been saved as a result.

In closing, I want to again thank the Committee for the opportunity to be heard on this matter. I urge all of you to look at the dedication of staff, the quality of care, and the wonderful reputation that the John J. Foley Skilled Nursing Facility has before making a decision to allow these resolutions out of committee. These are trying times for all levels of government, but there are better ways to achieve savings. All of us have a responsibility as elected officials to take care of their constituents we represent in the best possible with way we can. Selling this facility will do a disservice to the people we swore to take care of.

If there is still a consideration to move forward, please, at the very least, honor the Presiding Officer's desire to have the property reappraised before anything is considered. I urge you to reject these resolutions, not just for my family, but for the families of the employees, and, most importantly, for the present and future families who rely on this outstanding facility. Thank you.

*(Applause)*

**CHAIRPERSON BROWNING:**

Thank you. The next speaker, Kathleen Reeves.

**MS. REEVES:**

Good afternoon, when I came here this afternoon, I really wasn't planning on speaking, but --

**P.O. LINDSAY:**

You have to hold the button.

**MS. REEVES:**

I am pressing.

**AUDIENCE MEMBER:**

You have to hold it down.

**MS. REEVES:**

I am holding.

**MS. KERRIGAN:**

Lean a little closer to the microphone.

**MS. REEVES:**

Okay. When we spoke to -- were speaking to some of the Legislators, one of the Legislators told us we need to put a face on John -- on the people of John J. Foley. There's 264 faces and 264 stories of people that are there, some as far away as the City, some as far away as Westchester. And they're not at John J. Foley because it's close to home, they're at John J. Foley because nursing homes between here and where they live wouldn't take them, for whatever reason. Some of them because they had no funds, some because they're behavior problems.

We got an admission yesterday. A resident was in another nursing home, and there was a behavior problem, was sent out to the hospital and they wouldn't take him back. And this is what happens in the private sector, they don't want somebody, they send them out to the hospital and they don't take them back. At John J. Foley, we don't do that. We also take Medicaid-pending, which most private facilities won't take. Yes, it takes time, but they do pay back -- they go back three months and -- as far as that, you know, as far as the financial end, because I know that's a big thing. Everything's financial nowadays down to the penny, but John J. Foley has 264 stories and 264 faces.

We have young people there that are under 30 years old that a lot of the nursing homes won't take because their minimum age is 55. We have smokers, a lot of -- we have very set times and rules that the residents have to go by that they adhere to. A lot of the nursing homes won't take smokers. And if John J. Foley is sold and taken over by a private enterprise, a good deal of our residents will wind up in the hospital and then on the street, just like they did with Pilgrim and Kings Park and the mental facilities, because the private facilities will not take them, and this is a fact, and we've been taking them for years.

And, truthfully, what I would like to see is that the Legislature eventually pass some kind of law, or however, that John J. Foley stays a County facility forever. It's been one for over 100 years, it should stay that way. Thank you.

*(Applause)*

**CHAIRPERSON BROWNING:**

Thank you, Kathleen. Next is Dominick Ogno.

**MR. OGNO:**

Which Ogno?

**MR. OGNO:**

Which Ogno?

**AUDIENCE MEMBER:**

Dominick.

**MR. OGNO:**

Hello. Thank you for letting me speak again. My name is Dominick Ogno and I've been a County resident my whole life here in Suffolk County. I've been a volunteer for over 15 years at John J. Foley. I'd like to say this is the only nursing home which takes care of like young people like me, people that come into car accidents and stuff like that. And what our people do, no other nursing home would do it. Just like she said, they wouldn't even take you if your, you know, average age is 55. In our place, I would say a majority of them are under the age of 55. So where would our people go? That is the question.

I could have been anything, I could have done anything I wanted to do. To work for Suffolk County and John J. Foley was a big opportunity for me, for where my mother would work, too -- where my

mother worked, too. It has helped me a lot, especially being a volunteer there and not taking life for granted, and stuff like that. Maybe that's why I have matured, only being 23, fast.

I'm at like a loss for words because I don't understand how you can have a public portion before the presentation, because I was really just going to go at whatever they said. But, considering you didn't give us the ammunition to do that, I just think it's a little absurd, a little shallow and pedantic. So, Mr. Levy, I hope, you know, makes the right decision by leaving John J. Foley alone. Thank you.

*(Applause)*

**CHAIRPERSON BROWNING:**

Okay. Usually, we do public portion before presentations, and I know there are a lot of John J. Foley workers here. I'm more than happy to suspend where we are, let the presentation happen and let you come speak. However, this is not over. They are coming, they're doing their presentation. It gives you an opportunity. You will have plenty times to come back. Mr. Rozenberg, I believe, will be here next Tuesday after the Public Hearing. Our Public Hearings are 2:30 next Tuesday.

**P.O. LINDSAY:**

No, 11:30.

**CHAIRPERSON BROWNING:**

Oh, he'll be here at 11:30. You are all more than welcome to come and hear what he's got to say.

**MR. SLAUGHTER:**

Riverhead.

**CHAIRPERSON BROWNING:**

Riverhead? See, I have it all wrong. I think it's in my calendar for Hauppauge. But, anyway, you know, I can let them do the presentation, but, believe me, you know, listen to what they have to say, and you -- I know you come all the time. You're more than welcome to continue to keep coming back. So does -- do we have the consensus? I mean, what do we want to do here?

**D.P.O. VILORIA-FISHER:**

That's fine with me.

**LEG. BARRAGA:**

I'm not a member of your committee, I'm just here as a guest.

**CHAIRPERSON BROWNING:**

Oh, you're not?

**LEG. BARRAGA:**

No.

**CHAIRPERSON BROWNING:**

Oh, okay. You want the presentation first?

**LEG. EDDINGTON:**

Whatever you want to do.

**CHAIRPERSON BROWNING:**

Okay. Well, if -- Mr. Crannell, if you'd like to come up and do the presentation.

**MR. CRANNELL:**

Thanks, Legislator Browning, and Members of the Committee. I really want to begin by saying that policy-makers in counties all over the State are grappling with the future of their County-operated

nursing homes. This discussion, the type of proposal that we're talking to you about today, is not unique to Suffolk County. Over the last ten years, six Counties have closed or substantially downsized their facilities and two others have successfully privatized their operation as the County Executive has proposed in his -- as represented in I.R. 1474.

Currently, in addition to Suffolk, there are five counties in the process of soliciting requests for proposals to sell their nursing home licenses, or are planning to get out of the nursing home business altogether. In fact, since we've been public with our proposal and laid our plan on the table, we've gotten countless calls from counties looking for our RFP so they can see if they can replicate what we're doing here today. These counties -- these policy-makers at the local level did not reach these decisions easily. All of the counties that I've listed and the counties -- with those counties, they realized that these homes aren't sustainable at the local level. When you look at the loss of State Aid, you look how -- public nursing homes, they operate as a government. Complicated contracting and procurement policies, inflexible employee work rules, it's not suitable to a 24/7 health care facility. And the fact that -- you know, it's indisputable. Public employees in this sector are generally paid more than those performing the same exact job in nursing homes operating in the private sector.

I didn't notice in Senator Foley's comments the fact that New York State has been encouraging counties to get out of this business. In fact, in the Governor's Executive Budget this year, the State Assembly supported it, there's a proposal to encourage counties to actually close their homes or substantially downsize the bed count and provide financial incentives. We remember the HEAL grants. I mean, that's an example where the State was providing financial incentives to get counties out of the business. In fact, we had an application for 20 million dollars that this Legislature rejected to close the home. The proposal on the table today is very different. This isn't a proposal to close the home, this is a proposal that provides the County with substantial fiscal relief, yet keeps the nursing home open to serve these patients.

In 2010, Suffolk County budgeted gross expenditures of 35 million for the County Nursing Home to provide only 264 beds. On a net County subsidy basis, we pay approximately eight to ten million dollars to serve this very small population.

You know, before I ask some of my colleagues at the table to share some of the very specifics about this plan, I wanted to frame the discussion in this way. You know, even outside the context of the County's budget shortfall and our desire to close that, the basic cost benefit analysis of our current service delivery model, compared to the benefits offered by the plan that's on this table, a plan that ensures the delivery of service to our current patients, provides continued employment for the employees of the facility with absolutely no taxpayer subsidy, and over 16 million in net fiscal benefit over five years, we believe it can't be ignored.

And with that, I'm going to ask Len Marchese from the Health Department to go over some of the specifics of the plan.

**MR. MARCHESE:**

All right. Thank you. I guess I've been up here a few times talking about this over the last few months -- actually, a few years we've been going through the process, but I'm going to repeat it again and just kind of go through it in general terms.

Ken Rozenberg was selected in a standard RFP process that we -- that we, as a County undertook, and it took us a long time to go through this process. The Legislature was part of the evaluation committee, via the Presiding Officer. We prescreened vendors, and then we ultimately selected what we felt was the highest qualified vendor for the County that provided the best for both the patients, the County, and the employees, in fact. Under the plan, the facility will continue to operate.

Previously, in the -- I guess the previous budget, there was a proposal that was actually going to close the facility and just take the benefit of the savings resulting from the closure. However, this plan calls for a 36 million dollars in net proceeds as a result of the sale. And then, you know, Eric will go through the details of how we get to the net amount. The gross amount was 36 million. However, the facility would continue to operate as a skilled nursing facility. All 264 beds, and the adult day care program would continue as is.

Just wanted to just take a quick note. There was some discrepancy over whether or not we had a full adult day care program or not, and meaning that was it less slots or more, but that was all cleared up. So we do have a full 60-slot adult day care program that's going to go as part of this, and the 12 AIDS beds, as well as the regular facility beds. So that whole issue has been cleared up.

One of the other items that have been coming up often is that the land, or something, that we're giving more land, or we're giving away a lot more. What we did here is we wanted to show you a footprint of the proposed sale, and the left side shows it's part of the larger complex of Yaphank. The right picture is really the Foley zoomed in on a little bit. And what we did was we took the smallest possible lines we could with the existing parking lot and we developed a lot that would include the facility and existing parking lot. The flag that you see extending out to Yaphank Avenue was required, because, otherwise, if we just made a square, the facility would be landlocked. So, in order to have them to have potential access to a road, we needed to include the -- that little flag portion of the lot. But, in total, it's 14 acres, which is basically the minimum size that we could include as part of this package.

Again, I started to say that Ken Rozenberg is the vendor. And, as Legislator Browning indicated, he'll be available to answer questions at the full Legislature on Tuesday. So I know there's questions about care and all of that, and those are valid questions and I think they need to be addressed, and he'll be available on Tuesday to speak to the full body.

Let me just give you a couple of points regarding the residents. The existing residents will all stay in their home -- in their beds. The State -- the way the State handles nursing homes, it's a very highly regulated industry, and even if a vendor wanted to discharge patients, they really can't. There's very strict rules with regard to the patients. When they -- when they're admitted, there's a discharge plan. So, before they even come into the facility, we know that patient's disposition. And the facility has to run in accordance with State regulations. And it's not only us, it's any nursing home purchaser would have to follow that.

I just -- the one thing I wanted to get clear with the patients, and I guess -- I'm not sure if it's very clear or not, but we hear a lot about we're the last resort or there's a waiting list. There's not a waiting list. You know, quite frankly, I'm charged with running this facility today, and if there was a waiting list, my job would be easier today to run it, because we're trying to fill the beds every day. And right now, we're running with about 12 beds vacant, and they've been vacant for a while, and our adult day care program has a lot of vacant slots. So the fact that there's waiting lists, I would like to know where those waiting lists are, because we don't have waiting lists, and that's pretty much from the person who runs the place.

The other point that I wanted to make out -- point out was the admissions process. When we evaluate a patient when they come into the facility, we evaluate them for payer source, applicability to our home. We don't accept every patient, that's not true. When we -- when a patient comes into the facility, there's an extensive evaluation that's done. Do they meet our financial criteria? Do they meet our care criteria? And if they don't meet it, they don't come into our facility, there's other facilities that they would go to. So our place is, although we're looking for beds, they have to be appropriate, and we do want a payer source.

