

HEALTH & HUMAN SERVICES COMMITTEE
OF THE
SUFFOLK COUNTY LEGISLATURE

A regular meeting of the Health and Human Services Committee of the Suffolk County Legislature was held in the Rose Y. Caracappa Auditorium of the William H. Rogers Legislature Building, Veterans Memorial Highway, Smithtown, New York, on Thursday, August 12th, 2010, at 2 PM.

Members Present:

Legislator Kate Browning - Chairperson
Legislator Vivian Vilorio-Fisher - Vice-Chair
Legislator John Kennedy
Legislator Tom Muratore

Members Not Present:

Legislator Jack Eddington

Also In Attendance:

Assemblyman Marc Alessi - 1st Assembly District
George Nolan - Counsel to the Legislature
Renee Ortiz - Chief Deputy Clerk/Suffolk County Legislature
Terry Pearsall - Chief-of-Staff to Presiding Officer Lindsay
Kara Hahn - Director of Communications/PO Lindsay's Office
Bill Schilling - Aide to Presiding Officer Lindsay
Josh Slaughter - Aide to Legislator Browning
Dan Rinfret - Intern to Legislator Browning
Seth Squicciarino - Aide to Deputy Presiding Officer Vilorio-Fisher
Ginny Suhr - Aide to Deputy Presiding Officer Vilorio-Fisher
Paul Perillie - Aide to Majority Leader Cooper
Linda Bay - Aide to Minority Leader Losquadro
Gail Vizzini - Director/Budget Review Office
Lance Reinheimer - Assistant Director/Budget Review Office
Diane Dono - Budget Analyst/Budget Review Office
Craig Freas - Budget Analyst/Budget Review Office
Eric Naughton - Director/County Executive's Budget Office
Kim Brandeau - County Executive's Budget Office
Brendan Chamberlain - County Executive's Assistant
Steve Tricarico - County Executive's Assistant
Dennis Brown - Bureau Chief/County Attorney's Office
Greg Blass - Commissioner/Department of Social Services
Ed Hernandez - Deputy Commissioner/Department of Social Services
Linda O'Donohoe - Asst. to the Commissioner/Dept of Social Services
Dr. James Tomarken - Commissioner/Department of Health Services
Margaret Bermel - Director of Health Administration/DHS
Len Marchese - Director of Management & Administrative Services/DHS
Dot Kerrigan - 4th Vice-President/AME
Chris Destio - John J. Foley Nursing Facility
Richard Koubek - Chair/Welfare-to-Work Commission
Kathy Liguori - Vice-Chair/Welfare-to-Work Commission
Dr. Jeffrey Reynolds - LI Council on Alcoholism & Drug Dependence
Eileen Taylor - Regional Supervisor/NYS Education Department's
Special Education Quality Assurance
Frank Krotzschinsky - Disabilities Advisory Board

Roy Probeyahn - Suffolk County Disabilities Advisory Board
All Other Interested Parties

Verbatim Minutes Taken By:

Alison Mahoney - Court Reporter

Verbatim Transcript Prepared By:

Donna Catalano & Lucia Braaten - Court Reporters
& Denise Weaver - Legislative Aide

***(*The following testimony was Transcribed by
Donna Catalano - Court Reporter*)***

(*THE MEETING WAS CALLED TO ORDER AT 2:20 P.M. *)

CHAIRPERSON BROWNING:

This is the Health and Human Services Committee Meeting, August 12th, 2010. Good afternoon. We'll start with the Pledge of Allegiance led by Legislator Kennedy.

Salutation

Okay, we do have some cards. And before I begin, I'd like to say a special congratulations to Legislator Kennedy and Legislator Viloría-Fisher who, within the week, have just become grandparents again. First time for you, John, right?

LEG. KENNEDY:

That's it. Thank you very much. Thank you, Madam Chair.

D.P.O. VILORIA-FISHER:

Third time for me.

CHAIRPERSON BROWNING:

Third time for Vivian. So congratulations.

D.P.O. VILORIA-FISHER:

And back at you with your granddaughter May.

CHAIRPERSON BROWNING:

Boy, girl?

D.P.O. VILORIA-FISHER:

Boy.

CHAIRPERSON BROWNING:

Oh, both boys. Okay. So anyway, I don't think everyone's in the room. We do have some cards. I do see Assemblyman Alessi who is here, and I know he's got somewhere to go. I believe he'd like to speak, so if you would like to come up. You have to hold your finger on the button and keep it there.

ASSEMBLYMAN ALESSI:

Like a walkie-talkie. I would first like to thank Legislator Browning and the entire committee for the opportunity to come here and speak on this resolution. I think this is a very important piece of legislation that is a long time coming.

For the record, I'm -- I probably should have started by saying I'm New York State Assemblyman Marc Alessi; I represent the 1st Assembly District which stretches from Orient Point to Mount Sinai. I have Shelter Island and Fisher's Island in my district, and go as far as south, when you come into Brookhaven Town, to northern Mastic and Yaphank and the Shirley area.

I have seen in my community the disastrous effects of absentee landlords and their profit-motive to profit off of the most vulnerable in our society, which not only affects the people that need help in our County, but it also affects the integrity of our communities. This is an issue that we obviously try to address at the State level on the more general and global issues, but some of these issues seem more unique to Suffolk County. And as we look at some of the best practices around the State, this legislation was one of the most common sense solutions to address some of the issues that we're trying to address here in Suffolk County.

So I just wanted to come and lend my support to this legislation. I think it would be a tremendous step forward for all of our communities and for the people of Suffolk County. Thank you.

CHAIRPERSON BROWNING:

Thank you, Marc. And I want to say thank you because the new Chair in Westchester, Amy Paulin, for helping set up the conference call and getting her support. And it's great to see that we do have somebody in Albany, besides yourselves, that are listening to us finally. Thank you.

ASSEMBLYMAN ALESSI:

Thank you.

D.P.O. VILORIA-FISHER:

Marc, before you go.

ASSEMBLYMAN ALESSI:

Sure.

D.P.O. VILORIA-FISHER:

I'd like to thank you also. Because, you know, for years we've been dealing with this, before Kate was on the Legislature, and it seems that most of the time the State has stood in our way; rather than standing behind us, they stood in our way in trying to address this issue. So we really appreciate your work on this.

ASSEMBLYMAN ALESSI:

What I -- the one comment I would like to say to that is yes. What we've seen -- when I first came into the Assembly, my first full Legislative session was in 2006 and we passed legislation to require OASAS to regulate sober homes; it's one of the last sections of group homes anywhere in the State that remains unregulated. Unfortunately, at the time Governor Pataki had vetoed that legislation, and in the veto message they stated that OASAS was in the process of creating their own regs in-house on this.

Well, four years later when -- again, I want to credit Chairman Browning. When she came to Albany, we started questioning OASAS as to where those regulations are and how many hearings have been held, and not a whole lot has been done. But as a result of the synergy that's being created from the Welfare-to-Work Commission and the report that they did, the work of this committee, the work of Legislator Browning and the coalition that's being built, I think that this is a starting off point for progress in this area. And I think there's more work to come, but I look forward to working with all of you in that regard. Thanks.

D.P.O. VILORIA-FISHER:

Thank you, Marc.

CHAIRPERSON BROWNING:

Thank you, Marc. Next we have Richard Koubek.

MR. KOUBEK:

Good afternoon. My name, as you know, is Richard Koubek, I'm Chair of the Welfare to Work Commission of the Suffolk Legislature. Two months ago, the Welfare-to-Work Commission submitted an extensive report to the Legislature titled Recovery For Whom: The Urgent Need For Safe and Effective Sober Homes in Suffolk County. It was based on a year's study including two public hearings, and our report concluded that sober homes are unregulated and, therefore, prone to abuses by unscrupulous landlords who collect rents while allowing conditions that foster substance abuse by their residents.