And just let me talk about the payer source for a minute. A payer source, there's really no reason that us, unlike any other facility in the County, wouldn't take a patient, because you either qualify for Medicaid or you have money to pay private pay. There's really no instance where you wouldn't

have one or the other, because if you're truly poor, you would be covered and you would be allowed -- you would be covered by Medicaid and we would accept it. The nursing homes in Suffolk County live off of Medicaid. It's not some, you know, un -- you know, a payer source that's frowned upon by the private sector. The private sector likes receiving Medicaid, it's good money. It's a guaranteed check every two weeks or every month, whenever they claim. So it's a very good source of revenue for us, as well as the private sector.

Let's just talk about a second the employees. The employees that would be transferred under this plan, the process would be, if we sold the -- sold the facility, the contract provides that the owner would offer a Right of First Refusal to the employees. So as -- you know, a lot of the employees would have fallback rights because of Civil Service rules and regulations back into County employment. So, those employees that fell under that category, obviously, would have a choice. They can come back to County employment, or, if they wanted to continue staying to work for the facility, they can terminate their employment with the County and then be hired by the new buyer. But those that didn't have rights back, the contract provides for money to be -- money to be put into an account for the employees, so that on day one, they have two weeks vacation pay, as well as the owner does need these employees on day one to continue to operate the facility. As it's been said, and it's -- you know, it's true that these patients need to have the care every minute of every day. So, on the closing date, the same -- if not the same employees, there will be employees there in place to take care of those residents right at the day of the close.

The care and conditions under private ownership, there'll be a lot of talk about that, and I think those questions would probably be better answered by Mr. Rozenberg. But all nursing homes are surveyed by the State regularly. There's a detailed survey, and what they do is they come in and they exam patient charts, incident reports, etcetera, and that details -- those result in a survey, and the State can fine you or not, based on how well you do, and they're very strict in these regulations. In fact, the County, unfortunately, has been on the other side of some of these violations in some issues as well. So, we, too, are subject to those and we've gotten fined in the past for violations of State regulations. So it's something that you have to work through, but the State does monitor the care of the patients very closely. And I'll let Mr. Rozenberg speak a lot of that on Tuesday.

And the other thing was, I just wanted to, again, make it clear that we are selling the adult day care slots at the full value, and the original financial projections that came over had to be -- were really like -- we would clarify that they had some provisions in there for reduced slots in case we weren't able to deliver them, but the fact is that we are able to deliver them, so those provisions we would have that much extra revenue. So I'll leave it at that.

**D.P.O. VILORIA-FISHER:**

Thank you, Len.

**MR. NAUGHTON:**

Hello. Eric Naughton, Budget Director. I'm going to talk a little bit about the fiscal benefit from the sale. Despite making a number of changes to improve the operations at the nursing home, the facility continues to operate at a deficit. Our 2009 operating deficit is estimated to be approximately 8.1 million dollars as per our financial statements. To put that into perspective, that represents roughly 17% of the General Fund tax levy.

When we look at the major problem there, obviously the number one issue is the cost of staff there. Our employees make more than the private sector employees. Their contractual increases increase faster than the rate of reimbursement for Medicaid and that's a major problem.

We foresee that the numbers in the future are going to get much worse. For instance, you take a look at what's happening with our pension costs. Just at Foley alone our pension bill is increasing from \$900,000 this year to 2.1 million dollars next year, so that's a major increase. Plus any raises that the employees get we're not going to get fully reimbursed for that. So we see that our costs are growing by probably to 8.4 million dollar deficit next year to probably roughly 10 million dollars

by 2016. Clearly this is not something that we can afford based off of what's happening right now with the economy; we cannot afford it.

A chart has just been put up. I don't think you can -- I'm not sure you can read it.

**D.P.O. VILORIA-FISHER:**

Bring it closer to the middle; we can't see any of it.

**CHAIRPERSON BROWNING:**

Keep coming.

**D.P.O. VILORIA-FISHER:**

We're old. That's much better.

**MR. NOLAN:**

To the left. No, just kidding.

**MR. NAUGHTON:**

Do you have a pointer? Okay. Just looking at what's happening here with the deal. The sale price is 36 million dollars. We expect that if we close by December of next year, we receive 36 million dollars. We will have to set aside roughly 16 million dollars for our outstanding debt, which gives us a net benefit of 20 million dollars for the 2011 budget.

As you're aware, we've talked -- we know we have a deficit projected of roughly 150 million dollars. This is a key component of the County Exec's fiscal plan. We recognize that this is just a one time benefit, but the great thing about this proposal is it provides recurring savings to the County, and that can't be stressed more than I don't know how. It's very important that we have structural changes, you know, either recurring revenue or if we can find ways to reduce expenses, I think that is key to solve this fiscal mess that we're in right now.

If you take now a look at 2012, we realize that there's a budget impact from the sale in terms of starting to collect down from some of the receivables. On the financial statements you would not see that as a benefit, but budgetarily because we budget more on a cash basis when we close and we start drawing, collecting and receivables, that money starts to trickle in. So that's about a 5.59 million dollar benefit in 2012.

Out of that in the contract we've set aside, as Len has stated, roughly \$300,000 for vacation pay for the employees. This way the first year, even though they don't have any time on the books with Mr. Rozenberg, they'll be able to take time off and get paid for it. That was very important to the County and to Mr. Rozenberg.

In addition, the employees, as they separate from the County, we owe them their accruals for vacation pay and for those people who actually retire, also some of their sick pay. That's a cost of roughly one and a half million dollars that we have to pay out.

In addition, we have set aside money to fund what we call an employee transition payment. We understand and recognize that this is a change for our employees, that some employees know -- we are hopeful that most people are going to have a job with the new vendor. He needs these employees day one. He's going to hire them. That's basically an assumption we're making, but their pay will be reduced. We're not going to sugarcoat it, but that will happen. But recognizing that, we have set aside money for what we are calling the transition payments. There are different ways that this money can be paid out. I'll go over that after I finish going through the other fiscal components. That will be another handout we have.

Also looking -- there is ongoing health insurance costs. The employees who are -- have ten years with the County or at least 55 years old, they are entitled to health insurance for life. That's an

ongoing cost of a little over 2 million dollars a year. The first year we still have to pay -- there's a pension payment we have to make in 2012 for those people because they were on our payroll in 2011. That's roughly one and a half million dollars. So netting all of that out, the County will still benefit to the range of about 6.6 million dollars in 2012 from this transaction.

In 2013, we figure the number is roughly 10.18 million and now as we -- the receivables trickle down, the benefit drops to eight million -- eight and a half million dollars in 2014, a little less than eight million dollars in 2015, and about 8.4 million dollars in 2016.

So these are cost avoidance, these are recurring savings that we get. So it's not just a one time benefit from the selling of the facility, you are also saving from the -- on the operating deficit because you no longer run it. And our residents are taken care of because Mr. Rozenberg is going to run a first class facility. Now we'll go over the incentives.

**D.P.O. VILORIA-FISHER:**

I'm sorry. I just have a question about your chart.

**CHAIRPERSON BROWNING:**

Sure.

**MR. NAUGHTON:**

Yes.

**D.P.O. VILORIA-FISHER:**

I just -- perhaps you said it and I missed it.

**P.O. LINDSAY:**

Use the mike.

**D.P.O. VILORIA-FISHER:**

I'm sorry. I'm reaching over to look at the chart and I forgot about my mike. In 2013 and 2014, you have the receivables at 3.1 million and, if I'm reading that correctly, and 1.05 million.

**MR. NAUGHTON:**

Correct.

**D.P.O. VILORIA-FISHER:**

What constitutes those receivables in those two years?

**MR. NAUGHTON:**

Essentially we estimate that by when we close the facility we're going to have roughly about 10 million dollars of bills that haven't been -- money that we haven't collected yet. Some of that money, hopefully roughly 60% of it we'll collect the first year, the second year roughly 30, the last, the third year, roughly 10%.

**D.P.O. VILORIA-FISHER:**

Oh, you mean like Medicaid payments that you haven't gotten yet, that kind of receivables, not from -- not from the buyer.

**MR. NAUGHTON:**

No.

**D.P.O. VILORIA-FISHER:**

You're talking about receivables that are ongoing for care. Okay.

**MR. NAUGHTON:**

Exactly. Right. Hopefully we'll collect most of it the first year.

**CHAIRPERSON BROWNING:**

Tom, do you have a question?

**LEG. BARRAGA:**

I was wondering if you could expand a little bit on the employee transition period.

**MR. NAUGHTON:**

Sure thing.

**LEG. BARRAGA:**

Let me give you an example. Let's say I work at Foley and I'm making \$35,000 a year. Come January first the nursing home is sold, and from my job classification I now drop to \$31,000 a year. This transition amount, is there a period of time where the County would make up the difference between the 31 and the 35 in order to help me better adapt to the change in my annual salary?

**MR. NAUGHTON:**

The way it will work, this is obviously something that we will have to negotiate with AME, we've come up with five options that are listed on this board. The option that you just mentioned is what we consider option five.

**LEG. BARRAGA:**

How does option five work?

**MR. NAUGHTON:**

Okay. We've taken a look at the current 1199 contract, what the wages are for the various titles, compared that to what our employees are currently making. So for that first year we could make up the salary difference for the employee. So, your example, if it's a \$4,000 difference --

**LEG. BARRAGA:**

Yes.

**MR. NAUGHTON:**

-- that employee could get \$4,000.

**LEG. BARRAGA:**

That's good. So for a period of 12 months I get the \$4,000, and during that period of time I can make a determination whether or not I want to stay with the new owner, transition back to the County, or quit.

**MR. NAUGHTON:**

The transitioning back to the County would not be -- we would not give you the incentive and let you come back to the County, because therefore you haven't lost anything.

**LEG. BARRAGA:**

So once I take the transitional amount the assumption is I'm going to stay at the nursing home. I cannot come back to the County, so after 12 months I make the decision either to leave or stay with the new owner.

**MR. NAUGHTON:**

That it is way we're looking at it right --

**MR. MARCHESI:**

Well, most of the titles that would be transferred, there are no comparable titles in the County, so

the Civil Service rules would have to take place.

**LEG. BARRAGA:**

I guess the point I'm making, if I take the money, if I get the \$4,000, I make the commitment at that point to stay with the new owner, but I do get the money.

**MR. NAUGHTON:**

You get the money.

**LEG. BARRAGA:**

So no one in Foley at this point wakes up January second and they have a reduction in salary. They are made whole for a period of 12 months, if they are willing to make the commitment to stay with the owner.

**MR. NAUGHTON:**

If you think that's the best option, then yes.

**MR. MARCHESE:**

Yeah, we're not married to any of these options yet. Obviously this -- Eric is going to detail the options.

**LEG. BARRAGA:**

Yeah, but it's on the table from your perspective. Whether or not the union wants to agree with it, that's another issue, but you're ready to go down that road route.

**MR. CRANNELL:**

The County Executive is open to, you know, any, you know, plausible option. We've given several, you know, five examples here that we can go through that we've worked through, but, you know, we're open to any discussion.

**LEG. BARRAGA:**

Okay. Thank you.

**MR. NAUGHTON:**

Right. The first option we looked at was doing something where you take a look at the years of service, let's say for those employees who have ten or more years of experience are eligible to retire. So under that scenario, based off of those people who have the most experience, they will get a better benefit. So that's one way of giving out money. Or you can do an across the board. We've put on the table under option two each employee gets \$10,000. So that's an across the board payment. Or you can give a payment to each employee based off of their years of service, which is option three. And again, that can average out to roughly about \$10,000 a head. Option four is another variation of looking at years of experience, being eligible to retire, and giving you more money.

So right now the way we look at it is we set aside a pot of money, come to us union, tell us what you think is the best thing for your members, and we're willing to do that.

**D.P.O. VILORIA-FISHER:**

Just to clarify.

**CHAIRPERSON BROWNING:**

Vivian.

**D.P.O. VILORIA-FISHER:**

Mr. Naughton, just to clarify. Did you indicate that the incentive that was on the other chart, I must not be close enough, the incentive that was on the other chart reflected the amount that option five

would cost us? Which option was --

**MR. NAUGHTON:**

All these options cost roughly the same amount. What's indicated in the chart is the pool of 2.2 million dollars.

**D.P.O. VILORIA-FISHER:**

On that other -- I thought it was 1.2 on the other chart.

**MR. NAUGHTON:**

You may be confusing it with some of the other numbers. There's one and a half million dollars that's owed to the employees for their vacation pay.

**D.P.O. VILORIA-FISHER:**

Oh, the accruals, etcetera?

**MR. NAUGHTON:**

Exactly.

**D.P.O. FISHER:**

I see. Okay. But the incentive was 2.2 and these options more or less come to about the same amount of money?

**MR. NAUGHTON:**

Exactly.

**D.P.O. VILORIA-FISHER:**

Okay.

**MR. CRANNELL:**

So just to make it clear that the employee would leave with any accrued pay plus this incentive on top, depending on what was negotiated.

**MR. MARCHESI:**

Plus two weeks.

**MR. CRANNELL:**

Plus two weeks of time off would be credited to the new employer.

**CHAIRPERSON BROWNING:**

Tom -- no, let Tom and you'll be next.

**LEG. BARRAGA:**

Let's say I'm eligible to retire as a County employee and I do retire. Do I get any of these options over and above that?

**MR. NAUGHTON:**

Under most of the scenarios the answer is yes, which makes it kind of a home run for you.

**LEG. BARRAGA:**

And then there's nothing that prevents me from then working with the new owner.

**MR. NAUGHTON:**

Correct. You've done -- you served this County well, you now have made a choice to retire and you want to continue being employed by Mr. Rozenberg, feel free and we will also give you the extra payment.

**LEG. BARRAGA:**

And of the five options, based on the agreement with the union, you could probably pick what, two or three, it's not limited to just one. It could be several that you pick, as long as it comes up to the same total.

**MR. NAUGHTON:**

Correct. We're open to any options that they think is best for their members living within the money that we've set aside.

**MR. BARRAGA:**

Okay. Thank you.

**CHAIRPERSON BROWNING:**

Tom, the other Tom.

**LEGISLATOR CILMI:**

I'm not sure if this applies, but is it possible to allow the employees to choose each individually or do these -- do each of these options, are they basically the type of thing where the union would have to choose and everybody would have to live by it.

**MR. NAUGHTON:**

I think we have a bunch of creative minds here and that we can come up with some type of different menu options that can allow us to live within our set aside budget.

**CHAIRPERSON BROWNING:**

Jack.

**LEG. EDDINGTON:**

Yeah. You know, I'm listening to what you're saying and I'm hearing things like fiscal relief and fiscal benefit, cost benefit analysis, payer source, operating deficit, transition payment, cost avoidance. I'm hearing all those terms. The only time I've heard anything about people is when I hear that the John J. Foley employees make more than private people and how we're going to help them transition out of this job. So my concern is that all I'm hearing really is money.

*(Applause)*

And I'm looking at this is really about people, I mean for me. Obviously not for who you represent. But the quality of health services hasn't been discussed, and I happen to be aware of other entities that have had trouble with the Attorney General because they don't provide the same type or quality of service. I haven't heard anything about patient care or the families of the patients.

*(Applause)*

Or I haven't heard about the employees and their families. And I guess I'm confused because it seems like I'm hearing Suffolk County government as like -- is a profit motivated organization. And my understanding, when I ran for office, was that this Suffolk County government is to protect and provide services for the citizens.

*(Applause)*

So I'm under a different modality in my thinking and it seems to me that everything I hear when I visited the center and when I've talked to people is that the Foley Center is outstanding in providing services for the people. I mean, it's like a family. I don't think I can ever get it across that I've gone to different places and it's a business. I've gone to Foley and I get a family feeling. I mean,

the gentleman here who's 23, his mother or father works there, we've got a systemic system that provides as if they're their own family. I don't know where you can get that. And I don't want to put a dollar value on it like you gentlemen are.

*(Applause)*

**MR. CRANNELL:**

I guess I would respond, Legislator Eddington, by saying that, you know, privatized delivery of health services in Suffolk County is not a new concept. I mean, we have nine health centers. Most of those health centers are operated through contract with a private facility with private employees. We have three of the centers are operated by public employees. Amityville, Riverhead and Stony Brook operates a facility with -- and are you suggesting that the public employees are any more compassionate or capable as the men and women who serve as a private sector employee in the other health centers?

**LEG. EDDINGTON:**

I guess what I'm saying is I could see that being the next target of elimination, of the health centers. I mean, we constantly have to keep putting money in to help maintain the funding so that could be the next target of elimination, all kind of services. I'm just saying that I have not seen any facility do a better job than the one we're talking about here, the Foley Center. So that I can't see messing with something that's doing a good job.

**MR. CRANNELL:**

I guess in response I would say that when you look at the facilities operated by Mr. Rozenberg, and that's why I think it's important that he's coming to session on Tuesday to answer your questions directly, he routinely rates higher in his quality ratings both at the Federal and State level than we do. I mean, we can provide those documents to you. He runs a quality operation. And, in fact, there are services out there where the private sector does a better job than the County. I mean, this service, of all the things the County is required to do, this is one of the things we're not mandated to do. Like I said, we currently operate health centers without public employees, and like I said, I have had no one suggest that the care is any better in Amityville than it is in Shirley.

I mean, like I said, so I think that really we focused on the fiscal picture because this is part of the County Executive's plan to close the budget deficit. I mean, this is a 36 million dollar proposal. We are looking for your ideas and what you would put on the table to help close this budget deficit that we're dealing with. This proposal is very solid. A reputable operator, it -- this proposal provides the same beds for the same patients and provides employment for the employees with no subsidy by the taxpayer. We think this is an outstanding deal for the residents of Suffolk County.

**CHAIRPERSON BROWNING:**

Tom Muratore.

**LEG. MURATORE:**

Thank you, Madam Chair. Just a question to the panel. Have you spoken at all with the union officials about any of these determinations, these five plans that you devised, the SCAT money for lack of a better expression? Any dialogue with the union or the union people?

**MR. CRANNELL:**

I think it's important for us to get some consensus with the Legislature before we took that next step, but obviously we're open to those conversations.

**AUDIENCE MEMBER:**

Because he's a politician.

**CHAIRPERSON BROWNING:**

Legislator Kennedy. Okay, if we can keep it down. You know, I held off the public portion so you

guys can speak. So let them do their thing, let the questions be asked, and you'll have your opportunity.

**LEG. KENNEDY:**

Good afternoon, gentlemen. I just quickly scanned this menu of I guess inducements associated with trying to do something to characterize employees making this conversion. The one thing that I don't see up here, and I've read the contract, I've seen the language, I know what the right -- the quasi rights are. I remain unconvinced that the purchaser has any obligation to offer employment. He may go through an offer, but I think clearly we can all agree once we would have something executed, we have very little, if any, kind of control over how the operator goes ahead and conducts business. He's got to do it cognizant of State regulations, Federal regulations. But as for us to go ahead and effect policy, for all intent and purposes, the door is closed. That part of our or that chapter of our County governance is gone.

None of these options characterize one of the most basic things that a municipal employee has as a right as they go forward, and that's enrollment in the retirement system. So if you take an employee who let's say is a 30 year old housekeeper or a CNA or what have you, there's some characterization of cash in various forms reflective of, I guess, periods of employment, you know, three months, six months, whatever. I don't know how you did the metrics. But not a single one of them tries to put any kind of time value on the fact that they now have forfeited and are completely out of a retirement system and a pension system, which as of right now is a right not only that's codified in law, but actually in the Constitution in the State of New York.

I can tell you, and I speak from personal experience with this, and I have consistently, and I will continue to. When I started employment as a municipal employee at 19 years old, I earned \$5 an hour, and I did so because basically I had good employment, I had decent benefits and I had something that was called a pension, that most 19 year olds have no clue, nor did I. Here I am, now 54, and I'm only about a year away from being eligible to actually decide to do something different in life if I do. But nevertheless, over all that course of that career, the contribution into the pension system was a conscious decision on my part in exchange for what clearly would have been a higher salary in the private sector. So when you ask and present to us some type of a cost analysis, you leave a huge blank about the bundle of compensation that municipal employees have. That's my first point.

My second point is we effectuate an extremely important policy in this County through the maintenance and the operation of John J. Foley. We've talked at length and I have excellent nursing home operators who maintain facilities in my district. I've seen them, I've toured them, I've been at them, and I've talked with them extensively about their business practices and their business models. Not a single one of them has to take anybody. They make cost decisions and they look at patient mix. When a person who's a County resident has no place else to go, like we heard about two weeks ago, the amputee evicted from an apartment with really no place else to live, got to be taken in at John J. Foley. Well, that was the testimony that we had here a couple of weeks ago. My point -- wait, wait, let me finish and then you go.

**CHAIRPERSON BROWNING:**

I can respond to that.

**LEG. KENNEDY:**

My point is that by operating John J. Foley, we have the ability through a safe, clean, well run facility to implement important health care policy, and that is our responsibility as a County. It's not something that's necessarily optional. By and through our Health Commissioner, Dr. Tomarken in the back, we implement health care policy for 1.5 million people. Part of that composition of health care policy is clinics, which we provide direct primary care for those in need and for those who can't afford it, and we provide a skilled nursing care facility for those who cannot find those types of resources anyplace else. And I continue to maintain that we service a population that will not be served elsewhere in Suffolk County. There may be someplace remote up in Chautauqua or

elsewhere that they could be shifted to within this 50 or 100 mile range, but not here in Suffolk County where their loved ones are. That's my observation.

*(Applause)*

**CHAIRPERSON BROWNING:**

I can respond. The person that I mentioned, yes, they did try to get her into John J. Foley, and by her choice she decided not to go there out of fear for various reasons. She wound up with a \$90 voucher in a homeless motel. So that's where she wound up. And, again, you know, she was eligible to move into John J. Foley, but for various reasons she was afraid to go there. I think hearing what's going on, what am I going to do.

So where to start. First of all, I'd like to know if we get a print of the presentation, if you could give us copies of the presentation that you just did? Have any of you -- on May 25th of this year there was a nursing home summit in Albany County. Did you all listen in to that?

**MR. CRANNELL:**

We're aware of it, yeah.

**CHAIRPERSON BROWNING:**

Okay, because I thought it was very good, it was a very good summit. I listened to it. I sat throughout the whole summit and the County Executive of Albany County is working on closing the nursing home. I sent in a question and asked him how old -- what the average age was of every resident in the nursing home. He kept talking about the nursing home like it was senior citizens. He was not aware when I asked that question, he was not aware, had no idea what the average age was of a nursing home facility in Albany County. And I think that County Executive has been there a very long time, so I was a little disappointed to hear that he had no clue. I think you heard here by many of the people here we have residents in John J. Foley who have been there 15 to 20 years, average age around 50, and the fact that many of them don't have anywhere else to go. There was a Mr. {Wujuhowski}, I hope I didn't crucify his name, from the New York State Association of Counties.

**MR. CRANNELL:**

Stan {Wujuhowski}. He's the lobbyist who represents the public nursing homes.

**CHAIRPERSON BROWNING:**

Thank you. Right. However, he did a presentation, past, present and the future of nursing homes, and he clearly said, you know, when nursing homes were first created, like the alms house in Yaphank, the reason why they were created and how things changed. There was a transition period when Social Security benefits came into effect, how that home was not -- those types of homes were not needed. But, you know, he did say in the future that we are going to need, and he stated very clearly that because of the closure of the State mental health institutions, they're now finding their way into county nursing homes. So unless you can get the State to start addressing those needs, these are the places of last resort. You have people who would ultimately be homeless on the street. We have HIV patients.