These conditions are scandalous because they basically undo the treatment that many of these residents are undergoing while trying to recover from their drug and alcohol addictions. And they're expensive, wasting tens of thousands of County dollars in Suffolk County Department of Social Services' rent payments for residences where drug and alcohol are openly used and encouraged. Finally, they are destructive of the property values and the quality of life of the people who live near these homes.

So the commission was especially critical of the New York State Department of Alcohol and Substance Abuse Services, OASAS, that has taken no responsibility for regulating and overseeing sober homes.

We, therefore, welcome Introductory Resolution 1758-10, that is a first step in providing some degree of local oversight by authorizing, empowering and directing Suffolk County DSS to issue Requests For Qualification, RFQs, to sober home providers in an effort to identify organizations and individuals who are, quote, *"qualified to operate safe, effective, drug-free sober homes."*

This resolution sends a powerful message and the message is this; the days of laissez-faire for sober home operators are over. Taxpayers pay the rent, the landlords receive the rent, therefore, the taxpayers are entitled to some accountability.

On August 2nd, the Commission's Sober Homes Committee met to discuss the merits of the resolution as well as -- and this is important -- as well as steps that will be needed to properly implement it. Toward that end, following adoption of the resolution, we plan to expand our committee's membership to include representatives from alcohol and drug treatment provider agencies, as well as the Long Island Sober Living Network, that's a coalition of responsible sober home providers, as well as officials from Suffolk County DSS, and this is important, from the Suffolk County Department of Health. We want to engage these stakeholders in the creation of a County oversight board, discussion of that board; what would it look like, a board that would establish the criteria for the RFQs as well as the policies and procedures for ensuring that sober home providers actually deliver on these standards.

So as a first step, this resolution is excellent, and the commission looks forward to working with Legislator Browning and all of you in the creation of an oversight board that would deliver the home run, deliver the actual RFQs that have some meaning. Thank you.

CHAIRPERSON BROWNING:

Thank you.

D.P.O. VILORIA-FISHER:

Can I ask Richard a question? Mr. Koubek?

CHAIRPERSON BROWNING:

If you could come back.

MR. KOUBEK:

Sorry.

D.P.O. VILORIA-FISHER:

Hi. Great to see you, and you always make me proud of the work that Welfare-to-Work commission does.

MR. KOUBEK:

Thank you.

D.P.O. VILORIA-FISHER:

But I was wondering, would it -- oh, I lost an earring. Sorry. I was wondering, given how well the Welfare-to-Work Commission works and the invaluable advice and recommendations that you've given us in the County, could the commission work on this rather than create another separate board? I mean, could this be part of the purview of what you look at?

MR. KOUBEK:

Would we serve as the board or would we look at creating the board?

D.P.O. VILORIA-FISHER:

Well, no, not having another board, but will serve the function that you're looking for a board to serve.

MR. KOUBEK:

Yeah, my initial reaction, Legislator Viloría-Fisher, would be to say that our agenda is pretty full. And so what we hope to do is serve as a catalyst to bring together the stakeholders who -- well, for example, as I said just outside in the press conference, the people who provide the treatment all day long and who then see that treatment undone in the evenings; so our goal is to bring together the stakeholders and help them to discuss with us what would be the criteria for the RFOs, what would be the enforcement procedures, what would be the role of DSS in guaranteeing safety, what would be the role of the Department of Health, for example, in guaranteeing effective, therapeutic settings for the clients in these homes. So that's our role, to be catalytic. But I can't image personally that the commission could take on that responsibility.

D.P.O. VILORIA-FISHER:

Okay. Just putting it out there.

MR. KOUBEK:

Okay. Did you find your earring?

D.P.O. VILORIA-FISHER:

No, but I'm going to put out a search.

MR. KOUBEK:

It's probably with my wife's missing earring.

*(*Laughter*)*

D.P.O. VILORIA-FISHER:

Thank you.

CHAIRPERSON BROWNING:

Okay. Next is Kathy Liguori.

MS. LIGUORI:

I'm going to reiterate -- I'm going to repeat what I had said outside. We've all been enticed by the aroma of a freshly-brewed pot of coffee and we've all veered off our diets during a time of stress, seeking that comfort food that only led us to regret. Drug cravings are not any different, except that they're worse, and it's not easy for these people. The effects of drugs on the brain are permanent; we've learned that from Dr. Steven Dewey.

With the rise of drug abuse among teens, it could be anyone's baby living in one of these so-called sober homes. I have a 20-year old son as a junior in college, I have a 16-year old son as a junior in high school, and they tell me they're asked and they say no. Thank God. But again, it could be anyone's baby.

Child care was easily regulated a long time ago to protect a vulnerable population, and we can no longer turn our backs on this vulnerable population as well. Resolution -- Introductory Resolution 1758 is the first baby steps in creating a quality standard. It is incumbent upon all of us, taxpayers included, to continue in leading these people on the right path, and I urge you to do the right thing and vote to pass this legislation. Thank you.

CHAIRPERSON BROWNING:

Thank you, Kathy.

D.P.O. VILORIA-FISHER:

Thank you, Kathy.

CHAIRPERSON BROWNING:

Next we have Dr. Jeffrey Reynolds from LICADD.

DR. REYNOLDS:

Thank you. I'm Jeff Reynolds, I'm the Executive Director of the Long Island Council on Alcoholism and Drug Dependence. Here in Suffolk County we have two offices, one in Ronkonkoma, the other in Riverhead. We do screening, brief intervention, treatment placements, relapse prevention as well as some prevention education work.

Over the past couple of years, we've seen an unprecedented heroin and Opiate crisis here on Long Island, which means that the need for recovery-based services has increased. At the same time, we've seen a recession take hold where folks who have been in recovery for long periods of time, primarily from alcoholism, have begun to relapse, and the numbers that we're seeing and most treatment providers are seeing across Suffolk County are bigger than ever before. And we spend months and months and months getting somebody into a treatment placement, and they spend months, if they're lucky, working on finding recovery. And then they come back to an environment that they think is going to support their recovery and maintain their sobriety, only to find out that there's more drugs there than they've ever been exposed to before.

It's a cruel joke, and it's something that costs us, as the taxpayers, dearly. Aside from the health and human service cost of this, the reality is we're spending more when it comes to incarceration, we're spending more when it comes to failed treatment attempts, we're spending a heck of a lot when it comes to overdoses. And here in this County, as you all know, we're experiencing a

hundred overdoses each and every year. That's the price we're paying for this. That OASAS has not taken this cause up and dealt with it and has simply walked away to say, "We can't regulate it, it's not treatment," is criminal.

So I'm thankful and appreciative that there's some action being taken on this to address what we think is a very serious flaw in the continuum of care. Recovery doesn't stop at treatment; in many cases, it only begins at that point in time. We need to make sure we're dealing with addiction as a disease, as a chronic condition and make sure the folks have the support they need when they come back home. Thank you very much.

CHAIRPERSON BROWNING:

Thank you. With that, we have no more cards. Do we have anyone else in the room who would like to speak on any issues? Okay.

MR. PROBEYAHN:

Madam Chair, I would like to speak.

CHAIRPERSON BROWNING:

Sure.

MR. PROBEYAHN:

I don't know your order of business.

CHAIRPERSON BROWNING:

No, go ahead, come on up.

MR. PROBEYAHN:

I want to hear what New York State Education Department has to say.

CHAIRPERSON BROWNING:

Oh, you want to hear about the VESED Bill. Okay, I can -- we can hold off, if you want to wait. Josh, could you get his card from him, please?

MR. PROBEYAHN:

I would like to take this opportunity -- my name is Roy Probeyahn and I live --

MS. ORTIZ:

You have to hold the button, Sir.

MR. PROBEYAHN:

Oh, okay. I live in South Manor, New York, and I'm a 50-year resident of the County and I am opposed to the elimination of the Individual Educational Plan Diploma. So I would like to just keep my remarks at brief for now. Thank you.

CHAIRPERSON BROWNING:

Thank you. And Roy, we should recognize that you sit on the Suffolk County Disability Advisory Board also. So thank you for that.

D.P.O. VILORIA-FISHER:

Roy, may I ask you a question?

MR. PROBEYAHN:

Certainly. Excuse me, let me turn off this phone.

CHAIRPERSON BROWNING:

We have a presentation.

D.P.O. VILORIA-FISHER:

I know. Thanks for being here, Roy. And as you know, we do have a presentation that we'll be listening to, but I would just like to know a little bit more about why you're against the elimination of the IEP Diploma. Because to be honest with you, I'm coming to this wondering about the presentation and, you know, looking forward to what the -- understanding why there's going to be a change, but maybe you can give us your point of view.

MR. PROBEYAHN:

Certainly. And I would be remiss in adding that I also serve on the -- presently called MRDD Subcommittee of the community board, Madam Chair, as well as on the Disability Advisory Board.

This is a very close issue to my heart. Back in 1983 when Roy Junior, my eldest son -- all three of my sons have Autism -- aged out of the school system at 21, I was chagrined to see that he was handed a certificate and not a diploma upon graduation.

People without disabilities who complete their required course of study in the public school system, and private school system for that matter, get a diploma. And it seemed to me to be highly discriminatory against people with disabilities that they would be handed an attendance certificate, simply acknowledging that they showed up; that's disgraceful, number one.

That has now been a fact for 25-years. We've mounted a campaign Statewide called Project Equals, emanating out of the Middle Country School District at the time, and which we won through legislative advocacy, the Board of Regents, to finally relent and grant Individual Educational Diplomas to individuals who were graduating from the Special Ed Programs throughout the State which were mandated by IDEA. That has been in place for 25 years. Without any understanding or warning, the State formed -- the Board of Regents formed a committee through VESED to mount a series of meetings or hearings around the State to consider the elimination of the Individualized Educational Plan Diploma.

Those of us who were opposed to that move went to these hearings here on Long Island and were given the very clear impression that, "Oh, no, that was a misunderstanding of John Hildebrand," the education reporter at Newsday who reported on this and that's how -- the only way we learned about. But yet a clear reading of the memo indicates there's a plan to eliminate the IEP Diploma, and they, again, assured us that that was not the case. In fact, they were planning on adding possibly an additional diploma to help keep kids in school who are technically and vocationally oriented but could not complete the Regents dynamic, and we all said, "Well, that's wonderful," because we want to keep the IEP Diploma and we think it's great that we have another opportunity to keep kids in school and let them get a diploma.

Fiscally it's extremely important. Many of our individuals graduate and get -- by getting a diploma, can get jobs, can apply for and get jobs. And as you may know, the employment rate for people with disabilities is over 80%. So that we can get maybe thousands or tens of thousands who are able to get a job because the employer, many of them national firms, ask a question, "Do you have a high school diploma?" And as long as they can say yes, they can get the job. And tens of thousands of them have jobs, and they would not have gotten them, and those who wouldn't graduate from school now, if we were to take it away, would have to say no. And even though there's a proven ability to work, employers will testify at length about how wonderful our employees are, they like the work, even though they're boring jobs, they show up for work on time every day and they're great employees, and that whole mechanism would come to an end if these folks did not graduate with an IEP Diploma.

We're not trying to fake a Regents Diploma or a local diploma; we have it and agreed to have it labeled IEP Diploma. The employees really don't care. The company has a policy that says, "Do you have a diploma?", and the answer is yes, end of story. I don't even think they know what an IEP Diploma is. But the fact is that this would be additionally discriminatory financially to our folks who can get jobs because they have that diploma, Connecticut offers them and so we would -- and Jersey. We would be at a disadvantage for our guys and gals who graduate and don't get diploma and can't get a job with those firms who have that as a prerequisite to hiring anybody regardless. And I guess that was a longer answer than you wanted.

D.P.O. VILORIA-FISHER:

No, actually, it was not a longer answer at all than I wanted, because that's how I've always understood IEP Diplomas. And I wanted to hear, you know, your personal experience, because we're going to be hearing another point of view, so you gave us a good background to start with. Thank you very much.

MR. PROBEYAHN:

Thank you.

D.P.O. VILORIA-FISHER:

And I was a teacher in the Middle Country School District, probably when your children were there if it's 25 years ago.

MR. PROBEYAHN:

It's close, very close.

CHAIRPERSON BROWNING:

Thank you, Roy.

MR. PROBEYAHN:

You're welcome.

CHAIRPERSON BROWNING:

With that, we have Eileen Taylor, Regional Supervisor of New York State Education Department's Special Education Quality Assurance, and you will speak on VESED. If you want to come and sit at the table here. You still have to put your finger on the button and keep it down.

MS. TAYLOR:

Good afternoon, everybody. My name is Eileen Taylor, I'm the Regional Supervisor for --

CHAIRPERSON BROWNING:

Is your mike on? Or maybe pull it a little bit closer to you.

MS. TAYLOR:

Is that better?

CHAIRPERSON BROWNING:

Is it working?

MS. TAYLOR:

The light is on. Okay, I'll start again. My name is Eileen Taylor, I'm the Regional Supervisor for the State Education Department's Long Island Regional Office of Special Education, formerly VESED; we officially changed our name as of July 1st as a result of the State Education Department's reorganization.

I'm here today to present to you some important points about the department's decision regarding looking at the IEP Diploma and possible alternatives to the IEP Diploma. In 2008, parent and student advocacy organizations and members of the Commissioner's Advisory Panel for Special Education Services raised several concerns regarding the Individualized Education Program, or IEP Diploma. Receiving an IEP Diploma often limits post-secondary opportunities. While earning an IEP Diploma may be an important milestone for a student, it is a diploma that is not often accepted by employers, the military, institutions of higher education, business and trade schools or apprenticeship programs.

The term *diploma* is confusing to students, parents and educators. Many are often not aware that an IEP Diploma is not considered a regular high school diploma. Because it is intended only for students with disabilities, the IEP Diploma identifies an individual as having a disability, raising concerns about violating an individual's civil rights.

The IEP Diploma was instituted at a time when access to education was the focus for students with disabilities. Much has changed regarding the expectations and outcomes for individuals with disabilities since the IEP Diploma was initiated in 1984 as an option to a Certificate of Attendance. For example, in 2009-10, nearly 13,000 students with disabilities passed the English Regents Exam, as compared to less than 2,500 in 1997. Fourteen times as many students with disabilities are now earning a Regents Diploma as compared to 1996.

Despite this progress, more than the expected percentage of students with disabilities continue to exit school with an IEP Diploma. Approximately 1% of New York State students, which is about 8% of students with disabilities, has significant cognitive disabilities; these are the students that we would expect to earn an IEP Diploma. However, for students entering 9th grade in 2005, 1.6% of students or 11.5% of students with disabilities in New York State exited school with an IEP Diploma after four years of high school. There are regional variations to these percentage of students that are awarded IEP Diplomas. Data indicates that students entering 9th grade in 2005, 4.1% of students with disabilities in low-need areas earned an IEP Diploma compared to 18% of students with disabilities in rural, high-need areas.

As a result of these concerns, the department sought extensive stakeholder input through written comment and series of public discussions. It was clear from the public comment that there was a need for parents, students and educators to have a better understanding of the current requirements regarding the IEP Diploma and its potential limitation on post-secondary opportunities.