There was also another gentleman who is a provider -- not a provider, he works in -- I can't remember what county it was. However, he mentioned that, you know, he was from a county nursing home Upstate, and there was another gentleman arguing with the fact that the private companies can do a better job than the County facilities and unions being a problem, but he forgets to realize 1199 does represent a lot of private nursing homes. So I don't know what he thinks about them. But he did also -- so the gentleman from the County nursing home stood up and said you have something that you can do that we don't do in county nursing homes, you cherry pick.

I can tell you, I have a lady that came to me just about a week or so ago, and there was one nursing home that she's trying to get into with health insurance, and they're not accepting them. I

called Linda Chester and they can take him, and so that's the problem is we do have these nursing homes. You mentioned about that they take Medicaid. They don't generally take Medicaid at the beginning. Generally they're Medicare or some kind of a health insurance and then eventually Medicaid will kick in. So they're not going in at the beginning, and that was what was said at that summit also, is that most of them go in, they have Medicare or some other kind of insurance that gets them in the door, and then eventually the Medicare kicks in.

**D.P.O. VILORIA-FISHER:**

Medicaid.

**CHAIRPERSON BROWNING:**

Medicaid, I'm sorry. And then to top it off, most nursing homes, senior citizens, and the time that they spend in a nursing home, in a senior nursing home, is generally not that long. It's a very rare occasion where you'll see a 15, 20 year resident in a nursing home, which is what we have at John J. Foley.

So, you know, we want to make sure, like, you know, Legislator Eddington said, you know, how can you guarantee that if we sell the John J. Foley to Mr. Rozenberg, how are you going to guarantee that they will continue to accept the people that are there? I know that there was a comment, well if they, you know, if circumstances change and they go to a hospital, which is what happens in private nursing homes, that when that person has to come back to the nursing home that they will definitely accept them. And how can you guarantee that every resident that's sitting in there will stay until they no longer need to stay there? And how can you guarantee that they will continue to accept the type of population that John J. Foley accepts?

**MR. MARCHESE:**

Just a couple of comments. The -- you're correct when a patient comes in, and often patients come into our facility and we don't know that they have Medicaid coming in. It's called, you know, Medicaid pending. Or they might have community based Medicaid and there's a leap of faith that you have to go from community based to long-term Medicaid. So that's something that we do at the facility, but we do a very careful screening currently today of who comes into our facility. We are not -- we don't have open doors. It's been said, but that's not the case. We have an admissions department that reviews each and every case for a payer source. We don't accept free patients at our nursing home. That's not true.

**CHAIRPERSON BROWNING:**

But isn't anybody who comes in if they have no insurance, no type of health care, they are eligible for Medicaid and that would be the job of the facility to work on getting them that Medicaid, right?

**MR. MARCHESE:**

Exactly. And every nursing home in the business today does that same thing. They -- otherwise they would not be in business. Keep in mind, we're 250 patients of roughly 8500 in patient beds in Suffolk County. A lot of the counties that you mentioned that were on that conference also, those county homes, the only home in the County. There is a big difference when you're the only facility and you choose to close, and it would be the case if you were the only private facility, it would be a big impact; we agree with that. But when you're 250 beds out of a total of 8500, plus the State has been encouraging through fiscal incentives to seek alternate placements of residents, so they don't want them in a facility, they want them in their home. So the money has been put via the budget incentives, into home care. So the fact that the State is -- because they want to lower their costs too, because it's a lot less expensive for the State and the Federal Government to take care of patients in their home than it is in our -- in any facility. So the incentives are not to have you facility based, but to have you in your home.

So we do analyze each and every patient before they come in and we make a determination, are they Medicaid pending and can we turn this case into a valid Medicaid case? If we can't, we don't necessarily accept that patient. That's a key component. And you're correct, the first hundred days

or so, usually if they're older and they qualify for Medicare, that kicks in initially, and that's like the first payer. Then after that they transition over.

Over the past few years, and part of the Oversight Committee's recommendations, we moved to have an acute care floor so we can take care of residents on a short-term basis, which is basically insurance cases, which are a lot higher paying, in an effort to improve the facility's revenues. That's typical of what happens. And we've done that in Foley to try to help it along. So, again, those are paying patients. There's no -- there aren't patients in Foley that do not have a clear pay source.

**CHAIRPERSON BROWNING:**

Another question. There was someone who was just -- okay. There was someone who was just hired, and I'm trying to understand if you're going to try to sell the place why would you be hiring these people, I guess to do some kind of inventory work or something like that? Maybe at some point I'll find out. Who is this person and what's he doing?

**MR. MARCHESE:**

We're continuing to hire people because we have to run the place. There's -- I think you're referring to an inventory control clerk we had to hire.

**CHAIRPERSON BROWNING:**

Right. That's it.

**MR. MARCHESE:**

Right. There is an inventory control clerk that we hired, along with some RNs and some LPNs, and now we're currently trying to seek two social worker positions. Unfortunately, you know, due to the uncertainties around the facility, staff are leaving, so we have to keep backfilling as best we can to keep running the place.

**CHAIRPERSON BROWNING:**

And this inventory control clerk, is this filling an open position or is this a new position?

**MR. MARCHESE:**

No. They're existing positions that have been vacated by people who have left the payroll. So we're backfilling existing positions.

**CHAIRPERSON BROWNING:**

So that he's replacing somebody who left.

**MR. MARCHESE:**

Correct.

**CHAIRPERSON BROWNING:**

When did that person leave?

**MR. MARCHESE:**

I don't know. We'd have to look. I mean, I'd have to find the exact records. I know what happened initially was there was two material control clerks going back --

**CHAIRPERSON BROWNING:**

Well, just real quick. I mean, was it this year that person left? A year ago?

**MR. MARCHESE:**

Within a year, within a year.

**CHAIRPERSON BROWNING:**

Within this past year that person left. Okay. I'm getting a lot of -- okay. We have some people

who will be able to respond.

**MR. MARCHESE:**

The fact is that what we were doing after the person left was we were covering it with maintenance staff and we had to take the maintenance staff off of the floors from doing their work and maintenance to do -- to receive deliveries. So the fact is that we needed those maintenance staff out on the floors to do maintenance, so we chose that that was a priority for us to backfill that receiving clerk's job and then fill -- as well as the two LPNs and CNAs that we also filled. And we just got another five SCINs released from the County Executive to fill another five positions.

**CHAIRPERSON BROWNING:**

Okay. But the inventory control person -- because I understand it was two or three years ago that the former person left, so. I'm trying to understand why --

**MR. MARCHESE:**

Well, we had a person -- that particular person was on an administrative -- we had some employee problems, I'll just leave it at, so there was like a termination.

**CHAIRPERSON BROWNING:**

Okay.

**MR. NAUGHTON:**

Excuse me.

**CHAIRPERSON BROWNING:**

Eric, yeah. And I actually wanted, being that you were in Nassau County previous to this, if you could respond. Have you looked at -- during that summit they talked about a public benefit corporation and is that something that you have explored at all?

**MR. NAUGHTON:**

Sure. Before I address that question, I just want to address Legislator Kennedy's issue on the pension. The employees do not forfeit their pensions. As you are aware, I'm sure, the employees are vested after five years, so they are still entitled to their pension when they become retirement age. So their pension is not forfeited.

**LEG. KENNEDY:**

Madam Chair. Technically you're correct. As a matter of fact, you're right. You vest for pension purposes in the State employee retirement system after five years. And as a matter of fact, you vest for medical coverage here as a Suffolk County employee after ten years. However, to offer a 30 year old who may have had ten years of employment here the concept of the notion that they can be separated with some kind of a cash lump sum and in some way, shape or form that equates to what they might have realized as a retirement benefit were that it continue to retirement until age 60 -- well, let's see. As II's now I think you can go out -- I'm sorry. As IV's you can go out after 30 years. The notion or the premise basically belies any kind of credibility that there is something equivalent for the economic or monetary benefit for that employee by virtue of some kind of lump payment here, when you do the time value of money and you look at the stream of revenue as a retiree, that they would have earned through inclusion in a retirement system.

And since you brought that point up I'll go to another one. One of the ones that's been offered is that there would be no loss of employment for the 250 or so employees that are out there at John J., 50 or so which have bump and retreat rights. So if they elected to bump and retreat, they would drive back into other departments, which would then dislodge 50 or so other employees that they have retreatment rights back to. No matter how you slice this, you are firing employees. You cannot put this out there that somehow these workers are going to continue to be employed in some kind of employment capacity. Reality says you are setting out or proposing the course of action that's designed to fire employees. So it's very important that we have accuracy in the way you

portray. You know, spin doesn't work. Put forward what your proposal is, but be honest in what you put forward.

**MR. NAUGHTON:**

Okay. Just to address that. There is approximately 36 people who would probably bump back to the Health Department if they so chose to. The County Exec is currently looking to see what we can do with those 36 employees to minimize the impact for them. There are going to be ways that we can probably absorb a great deal of those employees because we have vacancies in other departments. Over the next 15 months that will be our goal, is to minimize the impact for every employee.

**LEG. KENNEDY:**

Again, Madam Chair, I don't want to monopolize the committee and do a Q and A, but this committee sits here and we hear every cycle from departments all over the place about the scarcity of employees to do the most basic functions. If you're here today articulating on the behalf of the County Executive that he's abandoned that proposal of not filling positions and now is going to do a blanket expansion of 36 employees, that's brand new news, because that's nothing that's ever been before us before.

**MR. NAUGHTON:**

It's not an expansion. You're transitioning employees who, let's say who may be a financial analyst in the Health Department. We may be able to find him a job somewhere else. There could be a maintenance worker at Foley, there could be a need for a maintenance somewhere else. And this way as there's further attrition, we have a group of experienced employees who can fill those positions.

**LEG. KENNEDY:**

Okay.

**MR. NAUGHTON:**

Now to address Legislator Browning's questioning. I was in Nassau County when the PBC was created. A PBC on its own does not come with any money. It changes the way the place is managed and the way it is governed. One of the key components of the PBC is that it eliminates most of the role of a Legislative body. The decision makers is a Board of Directors, who will not have the same interests that you as Legislators may have. I think that is a very key component. The PBC concept, the main idea is that they can react faster to changes in industry because they don't have to go through the same levels of review. That's the key component.

The actual operation of the -- of Nassau's nursing home is much different than Suffolk County. For one thing, there's a hospital owned by the PBC. They get a hospital based rate reimbursement. That's worth an extra five million dollars to them. We don't have that ability. They are also a larger facility, so they're in a different reimbursement schedule. They negotiate on their own with the CSEA so they are able to get different breaks from the union, different concessions. Their employees contribute 15% for health insurance the first five years; our employees don't do that. So that's the real benefit of a PBC, is that you take essentially the politics out of running a facility.

**MR. CRANNELL:**

And if I could just add. There are three public benefit corporations in existence in New York; Erie, Westchester and Nassau. They're all tied to a substantial public hospital. It's a completely different model. In fact, Westchester, their public benefit corporation just closed their nursing facility as part of a restructuring. So, again, a lot of that model is designed to preserve the core public hospital aspect and that's -- and that's really why it was formed through special legislation in Albany.

**MR. NAUGHTON:**

And just to add, I just happen to have a copy of their financial statements with me. Their 2010 budget, on the surface it's essentially a break even budget. They're showing a \$156,000 profit.

What makes up that profit, 2.8 million dollar contribution from the Nassau County government. They also received a HEAL Grant worth 2 million dollars. Take away that 5 million dollars, guess what, they have a hole just like us.

**D.P.O. VILORIA-FISHER:**

That's a great segue.

**CHAIRPERSON BROWNING:**

Okay. Tom -- do you want to let Tom go first?

**D.P.O. VILORIA-FISHER:**

I'm just going to read this quickly. Do you mind if I go?

**CHAIRPERSON BROWNING:**

Okay.