In April of 2010, the State Education Department issued a memorandum regarding the IEP Diploma, and I did bring copies of that memorandum if you would like to have an opportunity to view that document. It's also available on the State Education Department's website for the Office of Special Education. There was strong support from parents, educators and employers for the department to develop -- and employers, for the department to develop a high school exiting credential for all students, including students with disabilities, which would document a student's academic and career skills.

Concerns regarding the IEP Diploma and the concept for an alternative credential were discussed at several Board of Regents meetings held in July, 2008, April, 2009, June, 2009 and January 2010. The department is now in the process of developing the proposed policy framework and documentation requirements for this credential. Key stakeholders and other experts have been and will continue to be involved in this development.

The credential is proposed to supplement a regular high school diploma, and for students with disabilities, serve as a replacement for the IEP Diploma. It is designed to document a student's level of skills and strengths with respect to the career development and occupational study

standards which are three out of the 28 learning standards. These skills focus on career development, applying learning to real work situations and development of skills necessary for success in any workplace, including but not limited to basic academic, problem solving, decision making, time management, personal social skills, etcetera.

For students with a specific career major, it is proposed to document career-specific skills and any industry-based credentials that the student has earned. Designed to drive instruction, the proposed credential will include increased opportunities for provision of course credit for vocational experiences, including service learning, internships and community-based work experiences. The proposed credential is intended to provide meaningful documentation of skill-based achievement in preparation for employment or post-secondary training or education that will be recognized by colleges, work-related training programs and employers.

The proposed credential will be shared with the Board of Regents at the November meeting. Pending approval, staff will work with a small group of external experts to further refine the credential and develop guidance materials and training programs. Public comment will continue to be integral to the development of the process as regulatory changes and timelines for implementation are proposed. Prior to Statewide implementation, the credential will be revised as appropriate based on public comment and recommendations from experts and key stakeholders. Extensive training and staff development will be provided.

CHAIRPERSON BROWNING:

Okay. Legislator Viloría-Fisher has a question for you.

D.P.O. VILORIA-FISHER:

Just very quickly; when is the public comment period?

MS. TAYLOR:

Right now they're working on the development of the framework that will be presented to the Board of Regents in November. And depending upon whether the Board of Regents approves moving forward with what they have completed so far, then public comment will be scheduled. There has been some opportunity for public comment prior to this point.

D.P.O. VILORIA-FISHER:

Okay.

CHAIRPERSON BROWNING:

Okay. Did you want to continue?

MS. TAYLOR:

No, unless you have questions. I can leave you with the memorandum that I mentioned that explains more in detail about the IEP Diploma, if you would like that.

CHAIRPERSON BROWNING:

So what I'm trying to understand is that eventually you're going to be doing away completely with IEP Diploma.

D.P.O. VILORIA-FISHER:

Uh-huh.

MS. TAYLOR:

That is where we're working towards.

CHAIRPERSON BROWNING:

So again, you know, you mentioned that there's a number of children who were passing the Regents English tests and, you know, that are getting diplomas, but you still that have that population. I know in my school district, because of budget issues, they're not sending a lot of the kids out any more. They have kids with Down Syndrome, you know, Autism, you have many children with disabilities; what about the population of kids who are not passing the Regents tests and now they come to graduate and there's no diploma for them?

MS. TAYLOR:

Well, right now there's the Regents Diploma and the Local Diploma. The IEP Diploma is not considered a regular high school diploma.

MR. PROBEYAHN:

We know that.

CHAIRPERSON BROWNING:

So the school will still have --

MS. TAYLOR:

So unfortunately, what has happened is that because it has the name *diploma*, many individuals or parents, students, etcetera, believe that it is equivalent to a regular high school diploma and it is not, because it is not standard-based. It doesn't require a student to earn a certain number of credits for demonstrating skills, you know, across a specific standard, so it's not a regular high school diploma.

CHAIRPERSON BROWNING:

Well, and I'm trying to understand it better. I know Frank Krotchinsky is here. Frank, you're with the Suffolk County Disability Advisory Board, and I know the board has chosen to take a position and oppose the elimination of the IEP. Would you like to come up here and share some comments?

MR. KROTSCHINSKY:

Certainly.

CHAIRPERSON BROWNING:

We need you on the mike. Josh? Hold the button when you speak.

MR. KROTSCHINSKY:

Good afternoon, Legislator Browning and Members of the Committee. Good afternoon, Ms. Taylor. I am Director of the Suffolk County Office of Handicapped Services; as such, I'm also a member of the Suffolk County Disabilities Advisory Board. The purpose of that board is to advise members of the Legislature, as well as the County Executive, on issues affecting people with disabilities.

We did have a meeting, at which time these issues were discussed, probably a month or two ago. And I know that a fellow member of my board, of the Disabilities Advisory Board, Mr. Probeyahn, has already addressed this committee and has done so ably and has addressed the position of our board, and that is that we are opposed to eliminating of the -- elimination of the IEP Diploma. We feel that eliminating that diploma would be, in effect, throwing out the baby with the bath water. Perhaps the diploma has been issued in some cases where it shouldn't have been issued, but we feel that that -- those kinds of problems would be better addressed by correcting those inappropriate and eliminating those inappropriate uses of the diploma.

Parents of children, young adults with cognitive disabilities, fought long and hard to have a document issued at the end of the school period which is a diploma, and finally, they were granted that. And when an attempt was made I think a year or two ago to eliminate the IEP Diploma, they once again got up to fight elimination of the diploma. The diploma is -- and after that fight, were given assurances by the Education Department that the diploma would not be eliminated. All of a sudden, this issue rears its head again.

The problem is that it is extremely important for these individuals to have a document which is a diploma. These individuals can work and have productive lives in society. Employers recognize a document called a diploma; a college understands the difference between an IEP Diploma and a regular Regents High School Diploma or a local diploma. And that's really what counts, is are the colleges going to inappropriately admit students who haven't met the standards? There are instances of students that have gone to college after being issued an IEP Diploma, because the colleges have found, in reviewing the IEP and in reviewing the goals and the standards that those individuals have met, colleges have found some of them to be qualified.

Likewise, employers, when they see a child that may have -- or a young adult that may have a cognitive disability or some other disability that has prevented them from graduating with a Regents or a local diploma, these employers, perspective employers, respect the fact that nevertheless the young adult graduated with a diploma; regardless that it's an IEP Diploma, it's a diploma, it's important. And for that reason, the board has taken the position that it has, which is we oppose elimination of the IEP Diploma.

CHAIRPERSON BROWNING:

Vivian?

D.P.O. VILORIA-FISHER:

Very well stated. Thank you for being here, Frank. And I did have a chance to speak with Ms. Taylor before the meeting began. And I have to say, I'm going to take time to study what the Education Department has done thus far regarding this issue, but my inclination is to agree with you, that people who have cognitive disabilities have fought hard to receive their educations in our public school systems and that the word *diploma* does carry meaning in society.

And it seems to be me that to say that there will be credentialing done of students and that it would supplement the regular diploma and replace the IEP, it doesn't make any sense. The local and Regents Diploma should be the credentialing for somebody to receive a diploma; there are standards set. And perhaps it could be this credentialing that would supplement the IEP to let people know at what level people are graduating. That's why I asked about public comment, because it just seems to me that sometimes the Regents, in its great wisdom, makes a lot of mistakes.

I was a teacher for 35 years, so I don't always agree with things that are handed down from New York State. I think the people with boots on the ground who are in the classrooms who have children that have gone through this -- and I have had students who have graduated with IEPs who have gone and taken college courses because they have had the ability to take certain courses. If the military doesn't understand what an IEP Diploma is, then maybe the military needs to be educated as to what it is. So we spend an awful lot of money on bureaucratic running around in circles, and I think that's what this is. We have an IEP -- IEPs are very clearly spelled out; in fact, in an IEP, you often have a lot more detail than in other evaluative processes.

So as I said, I will read the memo that you referred to and see what the basis of this is, but my inclination is to be exactly where you are, Frank. I just don't see the sense in doing this to people who feel -- when you've seen kids in graduation who have IEP Diplomas and you see the pride on their faces and you see the pride on their parents' faces and what they've had to overcome in order

to walk down and get a diploma like everybody else, this is not fair. It's not fair. And that's what's discriminatory, not calling it an IEP Diploma, but denying them a diploma. Saying that you just have an attendance certificate is saying that they were just present.

I've taught Special Ed kids and I know, you know, what they do and how hard they work. I don't really agree with this happening. And I'm sorry that I didn't realize this was happening before this initial public comment period was closed, and unfortunately a lot of advocates didn't know that it was going on early enough in the process, and that's unfortunate.

MR. KROTSCHINSKY:

Thank you.

CHAIRPERSON BROWNING:

Well said.

D.P.O. VILORIA-FISHER:

Sorry, I get carried away.

CHAIRPERSON BROWNING:

I think she said it well, the former teacher. But with that, I mean, I know how hard the Advisory Board has worked and discussed this, and I feel with personally no IEP Diploma, I think it's discrimination against the children with special needs.

So with that, I don't think we have any more questions. John? No. One? Legislator Muratore.

LEG. MURATORE:

Ms. Taylor?

MS. TAYLOR:

Yes.

LEG. MURATORE:

You said this is not a diploma, but it's called a diploma.

MS. TAYLOR:

It's called a diploma, but it's not a regular high school diploma.

LEG. MURATORE:

So to the Chair; what can we do about it to make sure that this stays a diploma as the Suffolk County Legislature?

CHAIRPERSON BROWNING:

Well, I think it's more what can the State do about it. But this is -- the IEP diploma, it's a New York State issued diploma. The local diploma that you talk about is not issued, that's just a diploma from the school district; correct?

MS. TAYLOR:

The IEP Diploma is issued by the school district. It's not a -- well, it's not a diploma. It's called an IEP Diploma; it's a document that looks like a diploma, but it is identified as an IEP Diploma.

CHAIRPERSON BROWNING:

And recognized by the State of New York at this time.

MS. TAYLOR:

However, there's no standards that accept -- it's an individual standard that is based on the individual's abilities on his IEP.

*(*The following testimony was transcribed by
Denise Weaver - Legislative Aide*)*

CHAIRPERSON BROWNING:

Right, and that they have reached their abilities to the best, to the highest, and they get an IEP diploma. They get that IEP diploma because they've done everything that they can.

MS. TAYLOR:

They are eligible to earn -- I'm sorry. They're eligible to earn an IEP diploma after receiving 12 years of education; not that they've met a certain standard. Once they meet the 12 years of education, then the district can issue them an IEP diploma.

CHAIRPERSON BROWNING:

Okay. And what's the -- maybe, Vivian, you can jump in any time as the teacher, because you have the local diploma. But the IEP Diploma is recognized at this time by the State; correct?

MS. TAYLOR:

Not as a diploma. It's not recognized by the State as a diploma. It's not recognized by the Federal Government and all our data.

CHAIRPERSON BROWNING:

Okay, then explain the local --

MS. TAYLOR:

For students who have graduated from high school, it's not counted as a child being -- as a child graduating from high school.

CHAIRPERSON BROWNING:

And so you have an IEP Diploma, you have a Regents Diploma and you have local diplomas?

MS. TAYLOR:

Uh-huh.

CHAIRPERSON BROWNING:

What's the difference between a local diploma and an IEP?

MS. TAYLOR:

The local diploma requires the student to pass certain assessments. The IEP Diploma does not require a child to achieve a specific standard or pass certain assessments. The IEP Diploma is given to a child -- can be issued to a child by the school district after 12 years of instruction.

CHAIRPERSON BROWNING:

Okay. If I have an IEP Diploma, I can go to my local community college with that diploma; no?

MS. TAYLOR:

No. No, it's not a recognized diploma. They do have some programs at community colleges --

CHAIRPERSON BROWNING:

That's what I thought, because VESED --

MS. TAYLOR:

-- for students who have not graduated from high school.

CHAIRPERSON BROWNING:

Okay. And the same goes for the local diploma?

MS. TAYLOR:

The local diploma is a diploma.

D.P.O. VILORIA-FISHER:

They can go to college.

CHAIRPERSON BROWNING:

They can go to a local college? Okay. I think I know what you're saying, but -- anyway, I guess there are no more questions. I appreciate you coming in.

MS. TAYLOR:

Thank you.

CHAIRPERSON BROWNING:

And Frank, I thank you for bringing it to our attention, and continue to work with the advisory board.

MR. KROTSCHINSKY:

Thank you for hearing us.

CHAIRPERSON BROWNING:

You're very welcome.

*(*The following testimony was transcribed by
Lucia Braaten - Court Reporter*)*

I guess with that, we have -- Dr. Tomarken I believe is still in the room. Okay. The reason why I asked you to come was to kind of give us a little bit of information, you know, where's -- there's a vote coming up to sell the John J. Foley Skilled Nursing Facility and, you know, while there's a number of purchases continuing to go on, we'd kind of like to get some information from you as to what the purchases are, you know, how those purchases were being funded, what monies are being used, so if you could go ahead and give us that information.

COMMISSIONER TOMARKEN:

Thank you, and good afternoon. I received a letter from Legislator Browning with specific questions, which I have addressed in a letter back to her and to all the members of the Committee. So the first was dealing with the new Administrator. A new Administrator was -- took over on August 1st, his name is Jeff Hoffman. You have a copy of his CV. He has approximately 20 years experience as a Nursing Home Director and Administrator, and is currently on the job, he's been there a little over a week. His tenure started at the end of Mr. Fine's contract, which Mr. Fine chose not to renew. So that's our Administrator. I'll go down to the staffing and then come back to the purchases.

In my E-mail, I mentioned that Dr. Pigott was our acting Director. As of yesterday, I appointed Dr. Crowley, one of our staff physicians, to be the Medical Director of John J. Foley. There is an additional geriatrician on staff full-time that we recently hired. We have two other physicians available to work as needed, and we now have the ability to use three part-time physicians from our health centers to supplement any activity, holidays, illness, whatever, to complement the staff. So

we are -- and actually today I just finished interviewing another potential physician, because the two physicians that are filling in with us are -- really have duties in other areas, so we're in good shape medically.

In terms of the purchases, I sent you and Excel spread sheet, and you can see the first roughly ten items with the word "capital" next to them on the far right, the capital purchases, which amount to a little over 163,000 for 2009. The remaining pages with purchases on it are purchases that came through the Dormitory Authority grant, and that amounts to approximately a little over a million dollars. And that's a variety of items from computers for the EMR System, furniture for the smoking area, remodeling to the front entrance area, software, defibrillators. As you can see, it's -- what the items are. So all that has come through the Dormitory grant, and there have been no purchases, fixed capital purchases out of our operating budget in 2009-2010.

CHAIRPERSON BROWNING:

Question? I knew you did. Go ahead, John.

LEG. KENNEDY:

Thank you, Madam Chair. Hi, Doctor. How are you? Thank you for being here. Let's start with the Administrator. So the Administrator, unlike Mr. Fine, is actually a County of Suffolk employee. Did he get hired into a Suffolk County Civil Service title?

COMMISSIONER TOMARKEN:

Yes, yes.

LEG. KENNEDY:

He did.

COMMISSIONER TOMARKEN:

Yes.

LEG. KENNEDY:

So he's going to go through the regular probationary, six-month probationary period, and assuming that he was there and he passed muster, then he would convert to permanent status?

COMMISSIONER TOMARKEN:

Yes, yes.