**D.P.O. VILORIA-FISHER:**

That was a perfect segue for me because I've heard the term albatross, a hole, a loss, a burden, and well, Len, you know how committed I am to delivery of care and I see that as the cost of government, not a loss or a burden or an albatross, because our core mission is the public health and safety of the people who live here. And, Len, you know, we've also been working with CGR, and so I had read some of their previous reports, and just now I saw this, that Legislator Browning had this, and I remembered something that really struck me when I read this quite a few months ago and I'm just going to read it into the record.

It's their consideration, it's the report that CGR did in 2007 regarding county nursing facilities in New York State. This is in reference to what you've been saying regarding, you know, we don't take everybody in. But this is from their report.

"As part of the consideration of options, county home administrators and County officials need to carefully consider the likely consequences of the possibility of closing their homes. In most cases, best estimates are that between 20% and 25% of all current residents would be in jeopardy of loss of needed care, i.e., would not be served by other nursing homes if the county facility were to close. There is even greater concern about who would provide the safety net function in the future of quote "undesirable candidates" for nursing home admission."

And they had described who those "undesirable" quote unquote would be. Behaviorals, bariatric patients, those with Alzheimer's Disease, adult protective cases, crisis admissions, etcetera. So I am concerned that there would be people without an alternative. Having read this, and this is a very reputable group, and this was done in 2007.

**MR. CRANNELL:**

Legislator, if I could just comment. That report that you're citing was fully funded by the County Nursing Facilities Association of New York State, an advocate solely for the public nursing homes. I just want to put that on the record.

**D.P.O. VILORIA-FISHER:**

And I still feel that they have displayed a great deal of scholarship and very balanced reporting. So I -- I go by the statement that I read into the record.

**CHAIRPERSON BROWNING:**

Okay. Any more questions? Oh Tom, I'm sorry.

**LEG. BARRAGA:**

I no longer sit on the Health Committee, and maybe some of you are happy that I don't. But I'm here today because this is such a serious, dramatic issue. And for some time now, and it's a

personal observation, I felt the dye is cast on this, it's going to happen. And it's going to happen not because of a lack of quality of care, a lack of feeling and compassion on the part of the employees of the John J. Foley Nursing Home, or anything to do with the residents of the home. It's inevitable because of 150 million dollar deficit and a net benefit predicated on the sale that brings in 20 million dollars and saves estimates of seven or eight million dollars of expenses year in and year out.

So as a Legislator, if this is inevitable, if I see the dye is being cast on this, what can I do? And all I have -- all I really want to do is to make sure that the residents are taken care of and the employees get the best deal. Now, that fifth option up there with reference to a transitional salary adjustment for a period of a year if you want it, I brought that up in meetings with the County Executive. I would hope that in large measure that's why it's one of the five on the board.

**MR. NAUGHTON:**

It is.

**LEG. BARRAGA:**

The other element, which Kate Browning brought up, Legislator Browning, and I didn't spend any time when I first spoke this afternoon, my assumption is, and I hope it's correct, that as far as the residents predicated on the deal, once the deal is signed every single resident that is there at that time of signing continues to remain there.

**MR. MARCHESE:**

That's right.

**LEG. BARRAGA:**

I don't know from a policy perspective how you can force a new owner to take blanket patients in. That's an owner's prerogative. I don't know if you have flexibility in that area. Where you do have flexibility and a commitment, and you don't, and a commitment is when you sign the deal to make sure at least the residents that are there, stay there. And that the employees get the best option possible. That's been my main concern, because for all the talk and all the presentations, I don't know how you get around the net benefit of 20 million and reducing expenses eight to ten million, because nobody's come forward with an offset for that. And you know something, Ladies and Gentlemen, they won't unless you want to raise taxes or layoff people or come up with other -- some sort of extreme proposal that's just not going to work in the short-term.

So I know you don't want to hear this, but you have to begin maybe to prepare for it. Because in the end, when you have public hearings, I have a feeling, reluctantly, and it will be reluctantly, no member wants to deal with this issue. You'd rather just leave the home alone, but we can't get around the 150 million dollar deficit in 2011. It has to be closed, and no other element brings in that kind of money and brings in that kind of savings. So we're left with taking care of the employees as best we can and make sure the residents continue to have quality care at that facility.

**MR. MARCHESE:**

Could I just frame this one last thing, if I could, too, just to add to that. The deficit that this facility, ongoing between eight and ten million dollars, to take care of 250 residents, that's as much of the funding that the County Health Department does for the Brentwood Health Center, and we take care of 50,000 patients with that same eight to ten million dollars.

**CHAIRPERSON BROWNING:**

Okay. You know, we will begin with the public portion soon, but, you know, you talked about the public benefit corporation and the big one million dollar loss. We have Suffolk County parks, why don't we just privatize every park? They -- how much money do we pour into our parks every year? And, you know, taxpayers are paying for it.

We are putting that -- John J. Foley people, somebody made a comment before about well, they're just a small population, but they're still a population of Suffolk County residents. Some of them

vote, some of them don't. Some of them are taxpayers in the past, probably most of them were taxpayers in the past, and now they're there for whatever reason. So it doesn't matter what the population is, and too often I've been here -- since I've been here it's government's not here as a business to make money, we're here to serve Suffolk County residents. And so now if the Suffolk County parks are costing us so much money, then why aren't we privatizing them and why aren't we saying somebody else run them and start making money? So, you know, the same goes for John J. Foley. You know, it's never going to make money, but if we can decrease as much as possible the deficit, then that's what we should be doing. And we are serving a population of Suffolk County residents.

And the same goes with DSS, \$90 vouchers for hotels, you know, for homeless people. Homeless families is on a rise. We're putting money -- well, then why don't we just not do that either. You know, why are we wasting money on people who are least fortunate and don't have a voice for themselves? That's what I'm hearing, that's what I'm hearing. And it seems that when economy is in bad shape and it's tough, it always seems to be the middle class and the low income people who are always hit hardest, and those are the people that we cut the services, we take everything away from them. You know, because the people who are most vocal are the wealthier, you know, the upper middle class, who get out there and speak up. And I just don't think it's fair to take advantage at this time of people. And the people in this room today are here to speak for the voices that can't be here, and for many reasons that they physically can't get here. And I can guarantee you I'm sure each and every one of them would love to be here to speak up. So with that, we will begin our --

**MR. NAUGHTON:**

Can I just make a comment on that? I think when you look at the role of the County Executive, his job is to take a look at the services that we provide and see how we can do it in the most economical way. We have done things in the park system to privatize it. You have golf that's done, in last year's budget we had proposed privatizing the marinas. So there are operations throughout the County that we looked at for efficiencies. The highways, they were once patrolled by the cops. The County Exec and the Sheriff came up with a way to save money there by having the Sheriff do it. So you constantly look for ways for efficiencies. So in this instance we have said there is a way that the same service can be provided by someone else and save the taxpayers money; let's do it.

**CHAIRPERSON BROWNING:**

Well, we can argue that when you talk about shifting. So now the Sheriff's -- the Sheriff's budget has gone through the roof also because of the fact he's taken over the highway. So, you know, we can argue each and everything that you've said. So -- but the bottom line is, is we're not a business, we're here to serve the residents, and I think we're done. I will continue with the public portion.

**MR. CRANNELL:**

Thank you for your time today, Legislator Browning.

**CHAIRPERSON BROWNING:**

Thank you. Linda Ogno.

**MS. OGNO:**

My name is Linda Ogno. I work for John J. Foley. Before they leave, my cuts would start with Mr. Levy's office and all his lawyers and stuff that are there. That would be the first cut I would make.

*(Applause)*

Second, business is to protect and serve profit. Government is elected to serve and protect the people, and that's why we're here, as the people of Suffolk County and as a taxpayer. You want to cut other services? Let them get on the Capital Budget which I looked. I'm angry now. I've sat here and watched government for the last three years. The more I sit, the angrier I get. My next

step is to run for public office. That's my next step.

*(Applause)*

I sat yesterday at the Environmental Committee on this. First of all, it was supposed to be a public meeting. Try to find it. My sister and I had to work through the woods off of a dirt road that the guy told us to get there. How is the public even supposed to know that these are even out there? Same way with the public committees.

I'm here to speak about John J. Foley. We are an institution that needs to remain County. These people have come before you, it's -- and I'm sure that Mr. Levy is out there looking for my best interest, I'm pretty sure of that, because he's been out there so many times thinking about it. And I'm pretty sure that because he comes forth and is telling the truth all the time and has come forth with all the facts and figures, that we can trust this man. We've caught him in so many lies. If he -- if he belonged in my family, his nose would fall off how many times he's lied.

**LEG. EDDINGTON:**

It is getting bigger.

**MS. OGNO:**

It is. I come here and I don't want to speak about anger, but I look at these faces of John J. Foley, and you may not know it, I've worked in private facilities; they have a giant turnover rate. It was my son who spoke before, because my children have been in that facility since they're small, and most people do this. We take this because we take it to heart, and this is why it's such a passionate thing with us. It's not just about money. I'm a good worker. You can ask any of my bosses, I can work anywhere. I do this for the love of my County and for the love of the people I take care of. And if I can get just any people in Mr. Levy's office to have half the passion that the people of John J. Foley do, this would be a better government. Thank you.

*(Applause)*

**CHAIRPERSON BROWNING:**

Thank you, Linda. Next is Michael Sheehan.

**MR. SHEEHAN:**

Thank you. First of all, you were telling them to give you an honest proposal. You ain't going to get it from them, especially when they work for a man that flip flops back and forth. He don't even know what party he's on. I'm just a concerned citizen. I'm trying to fight to save John J. Foley. There is a proclamation on the wall at John J. Foley recognizing those outstanding men and women of the John J. Foley who strive to improve the quality of life for all their residents. It mentions the dedication, professional care and that John J. Foley Skilled Nursing Facility has assumed a leading role in upgrading the standards of service for those required in skilled nursing care. It mentions that the residents living in this facility have contributed immeasurably to American history and the lifetime achievement of these citizens is the backbone of our country's heritage. And this proclamation was signed by Steve Levy himself. And now he wants to sell it?

The last time I was at the legislation in Riverhead, there was a priest there who was talking before the body. And he talked about doing the right thing, helping people. That's what John J. Foley does for all people. He also talked about not to be bullied because all tyranny needs to take a foothold is for good men and women to remain silent. Thank you.

*(Applause)*

**CHAIRPERSON BROWNING:**

Thank you. Next is Thomas Dean.

**MR. DEAN:**

Hi. Thank you for allowing me to speak. I'm a nurse at John J. Foley and to think that they would receive the same type of care in private, it's just not factual. I worked for Good Sam Hospital for 12 years before I came there. I made more money; I took an eight thousand dollar drop coming to the County to be closer to my family with 60 miles round trip. They're not going to get this type of care that they get there. There's no profit discussion talked when we're dealing with the patients. It's just not going to happen. Private is for profit. Thank you.

*(Applause)*

**CHAIRPERSON BROWNING:**

Thank you. Mary Fredette.

**MS. FREDETTE:**

Good afternoon. My name is Mary Fredette. I'm a nurse, an LPN, at John J. Foley. I've been there for 20 years and I want to thank you again for listening and, you know, advocating for us. I was just kind of looking at parts of the contract and I was -- had a few questions about the contract and this went through my mind. Like the sale of the building, if it does go through, from what I understand, the County comes out with nothing at closing. And while -- and I don't understand why are we pumping two-and-a-half million dollars of taxpayer money into the facility just to hand it over to a private entity, you know? Isn't it illegal to be giving taxpayer dollars over to a private entity? And knowing that it is illegal, why is it being done? And also, this Dormitory Grant does not reflect in the sale price of the facility, and why doesn't it?