LEG. KENNEDY:

Okay. Let's go to the equipment. One of the things that I had heard was that, actually, recently we had had a number of -- I'm going to mangle the term -- bariatric, is that it, bariatric beds? They are high-end electronic beds that allow for patients that are, I guess, obese, relatively expensive pieces of equipment that had been brought in. Also, I believe that there was a significant amount of high-end physical therapy equipment for our PT center.

COMMISSIONER TOMARKEN:

In the list, let me address the physical therapy. There is -- on the third item down, and I'm not -- I can't tell you if those are high-end or not, but physical therapy machinery, so there is a balance measuring system. To be honest, I can't give you details as to what those are, but I can certainly provide them to you at a later date, but --

LEG. KENNEDY:

Well, that's okay, Doctor. I don't have the list in front of me --

CHAIRPERSON BROWNING:

I do.

LEG. KENNEDY:

-- but I guess my point is, is that the operations at the facility most recently have been enhanced significantly with the introduction, I guess, of this additional equipment; is that a fair statement?

MR. MARCHESE:

Yeah. I can -- yeah, that's correct. Part of the Dormitory Authority grant that we applied for and received required for us to purchase this equipment. So this was a hundred percent grant-funded equipment that we purchased via that grant. So there's a whole process that we went through and this is some of that equipment to do that.

LEG. KENNEDY:

Okay. Now, I guess I can't help but ask, then, in the backdrop of the contemplated sale, is that something that was reflected in the contract with the prospective purchaser?

MR. MARCHESE:

Yes, it was.

LEG. KENNEDY:

So he would then be -- that was part of the 36 million dollar offer, or is that something that would be reflected above and beyond that 36 million purchase price?

MR. MARCHESE:

The contract details a lot of the give and takes that went on in negotiation. There are some significant facility improvements that need to be made to make the building up to code, if you will, and he assumed a lot of that responsibility, and this was all part of that negotiation where he knew that he was going to get this equipment as well.

LEG. KENNEDY:

Is that the firewall issues that we --

MR. MARCHESE:

Yeah, firewall, electrical stuff. There's a few -- there's a few items.

LEG. KENNEDY:

Okay. So, in other words, it would actually be something that would be considered, I guess, like a debit and a credit between what the value of this additional equipment was and what he might be absorbing in order to do -- to bring back compliance?

MR. MARCHESE:

It was all part of the negotiation. These things were all considered and waived when we were going back and forth with the vendor.

LEG. KENNEDY:

The compliance issue, and I -- actually, this is not fair to you, Doctor, because this is something that's more on I guess just a pragmatic operating perspective. Some of those compliance issues have been known to us for quite some time. I mean, the fire issue has been one that's been around for what, almost a decade?

MR. MARCHESE:

If you really go back, it's actually something that was contemplated from the building's construction. There was -- at the time of the construction, the codes were changing with regard to fire protection and how the firewalls were to be built, and our architects at the time designed it in accordance with what they thought were the standards, and, in fact, those standards have now changed, requiring us to upgrade it.

LEG. KENNEDY:

Did we ever approach the New York State Architectural Board to see whether or not we had an opportunity to either be waived or relieved? Not that we want to compromise safety in the building, but if there is a way for us to address that, would that --

MR. MARCHESE:

Yeah. The answer is yes, and we've worked through the New York State regulatory process, who -- the federal codes are enforced through the State --

LEG. KENNEDY:

Yes.

MR. MARCHESE:

-- and that's who we've been working through.

LEG. KENNEDY:

Okay.

MR. MARCHESE:

And we're not the only nursing home in this situation. All nursing homes that are in the same boat, and hospitals, have to upgrade. The Federal requirements are just requiring those facilities to do the upgrades. They felt the patients' safety was -- had to come first.

LEG. KENNEDY:

And I can understand that. And, as a matter of fact, that's something that I think we would want in any facility. All right. I appreciate that. The staffing issues, I guess, I know you've been very gracious, Doctor, and I appreciate it. I've had a lot of communication going back and forth. Let me just ask again. It's something that I seem to come back to quite often, the use of agency personnel in relation to our regular direct County employees. I know nursing, it seems we go to quite frequently for agency assistance, and I'm just wondering, how is it today compared to where it was last month? Are we having an increase, decrease, are we status quo, what's happening?

MR. MARCHESE:

I'm responsible for the day-to-day operations.

LEG. KENNEDY:

That's fine.

MR. MARCHESE:

So it's probably more appropriate for me to go through that.

LEG. KENNEDY:

Sure.

MR. MARCHESE:

We currently have actually SCINs released from the County Executive that we're trying to hire, but given the uncertainty surrounding the facility, it's actually becoming very difficult for us to get an RN or an LPN to come over, given the uncertainty. As soon as I think this is cleared up one way or the other, that probably will ease up and we'll be able to hire. As a result of that, our agency use has been increasing, because we still have to operate the facility in a safe manner. So our professional staff, meaning the RNs, LPNs, we've been utilizing the agencies to a good deal. And to the extent that we've been able to cover with overtime, we've also been utilizing significant overtime, and that is also part seasonal as well, because, obviously, August is a big vacation time. So it's just a little bit difficult, more difficult now than it will be in September, for us to meet shift needs.

LEG. KENNEDY:

Okay. Again, I guess I can appreciate some reluctance, but I will tell you, we just graduated 220 nurses from Suffolk Community's program in May and there is --

MR. MARCHESE:

Send them to us. Send them to us.

LEG. KENNEDY:

You know what, I will be happy to. I will be happy to put the message out there. Okay. That's all. Thank you.

CHAIRPERSON BROWNING:

Anyone else? You know, I'm looking at the list here and I'd love to know who went shopping, because they've got some expensive taste. You know, we're looking at \$100,000 for security cameras. Where are these -- we don't have security cameras? We don't have a system in place right now?

MR. MARCHESE:

We upgraded the entire security system to help us control elopement and to manage the -- not only the staff and all the patients, and also to help us with the smoking area that needs to be monitored. So it was a complete overhaul of our security system at that facility.

CHAIRPERSON BROWNING:

Okay. I mean, simple little things that I'm looking at, three loveseats for over \$3,000. Is there something special about these loveseats, or did you just go to the most expensive furniture store in town and pick up loveseats?

MR. MARCHESE:

No. All of -- those are for patients, by the way, so those are in the patient areas. They're not in employee lounges, those are in patient areas. All of this stuff that was purchased was off of County bids and those are what we used. I mean, that's how we have to buy equipment and supplies.

CHAIRPERSON BROWNING:

So we have people who bid on the furniture sales and we pick the lowest bid.

MR. MARCHESE:

I would think.

CHAIRPERSON BROWNING:

I'm looking at it and I'm thinking I could furnish my house. A thousand dollars a loveseat? I could probably buy a living room set for a thousand dollars. Twenty-four bedside chairs. What's -- I mean, \$10,000 for 24 bedside chairs. That's almost \$500 a chair.

MR. MARCHESE:

Yeah. These are not chairs like --

CHAIRPERSON BROWNING:

What are they?

MR. MARCHESE:

These are patient chairs, so they can sit comfortably next to the bed, instead of being in a horizontal position in bed, so they're not just simple chairs.

CHAIRPERSON BROWNING:

So they're the recliner types, they're not just a --

MR. MARCHESE:

Yeah, these are chairs in the patients' rooms, where if you get the patient out of the bed and sit them up, that that's where they'll sit.

CHAIRPERSON BROWNING:

Okay. It's just when we read this and look at it and say, "Wow." You know, they're some pretty expensive chairs. And, again, if this is a bid process, I think maybe we need to go shopping somewhere else, to be totally honest with, with the prices that I'm looking at.

Now, the capital list, okay, there's the list that's numbers 18 and down, I believe it is, that is all HEAL Grant money?

MR. MARCHESE:

Yeah, that's part of the Dormitory Authority grant.

CHAIRPERSON BROWNING:

Okay. And the capital part, we're paying for that, so that's -- we're bonding that?

MR. MARCHESE:

Yeah. Capital money would have been bonded, and that would have been in the plan. You know, our Capital Program goes on for a multi-year program, so that was started prior.

CHAIRPERSON BROWNING:

Okay.

MR. MARCHESE:

You know, most of the capital equipment there is related to the physical therapy area, and we did -- made a major expansion a couple of years back, and that was the focus of Foley, was to try to increase our physical therapy area, and so part of that is you need the proper equipment to take care of the patients.

CHAIRPERSON BROWNING:

Okay. Again, I'm looking at the prices. What -- an elliptical trainer bike for \$4,000. Is that some kind of a special bike, or is it something you would find in a sports place?

MR. MARCHESE:

Well, all of the equipment in the physical therapy area has to be of good -- obviously, good quality, I mean, and it is specialized, because it has to be adjusted to each individual patient's needs. And physical therapy equipment is very expensive. I mean, that's -- it is -- that's what it is, yeah.

CHAIRPERSON BROWNING:

Okay. Well, again, I think you need to look for other bids, because some of these prices are outrageous. Anyone else have any questions? No? Okay. Well we appreciate it. And, again, going back to the Doctor, you know, you're using doctors from different departments. I mean, at some point in time, are we going to have a regular full-time doctor?

COMMISSIONER TOMARKEN:

Let me clarify that. The new Medical Director requested to go to Foley and work there full-time and that is her position. We hired a second physician, who is a geriatrician by training, geriatrics, who is full-time at Foley. So those two are two full-time, exclusive to Foley, medical practitioners. We have backup of other physicians who do other duties who -- if we need them. In addition, I just interviewed today, and we still have a few others to interview for an additional either full-time or part-time physicians for Foley exclusively. So we have two full-time, and we're looking -- we have other part-time, and we're looking for a few more either full or part-time, depending on what's available.

CHAIRPERSON BROWNING:

Okay.

MR. MARCHESE:

We also have two full-time Nurse Practitioners as well.

CHAIRPERSON BROWNING:

All right. Okay. Well, I thank you. And I guess no more questions?

D.P.O. VILORIA-FISHER:

No. Thank you.

*(*The following testimony was transcribed by
Denise Weaver - Legislative Aide*)*

CHAIRPERSON BROWNING:

With that, I guess we'll go on with the agenda. I know Commissioner Blass was here, I don't know if he has -- does he have any comments or anything he'd like to report before we go? Commissioner, if you do have any -- is there anything specific you'd like to speak on?

COMMISSIONER BLASS:

No, Madam Chair.

CHAIRPERSON BROWNING:

Okay.

COMMISSIONER BLASS:

I appreciate the courtesy. We will, of course, study the resolution that has been brought before the committee relative to the RFQ on sober homes.

CHAIRPERSON BROWNING:

Sure.

COMMISSIONER BLASS:

Thanks.

CHAIRPERSON BROWNING:

I believe Legislator Viloría-Fisher will have a question for you when we get to it. With that, I guess we'll go to the agenda.

TABLED RESOLUTIONS

1300-10 - Maintaining a common sense policy for housing sex offenders that protects and safeguards public safety (Stern). I'll make a motion to table. Do I have second? Legislator Muratore. All in favor? Opposed? Abstentions? The motion is ***TABLED (VOTE: 4-0-0-1 Not Present: Legislator Eddington).***

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 (County Executive).

D.P.O. VILORIA-FISHER:

Table for public hearing.

CHAIRPERSON BROWNING:

Motion to table for public hearing, Legislator Viloría-Fisher. I'll second. All in favor? Opposed? Abstentions? ***It's TABLED (VOTE: 4-0-0-1 Not Present: Legislator Eddington).***

1502-10 - Directing the Department of Social Services to close the sex offender trailers (Schneiderman). I'll make a motion to table. Second?

D.P.O. VILORIA-FISHER:

Second.

CHAIRPERSON BROWNING:

Legislator Viloría-Fisher. All in favor? Opposed? Abstentions? ***It's TABLED (VOTE: 4-0-0-1 Not Present: Legislator Eddington).***

1634-10 - Establishing community safeguards from registered sex offenders placed in emergency housing. (Schneiderman).

D.P.O. VILORIA-FISHER:

Motion to table.

CHAIRPERSON BROWNING:

Motion to table, Legislator Viloría-Fisher. I'll second. All in favor? Opposed? Abstentions? ***It's TABLED (VOTE: 4-0-0-1 Not Present: Legislator Eddington).***

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

MR. NOLAN:

It was withdrawn.

CHAIRPERSON BROWNING:

Oh, it was withdrawn? Okay. ***1654 has been withdrawn.***

INTRODUCTORY RESOLUTIONS

1745-10 - Approving the consolidation of the Pilgrim Psychiatric Center Vital Registration District 5196 and the Town of Islip Vital Registration District 5154 (Presiding Officer).

Does anybody have any questions on that? I bet you do.

LEG. KENNEDY:

Absolutely, Madam Chair. As a matter of fact, if anybody can tell me what this means or what the significance of it is, I would appreciate it.

*(*Laughter*)*

How about that?

CHAIRPERSON BROWNING:

I'm not sure if the Doctor knows either, entirely.

LEG. KENNEDY:

Okay.

CHAIRPERSON BROWNING:

But if you can try and take a crack at it, it'd be good.

COMMISSIONER TOMARKEN:

Legislator Kennedy couldn't have said it clearer. We couldn't figure out what it was, but we did get in contact with Dean Weinstock, Executive Director of Pilgrim, PC. He has no knowledge of this; that's what he's written back to us.

CHAIRPERSON BROWNING:

Okay. Counsel has a comment, maybe he can explain.

MR. NOLAN:

Well, that's curious, because basically these are districts that record births and deaths. The Town of Islip is one of those districts and Pilgrim is one, and both -- we received correspondence from both the Town of Islip and from Pilgrim asking that we approve the consolidation. Under State Law, the County Legislature has to approve the consolidation and so that's why the resolution is before this body.

CHAIRPERSON BROWNING:

Craig? I think Craig had a comment. Did you want to add to it?

MR. FREAS:

What George said, the -- Pilgrim actually requested it, that was my understanding from the correspondence provided with the resolution. There basically aren't enough deaths or births at Pilgrim to require a separate Vital Registration District for Pilgrim and the Town of Islip. So what they're doing is they're joining the two together and they're just going to keep the Islip Town Vital Registration District number. So it's not like the people won't be counted, they'll just be counted under the Town of Islip and not under the Pilgrim Special District anymore.

MR. NOLAN:

And I just add that we have a letter as backup from Pilgrim Psychiatric Center from Dean Weinstock by Margaret {Simea} who is a registrar. So I don't know why Dean Weinstock would have said they don't know anything about it; it's bizarre.

(*Laughter*)

CHAIRPERSON BROWNING:

You done?

LEG. KENNEDY:

I guess, yeah. Okay.

CHAIRPERSON BROWNING:

Consolidation can be a good thing.

LEG. KENNEDY:

Okay.

CHAIRPERSON BROWNING:

So I guess I'll make a motion to approve. Second, Legislator Muratore. All in favor? Opposed? Abstentions? *It's APPROVED (VOTE: 4-0-0-1 Not Present: Legislator Eddington).*

1758-10 - Authorizing a Request For Qualifications to responsible sober home operators (Browning). I'll make a motion to approve. Second, Legislator Muratore. And I guess, Vivian, you have a question?

D.P.O. VILORIA-FISHER:

Oh, yes, about the RFQ?

CHAIRPERSON BROWNING:

Commissioner Glass?

COMMISSIONER BLASS:

Confusing those two names, it brings back memories.

CHAIRPERSON BROWNING:

Sorry.