On page 27 of the contract, it says 6.1, Article 6 -- this is post closing covenants. The resident retention -- under resident retention the buyer shall continue treatment to each patient receiving services at the facility as of the day of closing. Only patients requiring services not available at the facility may be eligible -- may be eligible to be transferred. I don't quite understand that, because we're constantly transferring, you know, residents according to their needs for surgical or dialysis. They're constantly being transferred in and out of the facility, you know, certain residents, and I don't understand what that means, like eligible for transfer. Their condition can change, you know, their prognosis, so I don't know if that means that they can be discharged from the facility at some point in time?

The other thing is that we are still responsible for the receiving -- for the revenue that was lost during the period that the day care didn't have as a license, and I wonder why didn't we have a license and who's responsible for getting the license?

**CHAIRPERSON BROWNING:**

Okay. Are you done, because your time is up.

**MS. FREDETTE:**

Okay. Thank you.

*(Applause)*

**CHAIRPERSON BROWNING:**

Thank you. Nanci Dallaire.

**MS. DALLAIRE:**

Hello. Thank you for this time. I hope I can do it in three minutes. But I do have packets again. I don't know if you remember at the last committee I had handed you some findings and just what the County Executive had said. There were closings and privatizations but they were in the upper -- thank you -- state regions and I don't think we could compare Suffolk and our population with that rural area.

And then also I have just come across some laws and other findings. Oh, I'm sorry, I do have this copy too, but it's only one copy, but it's a demonstration program. It's for three years, but I say let's give that a try and in three years we'll reevaluate. Even though I don't want to do that, that's last. But as the people before me have spoken, some things won't make it into the statements and the reports, and until we know the adverse effects that will affect all concerned, the employees, the residents, the future, I don't understand, right, how these drastic changes can be to this County. I'm afraid important matters will not get into the statements and vital information will not be found.

I came to work for the County for a reason. I may be a small impact, but I do make a difference. Our commitment has been to this County, our residents, our family, friends and neighbors. Making this facility private will impact this environment. I just hope that's going to be taken into consideration. We cannot overlook the impact that will affect the residents who have been in the safe care of this County for decades.

Then I have questions about the residents' quality of life. The same benefits will apply? They get a pet therapy, there's clothe donations, the elephant sales, barbecues, bake sales, plant sales, raffles, the out trips. They're all accustomed to this; this has been their life. John J. Foley holds the donation for the blood drive. That's going to impact the environment. I believe there are too many little things that have to be looked at before we can make a decision.

Thankfully it was brought up that the surrounding trees will be taken down at a minimum because Yaphank has sacrificed enough wildlife and forest to the destruction -- I mean construction of that new jail. That's been affecting our quality of life, the residents there. Before the traffic, the truck fumes, the noise, they would travel that road to the soccer field. Now they're in danger. I hope that every part of the study, social, economic, environmental all will be considered. Thank you.

*(Applause)*

**CHAIRPERSON BROWNING:**

Thank you. Next is Linda Chester.

**MS. CHESTER:**

My name is Linda Chester. I work at John J. Foley. I'm admissions coordinator. In January of 2009, Lowell Fein appointed me as administration -- admissions coordinator for John J. Foley. At that time, our census was 229. We had 30 vacant beds. Our occupancy rate was only 89%. Through the ongoing months we had up to 30 admissions a month. As of April 8th 2009, we reached bed hold and we maintain bed hold since that day.

As of today, or as of yesterday, because I always do one day behind, we had eight vacancies. Our count was 256 at 97% occupancy. What Mr. Lenny Marchese said is true, every single patient that comes into our facility, I myself make the phone call to make sure that they have Medicare, and Medicaid is active or the Medicaid is pending. And if there is a Medicaid pending, I will call a lawyer, I'll call the family. I always make sure that it looks like a good case that the case will go through.

And what Kathy said is also true, yesterday we had a new admission. It was because he was in a nursing home, he went to the hospital, and that nursing home wouldn't take him back. He does have Medicare, Medicaid, and we did accept him. And a lot of times I get a call from almost every Legislator, I will get a call from a lot of different people from government that will ask me, can I help them, can I get some placement, can you take somebody in and we will work. And the difference between us and other nursing homes is that we will fight and we will go the distance. I will work with the Medicaid, I will work with the lawyers, I will work with the families, and that's how we get the Medicaid through. And that's -- I just wanted to clear a couple of facts up. Thank you.

*(Applause)*

**CHAIRPERSON BROWNING:**

Linda? Okay. There is no waiting list of people trying to get in?

**MS. CHESTER:**

What happens is that we have different areas of the nursing home. I have a dementia unit that at this time is full, so there could be a waiting list even though we show vacancies, because of, you know, which area -- we have a 12 bed HIV unit. Sometimes that's full and I have a waiting list where I keep patients on the side so that we keep that full. So even though we do show vacancies, we might have, depending upon what area of the nursing home that they're looking for admission.

**CHAIRPERSON BROWNING:**

And I understand, I know that HIV patients, there's a higher reimbursement.

**MS. CHESTER:**

Right.

**CHAIRPERSON BROWNING:**

Now, you will take HIV patients even though your HIV beds are full, you're to capacity, but you can still take HIV patients.

**MS. CHESTER:**

Right, yes.

**CHAIRPERSON BROWNING:**

So when one comes for whatever reason.

**MS. CHESTER:**

Some of them come just for a short-term and they go home, so we do keep -- I try to keep extra, you know, or at least know of people in the community or try to keep track of different facilities. I constantly am in touch with the different hospitals to keep them alerted when we are running low or we do need people.

**CHAIRPERSON BROWNING:**

Okay. And I do want to say thank you, because I know there's been two cases within the past couple of weeks that I have sent to you, and I know difficult cases because of the fact is is that there is nowhere else for these people to go, that they've been rejected in other places, but you've been willing to work and have said that they can come to John J. Foley, even though these other places are rejecting them. I want to say thank you because you're constantly fighting hard to get them in there. I know Legislator Kennedy has a question for you.

**LEG. KENNEDY:**

Thank you, Madam Chair. Just something that I think I know is going on. You heard before, Linda, the dialogue that we had about policy, public health policy, and we constantly hear the references regarding mental health care in this state and the abysmal track record when the State shut down most of our mental health facilities. But I do know that you, particularly with the Alzheimer's Unit and other floors, work in concert with Pilgrim State Hospital at this point, isn't that correct?

**MS. CHESTER:**

Correct. We work with Pilgrim State and South Oaks.

**LEG. KENNEDY:**

So that there actually is an opportunity where we have acute care mental health bed facilities out there in the community. By transitioning these patients to John J., it's allowing the admissions facilities to take in people in crisis and need, and it's part of a continuum for a way to deliver mental health care here in Suffolk County in a humane way.

**MS. CHESTER:**

What happens is that when they are in an acute care situation for psych issues they usually stabilize them, put them on the right medications and the next step is to not be in an acute situation, but for long-term care. And because of the way our facility is run, we make sure that they get their medications, we make sure that they are continued on whatever they were put on and whatever the acute situation is maintained when they come to our facility.

**LEG. KENNEDY:**

Well, that's excellent. Thank you and that's my point exactly, that there is a key role that John J. Foley plays in an overall health care policy perspective in this County. Thank you, Madam Chair.

**MS. CHESTER:**

Thank you.

**CHAIRPERSON BROWNING:**

Thank you, Linda. Next is Pat Rollings.

**MS. ROLLINGS:**

Good afternoon, and thank you once again for taking the time to listen to all of us. Before I start with what I'd like to speak about, I just want to mention on the thing that was brought up about the inventory clerk for material control. It's my understanding that this clerk is called a neighborhood aide and he was appointed by Mr. Marchese. He is a Grade 13 and supposedly his previous experience is with contracts, not material control. So that's the information that I have on that subject.

Okay. What I'd like to talk about today is one of our residents. I'm going to call him Steve. When Steve first came to our facility he was aggressive, menacing and violent. Steve is an HIV patient. He had a history of drug abuse, psych problems and had been incarcerated. He threatened to hurt other residents, he threatened to kill our supervisors, and he threatened to rape our nurses. Everyone was frightened by Steve. After one violent outburst he was so out of control it took four police officers to take him out of the facility for a psych eval. They had to put a spit bag over his head for the fear of their own health and safety. These acts of anger and aggression continued. You couldn't have a conversation with Steve. He spoke gibberish nonsense or was sexually graphic. No one would be alone with him, especially in the elevator.

Flash forward to the present. After a lot of hard work by our staff, behavior modification, consistency and getting his meds just right, Steve is now cooperative, polite and pleasant. Last night he was walking around with a teddy bear. He calls the girls mom. Because of our staff, Steve is now a completely different person. While he probably will never be productive to society, he is no longer a threat. We did that, all of us. In the beginning some people felt that Steve didn't belong in our facility, but if not there, where? Where would Steve be now if not for the dedicated staff at John J. Foley?

Steve is considered one of our special need residents, and it was quoted in Mr. Rozenberg saying that all of the residents will be safe in their beds except for those with special needs. Most of our residents are special needs. What will happen to them? What will happen to Steve? What will happen to all the other Steve's out there, where will they go? If we could help someone as hopeless as our Steve, imagine what we could do for the other Steve's that are a problem to Suffolk County's homeless.

Selling John J. Foley, in my opinion, is a one shot deal that will save Suffolk County and it will only save Suffolk County some money, but it will only serve another Steve, Steve Levy. Please keep our facility County owned and operated for all the people in Suffolk County that need us now and that will need us in the future. Thank you.

*(Applause)*

**CHAIRPERSON BROWNING:**

Thank you, Pat. Next, Dot Kerrigan.

**MS. KERRIGAN:**

Thank you. My name is Dorothy Kerrigan. I'm Vice President of Suffolk County AME. The Suffolk County Association of Municipal Employees remains opposed to the sale or lease of the John J. Foley Skilled Nursing Facility. It is our belief that given the proper management, as reflected in our many discussions and documents provided to this body, both on and off the record, the John J. Foley Skilled Nursing and Rehabilitation Facility could be self-sustaining and would become a jewel in the crown of Suffolk County as it has been, and not as it stands today, an element of political divisiveness and outright division spearheaded by a County Executive with nowhere to go.

Mr. -- Legislator Barraga, I know I have spoken to you several times about this in the past. I know you haven't been totally supportive of John J. Foley, but you have always been willing to listen and I totally respect that. It's nice to have you here today. You usually aren't here in this committee. And I just wanted to point out, because you did make a statement that no one is going to try to -- no one is going to be able to provide a way to save money, and there are a lot of ways to save money and it has been done.

Last year AME proposed -- made a proposal for -- that was transformed by Steve Levy into IR 1576. That was a proposal that the Association of Municipal Employees thought would be a reoccurring revenue for the County, would be approximately in our estimation, over five million dollars a year, possibly more in administrative fees, to County vendors, people who contract with the County. As I said, it was not -- it was rejected by the County Executive, but it was presented a short time ago in a different form, as an entitlement program for campaigns, as campaign -- public finance campaign reform. That would be a wonderful way to bring millions of dollars in in reoccurring revenue every year to be put into public safety and public health. And I think that possibly if you could relook into that, that legislation, it would be extremely helpful to the people of Suffolk County so all of us could benefit by that administrative fee. Thank you very much. Thanks for listening.

*(Applause)*

**CHAIRPERSON BROWNING:**

Thank you, Dot. And last is Chris Destio.

**MR. DESTIO:**

Good afternoon. My name is Chris Destio and I'm a proud employee of the John J. Foley Nursing Home. The first thing I would like to address is Legislator Barraga here. Sir, even though I disagree on some of your opinions and stuff, I do respect you as a Legislator and a Marine. I just want to let you know that, sir. And the reason I say that is because you did bring up a point here, and I would like to give you this paperwork once I'm done with it, on 6.1 on page 27 of the contract. It says resident retention, which Mary Fredette brought up. It says only patients requiring services not available at the Foley facility may be eligible for transfer.

**D.P.O. VILORIA-FISHER:**

Sorry, Chris. That was from the person before.

**MR. DESTIO:**

And the next thing, sir, I would like to bring to your attention is on, it's also from the contract, I believe, it is page 63 states that the facility management can choose who they decide to have as tenants. Okay, my point of bringing this up is that all along the County Executive kept telling everybody that all the residents stay at John J. Foley. Obviously that's a misconception once again, just like it's a misconception with all the numbers he is presenting through his appraisal, sir. I just wanted to bring that point to you, sir.

There's a few things here. It says here, it says that 36 people will be bumped back and absorbed into the County. Okay, that might be true, and then it says that most of the people would be -- they would try to absorb into the County. Well, maybe someone here can explain to me how do you absorb all those CNAs and the nurses into the County? Where are they going to go? Maybe they're going to work at Taco Bell or McDonald's? Does the County own these places? They got no place to go whatsoever. So you can't absorb when the facility facilitates, at least 60% of the employees are CNAs and nurses. Where are you going to put them? There's no jobs for them. So that's another falsehood once again brought up.

And another thing I would like to bring up, too, and, you know, the gentlemen up here, I respect anybody that is a politician and doing they're doing their job, but, you know, you are so concerned about saving money and the State says we're all getting out of the nursing home business. If that's the case, you want to save the State money, why are we continually still pumping two-and-a-half million dollars into our facility if you plan on selling it? I just can't understand this. If you knew you were selling the facility, wouldn't you stop the spending until you knew which direction you were going to? That's a problem. So basically an illegal action is happening here. You are giving taxpayers' dollars away to a private entity. That's a major problem.

And you keep hearing, and I heard this today from the witch hunt over here, that we're still going to net 20 million dollars. Obviously I bet you every Legislator up here, if you are really doing your homework, you know that's another major falsehood. After everything is paid up between the retirees and the lag payrolls and everything else, plus the two to three million dollars that needs to be paid out from the mistake of the license at the day-care facility which we are still responsible for, you are going to walk out owing money from the sale of this facility. And anybody can correct me on that, but I believe my numbers are correct, too.

I just have to bring up one more thing, and I'm pretty much done speaking here. I would like to talk about the depreciation -- you know, I'm a little nervous. Thank you very much -- the value of the equipment in the facility. I find that most alarming and disturbing. Our building was still in construction of 1995, and let's go back to the two and a half million dollars again. You are adding money in this facility, new equipment, medical monitoring systems, new PT, new day-care. How do you continue saying you are going to put a de -- you know, devalue the equipment in there at 70%, which is not true. That is totally not true. So when you are done trying to do a fair assessment from the County Executive's Office, his numbers are just as credible as numbers coming from Bernie Madoff's office. I thank you for your time.

*(Laughter)*

*(Applause)*

**CHAIRPERSON BROWNING:**

Thank you, Chris. Always entertaining, if nothing. We have a last card, we just got another card. Peter Mastando. I'm sorry if I didn't say your name right.

**MR. MASTANDO:**

That's okay. I'm still here though. Good evening. Thank you for having me up here. John J. Foley has been challenged for over a hundred years, that's how long it's been in business. Every year we have to go through this, and we do good as you heard. You heard the sad news, you heard the happy news, and you heard everything. Why do we go through this every year? Mr. Obama spent trillions of dollars to give to auto industries and banks. Why can't we do this for John J. Foley? Why can't we have a loan to keep us going and pay it back for making a profit from this place? Thank you.

*(Applause)*

**CHAIRPERSON BROWNING:**

Thank you, Peter. Okay. With that, we have no more speakers and we'll begin with --

**UNKNOWN AUDIENCE MEMBER:**

No, no. We have another one here.

**CHAIRPERSON BROWNING:**

Oh, we have another one? I'm sorry, come on up. Did you sign a card?

**MS. PREPSCIUS:**

Yes.

**CHAIRPERSON BROWNING:**

I don't know how I missed you. Could you just state your name?

**MS. PREPSCIUS:**

My name is Maria Prepscius. I'm a nurse at John J. Foley. I would just like to say that some things have no price, especially a hundred year old institution that has been with the County for all that time, and there's a reason why it has stayed with us, because there's a terrible need for it. We need the care that we give these people. We're not just money based. As you heard with the presentation, it's all about the Benjamins, it's all about the money. It's all about cherry picking the right, you know, residents and how are they going to guarantee that we continue to give this quality care?

Mr. Rozenberg does not have the best reputation. If you've read anything on the net or any of the newspaper articles, he does not have a great track record. He fires everybody, which is essentially what's going to happen to us, and it's just not right.

With all due respect, Legislator Barraga, it is not inevitable and we won't accept that it's inevitable, and we will not go quietly into the night. We will fight for our facility. I'm a taxpayer. I'm going to be 65 in another month. Where am I going to go? I want to know that I'm going to go someplace or that my mother can go someplace or that my father can go someplace that they're going to be cared for right here in Suffolk County, not in Westchester or Upstate New York someplace. We give good care. It's like throwing the baby away with the bath water. This is 14 acres, giving away 14 acres with the building and the day-care? It doesn't make sense. We can make it a profit going business. Thank you.

*(Applause)*

**CHAIRPERSON BROWNING:**

Thank you. Do we have any more speakers? Last call.

**MR. OGNO:**

I apologize. I did not sign a card.

**CHAIRPERSON BROWNING:**

You have to give us your name.

**MR. OGNO:**

My name is Chris Ogno. I work there at John J. Foley. My brother, Dominick, and my mother, Linda, got up here to speak so I can't let them stand me up. I just had one question. They were talking about up here before about the extra day-care slots that they now have approved for. I got it off the County website. It says with the authorization the benefit to the taxpayer over five years increases to approximately 62 million dollars. Well, if that's the benefit to the taxpayer, what kind of revenue is that going to generate for us and bring down our deficit.

Mr. Kennedy, I really respect what you had to say. I was 19 years old when I started with the County, too. I left a \$65,000 a year job to come work for the County because I used to volunteer as a little boy at John J. Foley. I realized in good conscience that benefits outweigh pay.

There is just one more little thing I wanted to say. You know, in every one of these little proposal sheets it says honorable in front of all your names. Honorable. A lot of times I get up here and I say where do you draw the line between making a profit and running a business. And I love using that term, drawing the line, and I kind of researched it a bit. It came from the Alamo. Colonel William Travis recognized that the outcome was hopeless to the men at the Alamo, and he could not in good conscience order them to stay and fight, so he took his saber and drew a line in the sand, told his soldiers that regardless of what they did, he was going to stay, and if necessary, single handedly defend the fort. That's where the line comes from. The line in the sand. Where is your line? Please ask yourself that. Thank you.

***(Applause)***

**CHAIRPERSON BROWNING:**

Thank you. I know our Health Commissioner, Dr. Tomarken, and maybe Commissioner Blass, before we go to the agenda I should give you an opportunity. Is there anything you want to -- you need to talk about or talk about issues? Nope? Okay. Commissioner Blass left? I thought I saw him at one point.

**DEPUTY COMMISSIONER HERNANDEZ:**

He's still here if you need him.

**CHAIRPERSON BROWNING:**

He is still here? Okay. So then we'll go on with the agenda.

**Tabled Resolutions**

***1129-10, A Local Law to ensure the integrity of prescription labels in Suffolk County. (Cooper)***

I will make a motion to table for public hearing.

**D.P.O. VILORIA-FISHER:**

Second.

**CHAIRPERSON BROWNING:**

Second, Legislator Viloría-Fisher. All in favor? Opposed? Abstentions? Tabled. ***(Vote: 5-0-0-0)***

***1300-10, Maintaining a common sense policy for housing sex offenders that protects and safeguards public safety. (Stern)***

**D.P.O. VILORIA-FISHER:**

Motion to table.

**CHAIRPERSON BROWNING:**

Motion to table, Legislator Viloría-Fisher. Second, Legislator Eddington. All in favor? Opposed? Abstentions? It's tabled. ***(Vote: 5-0-0-0)***

***1337-10, Authorizing public hearings and a Legislative Office of Budget Review Analysis on a proposal to provide services at John J. Foley Skilled Nursing Facility through an entity other than Suffolk County Government. (Co. Exec.)***

I will make a -- did I get a motion?

**LEG. EDDINGTON:**

I'll make a motion to table.

**CHAIRPERSON BROWNING:**

Motion to table, Legislator Eddington.

**D.P.O. VILORIA-FISHER:**

Second.

**CHAIRPERSON BROWNING:**

Second, Legislator Viloría-Fisher. All in favor? Opposed? Abstentions? Tabled. **(Vote: 5-0-0-0)**

***1474-10, Adopting Local Law No. -2010, A Local Law authorizing the County Executive to execute agreements for the sale of the John J. Foley Skilled Nursing Facility. (Co. Exec.)***

**D.P.O. VILORIA-FISHER:**

Motion to table.

**CHAIRPERSON BROWNING:**

Motion to table, Legislator Viloría-Fisher

**LEG. EDDINGTON:**

Second.

**CHAIRPERSON BROWNING:**

Second, Legislator Eddington. All in favor? Opposed? Abstentions? It's tabled. **(Vote: 5-0-0-0)**

***1502-10, Directing the Department of Social Services to close the sex offender trailers. (Schneiderman)***

I'll make a motion to table. Second, Legislator Muratore. All in favor? Opposed? Abstentions? It is tabled. **(Vote: 5-0-0-0)**

### **Introductory Resolutions**

***1623-10, Amending Resolution No. 881-2009, establishing a Teen Pregnancy Task Force. (Viloría-Fisher)***

**D.P.O. VILORIA-FISHER:**

Motion to approve.

**CHAIRPERSON BROWNING:**

Motion to approve, Legislator Viloría-Fisher. I'll second. All in favor? Opposed? Abstentions? I guess motion is carried. **(Vote: 5-0-0-0).**

I have to tell you I think you are doing a great job with that.

**D.P.O. VILORIA-FISHER:**

Thank you.

**CHAIRPERSON BROWNING:**

***1625-10, Amending the 2010 Adopted Operating Budget to reallocate funding for the Peconic Bay Medical Center Contract for the Riverhead Health Center. (Romaine)***

I will make a motion to approve.

**LEG. KENNEDY:**

Second.

**CHAIRPERSON BROWNING:**

Second, Legislator Kennedy. All in favor? Opposed? Abstentions? Motion carries. **(Vote: 5-0-0-0)**

*(The following was transcribed by Lucia Braaten, Court Stenographer)*

**CHAIRPERSON BROWNING:**

**1634 - Establishing Community Safeguards from registered sex offenders placed in emergency housing (Schneiderman).** What is that? Can --

**LEG. KENNEDY:**

Public hearing?

**CHAIRPERSON BROWNING:**

Is that --

**MR. NOLAN:**

No.

**CHAIRPERSON BROWNING:**

Doesn't require a public hearing.

**D.P.O. VILORIA-FISHER:**

No.

**CHAIRPERSON BROWNING:**

What's that mean?

**MR. NOLAN:**

Do you want to know what this bill does?

**D.P.O. VILORIA-FISHER:**

Is this about GPS tracking devices?

**MR. NOLAN:**

That's correct, it -- GPS?

**D.P.O. VILORIA-FISHER:**

How is it different from what Legislator Eddington had? I'm confused by this.

**CHAIRPERSON BROWNING:**

Oh, okay. Commissioner Blass is here and I think he -- and Ben is here. Yeah. Do you want to tell us what we can do with this? Can we do it?

**COMMISSIONER BLASS:**

Not really.

**(Laughter)**

**CHAIRPERSON BROWNING:**

Okay. Who wants to start?

**COMMISSIONER BLASS:**

Yes, Madam Chairwoman. What can I do for you?

**D.P.O. VILORIA-FISHER:**

I'm a little confused. My question was how is this different from Legislator Eddington's, because I know we couldn't do Legislator Eddington's because of the mandate from the State that we have to house homeless sex offenders and you can't put a condition on that.

**COMMISSIONER BLASS:**

That's correct, Legislator Viloría-Fisher. In fact, we did, I believe, provide you with a written opinion we got from the State OTDA. As soon as we got it, we transmitted it to everybody. And the difficulty with GPS is that, according to OTDA, which is the supervisory agency of the State over at DSS, with regard to non-juvenile issues, juvenile detention and foster care issues and CPS issues, is that GPS adds a condition similar to a sentence. And unless it's part of a judge's order for probation or parole conditions, GPS is inappropriate.

**D.P.O. VILORIA-FISHER:**

Okay. And I have to excuse myself, because I didn't finish reading it. And it says that instead of -- if the person declines that, then they're provided --

**COMMISSIONER BLASS:**

They're offered the chance --

**D.P.O. VILORIA-FISHER:**

-- an escort, like a chaperone?

**COMMISSIONER BLASS:**

Right. They're offered the chance to either accept GPS, or, if they don't, they're going to be given escort services for the time that they're not in the trailer.

**D.P.O. VILORIA-FISHER:**

Well, let's not use that term, "escort service".

*(Laughter)*

**COMMISSIONER BLASS:**

I believe that's the terminology that's used in the resolution.

**D.P.O. VILORIA-FISHER:**

I'm sorry. How much would that cost us, Commissioner?

**COMMISSIONER BLASS:**

According to what we have put together on this --

**DEPUTY COMMISSIONER HERNANDEZ:**

BRO.

**COMMISSIONER BLASS:**

And the Budget Review Office, which we -- when we discussed this or provided some information to the Budget Review Office -- actually, what we did was we referred Budget Review to the County of Westchester, which had a kind of escort service. Forgive my use of the phrase. And they also -- we also assessed what it would cost for the issue of GPS devices. In any event, if we had a 24/7 operation mode, the GPS supervision would be in the range, daily range of 152,000, and we estimated that it would be for the fiscal impact for, say, 15 homeless sex offenders. We're looking in the range -- let me get that correct now -- of \$652,214 per --

**DEPUTY COMMISSIONER HERNANDEZ:**

That's per year.

**COMMISSIONER BLASS:**

Per year.

**D.P.O. VILORIA-FISHER:**

That's for the escort?

**CHAIRPERSON BROWNING:**

Yeah.

**COMMISSIONER BLASS:**

I apologize.

**D.P.O. VILORIA-FISHER:**

Thank you, Madam Chair.

**CHAIRPERSON BROWNING:**

That's it?

**LEG. KENNEDY:**

I'll make a motion to table.

**COMMISSIONER BLASS:**

If it's mostly escort -- I apologize. The Budget Review Office may want to elaborate on that. I have \$999,000 per year.

**CHAIRPERSON BROWNING:**

Oh.

**D.P.O. VILORIA-FISHER:**

A million dollars, more or less.

**MS. DONO:**

There's two components, Legislator, to the Fiscal Impact Statement on this, and we made some assumptions as far as the percentage of who would agree to the GPS monitoring and who would agree to the escort -- pardon the word -- monitoring. The GPS monitoring we calculated at \$152,219. The chaperoning or shadowing, or whatever word you want to ascribe to it, would be close to \$500,000 based on a model that -- we're not sure if it's equivalent to this. We're trying to confirm that with Westchester County, but that would add another \$500,000 to monitor 15 sex offenders, homeless sex offenders who would not agree to the GPS, for a total of \$652,214 in a year's time. And that's based on a half a day time frame, assuming that this is only during the day when the trailers are closed, not 24/7; 24/7 would be more.

**D.P.O. VILORIA-FISHER:**

Thank you.

**CHAIRPERSON BROWNING:**

Okay. Ben, are you looking for a job?

*(Laughter)*

**MR. ZWIRN:**

Thank you very much.

**CHAIRPERSON BROWNING:**

I think you'd be good at it.

**MR. ZWIRN:**

Yeah, that's great. I appreciate the vote of confidence. If I need a letter of recommendation, I know where to go.

*(Laughter)*

I just think, with all the -- with all the bills that are pending right now, I know that the -- Social Services is working on a plan that has been directed by the Legislature on the Presiding Officer's legislation that passed. I was just told everything else is in abeyance, because what it does is it sounds out -- and I understand the reasoning behind all the legislation, but it's just -- you know it's contradictory, it's sending out so many mixed messages to the department that has to handle this. It's just they're going to go around chasing themselves. Let's try to deal with one directive at a time and we just ask that this be tabled for now.

**CHAIRPERSON BROWNING:**

Okay. I think we did have a motion by Legislator Kennedy.

**D.P.O. VILORIA-FISHER:**

To table.

**CHAIRPERSON BROWNING:**

Second, Legislator Muratore. All in favor? Opposed? Abstentions? It's tabled. ***(Tabled: 5-0-0-0)***.

*(The following was transcribed by Kim Castiglione, Legislative Secretary)*

**CHAIRPERSON BROWNING:**

***1637-10, Amending the 2010 Adopted Operating Budget to accept and appropriate additional 100% State Aid from the New York State Office of Mental Health to Federation of Organizations Transportation Program. (Co. Exec.)***

**D.P.O. VILORIA-FISHER:**

Do you want to put this on the Consent Calendar?

**CHAIRMAN BROWNING:**

Yes, we can. We will put this on the Consent Calendar. I will make a motion to approve. Second, Legislator Vilorio-Fisher. All in favor? Opposed? Abstentions? It's approved. ***(Vote: 5-0-0-0)***

***1638-10, Amending the 2010 Adopted Operating Budget to accept and appropriate 100% unallocated State Aid from the New York State Office of Mental Health to various agencies. (Co. Exec.)***

Same motion, same second, same vote. ***(Vote: 5-0-0-0)***

***1639-10, Accepting and appropriating \$40,000 in 100% grant funding from the New York State Office of Children and Family Services under the State Quality Enhancement Fund to participate in a Statewide Pilot Project to address Disproportionate Minority Representation (DMR) in the child welfare system and authorizing the County Executive and the Commissioner of Social Services to execute contracts. (Co. Exec.)***

I guess same motion, same second, same vote. ***(Vote: 5-0-0-0)***

**1640-10, Accepting and appropriating 100% funding from the New York State Office of Temporary and Disability Assistance to the Suffolk County Department of Social Services for additional Food Stamp/Supplemental Nutrition Assistance Program (SNAP) administrative funding provided under the American Recovery and Reinvestment Act (ARRA). (Co. Exec.)**

I guess that was 100% too?

**D.P.O. VILORIA-FISHER:**

Same motion.

**CHAIRPERSON BROWNING:**

Okay. Same motion, same second, same vote. **(Vote: 5-0-0-0)**

**1654-10, Adopting Local Law No. -2010, A Local Law to ensure the safe transfer of fuel to boats and watercraft. (Schneiderman)**

I believe public hearing?

**MR. NOLAN:**

Yep.

**CHAIRPERSON BROWNING:**

I'll make a motion to table for public hearing.

**D.P.O. VILORIA-FISHER:**

Second.

**CHAIRPERSON BROWNING:**

Second, Legislator Viloría-Fisher. All in favor? Opposed? Abstentions? It's tabled. **(Vote: 5-0-0-0)**

*(The following was transcribed by Lucia Braaten, Court Stenographer)*

**CHAIRPERSON BROWNING:**

Okay. **1672 - Mandating Implementation of Comprehensive Plan to house homeless sex offenders (Schneiderman)**. Let me -- what's the difference between that and what Legislator -- Presiding Officer did.

**D.P.O. VILORIA-FISHER:**

It's a deadline.

**CHAIRPERSON BROWNING:**

Is that -- that's on this?

**COMMISSIONER BLASS:**

Essentially, the 30-day provision by which a plan is to be submitted by the Department in Legislator -- in Presiding Officer Lindsay's bill would really be for the bare bones structure of the plan. But the -- this bill, as I understand it, as we understand it, provides for an implementation of the plan by October so that we can flesh out the plan and get -- and work with the providers, the shelter providers who are really going to be putting the plan together as they can do it. And then, by that time, they will have been working on how the plan will work out and what sites they will select. So 15, October is really when it happens, 30 days, which is really down to 22 days now, 21 days, is when the plan will first be visible, the model, really, of how these shelters will look.

**D.P.O. VILORIA-FISHER:**

And Commissioner, how feasible is that, October 15th?

**COMMISSIONER BLASS:**

Right now, it's hard to say, because we don't have a plan yet.

**D.P.O. VILORIA-FISHER:**

Okay.

**COMMISSIONER BLASS:**

But when -- if we have difficulty with 15, October, or even with the 30 days, we will communicate.

**D.P.O. VILORIA-FISHER:**

Thank you.

**COMMISSIONER BLASS:**

We're really relying on the shelter providers.

**CHAIRPERSON BROWNING:**

Okay. Well, plus, obviously, we'd like to see the plan before you actually do it. I think -- and I'm sure the Presiding Officer would like to see the plan before you actually do it, being that he introduced his bill. So --

**D.P.O. VILORIA-FISHER:**

Yeah, we can table it. Whatever you want to do, Madam Chair.

**CHAIRPERSON BROWNING:**

I think, at this time, I would like to table this one. I'd like to make a motion to table it. Do we have a second? You want to discharge?

**D.P.O. VILORIA-FISHER:**

Yeah, we would discharge it without recommendation.

**CHAIRPERSON BROWNING:**

Okay. I guess I'll withdraw my table. I guess -- do you want to make a discharge?

**D.P.O. VILORIA-FISHER:**

Discharge without recommendation. I'll make that motion.

**LEG. KENNEDY:**

Hold on.

**D.P.O. VILORIA-FISHER:**

Because I thought Bill and Jay --

**CHAIRPERSON BROWNING:**

This is --

**D.P.O. VILORIA-FISHER:**

-- talked about this.

**CHAIRPERSON BROWNING:**

I'm not sure where they are.

**D.P.O. VILORIA-FISHER:**

I could be wrong.

**LEG. KENNEDY:**

You know what, I would just assume be comfortable with the tabling, because, quite candidly, my sense is the Presiding Officer brought forward the --

**D.P.O. VILORIA-FISHER:**

That's what the Chair said.

**LEG. KENNEDY:**

-- the platform bill itself, and I would rather see him elect to revise his piece of legislation if he felt it was necessary to gain extension or to do some other modifications. So, Legislator --

**D.P.O. VILORIA-FISHER:**

I thought I saw him -- sorry.

**LEG. KENNEDY:**

Yeah, I would just be just comfortable with tabling the resolution.

**D.P.O. VILORIA-FISHER:**

Yeah.

**CHAIRPERSON BROWNING:**

Okay. Let's go back.

**D.P.O. VILORIA-FISHER:**

I was just suggesting that because I thought I saw them speaking about it and I thought they had agreed, but --

**CHAIRPERSON BROWNING:**

Okay.

**D.P.O. VILORIA-FISHER:**

-- whatever the Committee wants.

**CHAIRPERSON BROWNING:**

So, I made the motion to table, that's back. I will, again, make a motion to table; second, Legislator Kennedy. All in favor? Opposed? Abstentions? It is tabled. **(Tabled: 5-0-0-0)**

*(The following was transcribed by Kim Castiglione, Legislative Secretary)*

**D.P.O. VILORIA-FISHER:**

Motion to adjourn.

**CHAIRPERSON BROWNING:**

Okay. Commissioner? I do have to say I read the article in the newspaper not too long ago when you talked about the sober home issue. I just want to say I appreciate your passion as, you know, on this issue and I love working with you on it. I want to say thank you.

**COMMISSIONER BLASS:**

A job well done by the Commissioner and by you, Madam Chairman, on that whole issue.

**CHAIRPERSON BROWNING:**

Yeah, they did, so.

**COMMISSIONER BLASS:**

As you know, there's much work to be done.

**CHAIRPERSON BROWNING:**

Absolutely. So motion to adjourn, Legislator Viloría-Fisher; I'll second. We are adjourned.

***[THE MEETING WAS ADJOURNED at 4:56 P.M.]***

*{ } Denotes spelled phonetically*