(*Laughter*)

COMMISSIONER BLASS:

That's okay, I don't mind at all. Yes, Legislator Fisher.

D.P.O. VILORIA-FISHER:

Yes, I just had a couple of questions. Because as you know, we've gone round and round with the issue of the sober homes and, you know, the regulatory abilities. You know, we had asked years ago about having a social worker or somebody of that sort on staff 24-hours a day to help with people who were in need of help who we're trying to get on the straight and narrow, and OASAS always seemed to block what we were trying to do locally. So I'm curious, what element would we be allowed to have in the RFP in order to ensure that these sober homes are safe homes, that they're helping the clients, that they're protecting the neighborhoods, and still be in compliance with the OASAS regulations? I don't know if I'm clear because, you know, this has been so complex over the years.

Ed, you're smiling very broadly. So he's saying "Hmmm, been down that road before." But maybe you can help me understand how we can build an RFP that will give us the ability to address the issues that -- with which we've been confronted in Suffolk County.

COMMISSIONER BLASS:

I'll let Ed explain his mirth in a moment, because it's an ironic question. The questions you pose are the cogent questions that are presented to us as we -- as we confront this challenge of complying with the resolution, which we are going to do everything we can to try to accomplish, but the challenges are very real.

Sober homes are not emergency housing. Emergency shelters are the mandate that Social Services has under State Law to regulate. But when it comes to regulating permanent housing, which sober homes would fall under that penumbra, that is where it's problematic. To assure quality takes a level of expertise that goes beyond emergency shelter administration. To accomplish and assess who should be referred to a sober home also involves a level of expertise that we, at this time, lack. But how we approach this is -- the most central issue is how do we determine, as a Department of Social Services, whether a sober home has the proper basis and features to stay in business or to be shut down. These are things Social Services, as a department, has never done before; and I'm not saying that we won't do it, I'm just saying that we'll have some difficulty and it will take us a reasonable amount of time to evaluate what we do to meet those challenges and how we do that.

D.P.O. VILORIA-FISHER:

Mr. Koubek mentioned putting together a board of stake holders and experts to help to develop this. Would that be something to which you would be open?

COMMISSIONER BLASS:

If the Legislature, as the policy-making body, creates such a board --

D.P.O. VILORIA-FISHER:

Well, do you think it would be helpful? Of course you would be open if we put it together and we said that you had to do it, but would that help to navigate this?

COMMISSIONER BLASS:

It probably would be helpful, yes. But I cannot say whether it would arrive at the solution of that expertise to assess an individual who is in need of recovery, a recovery environment, and then to determine whether that individual should then be referred to a sober home. We've never done anything like that before, and that's where the oversight committee might help.

D.P.O. VILORIA-FISHER:

Well, clearly I don't have your expertise. And maybe I'm a little confused, but I thought what we were doing was assessing the people running the sober homes and not the clients.

COMMISSIONER BLASS:

The RFQ that's contemplated calls for seeking proposals of those who are qualified, and then it says in the legislation itself that, *"to whom the department would send referrals."* And that's something that when you read that, as a Commissioner, you, of course, are -- and I discussed this with Legislator Browning and her staff and we're still in those discussions. The sincerity of the effort, the need to deal with the issue, all very real to us.

But just the point about the social worker and 24/7; we understand social workers can only be staffed for eight hours and whether that can be in shifts or not, that's when I'll turn it over to Deputy Commissioner Hernandez.

DEPUTY COMMISSIONER HERNANDEZ:

First, I think Legislator Browning will agree that we've been partners in cleaning up the -- attempting to go clean-up what we refer to as sober homes, especially in her district, so our commitment to that effort does not wane.

Our expertise all along has been health and safety, New York State standards of health and safety. The issue becomes two-fold. One, and I've been part of the Statewide Task Force that's been meeting, that OASAS is being allowed to abdicate their responsibility to assist with this population; we're talking about alcohol and substance abusers, recovering. To have them walk away from the situation and just try to pass it along is -- I was going to say criminal, but it's not a good thing. But our expertise falls a little short. I mean, we're being asked to come up with guidelines. We can certainly comment on health and safety. We open up shelters all the time, we monitor them, we work there; more than willing to participate as a willing partner in this effort. But when it comes to setting the guidelines for what constitutes a therapeutic environment that will assist in a person's recovery, we're lacking in that area.

I mean, there are other groups that are best able to do it, and certainly OASAS, I think Statewide has been charged to do this. So unless we're equal partners in the process with the agencies that have the responsibility and expertise in the areas we don't, it kind of places an unfair burden in terms of giving us the responsibility to do that. We're more than willing to do our fair share in this effort and monitor the way we've been doing it now, but, you know, we need a little help here.

D.P.O. VILORIA-FISHER:

Ed, you know, not to over-use an expression that's been used a lot lately, but let's not let the perfect be the enemy of the good. You know, we may not come up with a perfect solution, but we're talking about sober homes where, you know, there are tricks, you know, people turning tricks right outside of them, they're drinking, they're drug abusing, they're doing everything in peoples' neighborhoods and there are people getting rich on this. So there has to be some kind of middle ground between these people who are just sucking taxpayer dollars, using these -- you know, using clients just to make money off them and not giving them any kind of therapeutic environment at all, and maybe having the perfect situation.

So, you know, the Welfare-to-Work Commission has done a really fine report. You've got good people on your staff who have a lot more expertise than we do sitting behind this horseshoe. And maybe this board that could be made up of great stakeholders who do have a lot of knowledge right here, you know, boots on the ground, people who have been working with substance abuse, you know, people who are substance abusers and who are trying to recover, maybe together we can come up with something. Because, you know what, Ed? I've been sitting here for almost 12 years, and for almost 12 years I've been hearing heart-breaking stories from people out there in neighborhoods; not even from the clients who are trying to recover and are being sucked right back into the horrible life of an addict, but the people in the neighborhoods who feel like they're under siege.

So, you know, I'm supporting this legislation because OASAS is useless. It should not be OASAS, it should be called useless. It's frustrating. It's frustrating to have one Commissioner after another come here and say, "I know what you're talking about," and yet having the State stand in your way because they're not being partners with us.

So, you have our support in whatever you need in doing this. I mean, we're not trying to push you into something that, you know, we're going to turn our backs and say, "We're not going to support you." I really stand ready to support you, however I possibly can, because we've got to help our neighborhoods. Especially now where we're seeing neighborhoods under siege at so many different levels with the economic downturn and, you know, leading to -- you know, I have a Teen Pregnancy Task Force which is talking about a whole new set of problems, and these problems feed on each other. So we just want to see it happen. And maybe we can try to get that board set up as fast as we can to give you the help that you need.

CHAIRPERSON BROWNING:

Thank you. You know, we will continue conversation, I know this is a challenge. But in the five-plus years I've been here, it's been frustrating because OASAS gives you the impression they're going to do something and then they run away. They say they're going to do something, but they never do anything. I believe their board met, I think the last time they met was November last year; am I correct, when they had a board put together to look at these issues?

DEPUTY COMMISSIONER HERNANDEZ:

Their next meeting is September 8th. They sent out a set of guidelines for people to review, which leave a little to be desired, but it may be the basis of a starting point for discussion. But yes, November to the following September, and just something that's not too useful is not progress.

CHAIRPERSON BROWNING:

And they're guidelines for sober homes?

DEPUTY COMMISSIONER HERNANDEZ:

Yes. I will forward a copy to you.

CHAIRPERSON BROWNING:

Gee, I wonder why all of a sudden now they've decided to do something. See, this is the problem. They haven't met since November, now they're meeting in September and they finally come up with guidelines. I think if we wait and let -- depend on them to do it, we'll be waiting six more years.

So, let's take their guidelines and let's see what theirs say. I mean, we -- you've been to the -- you were at the public hearings and we had sober home providers, we had people there who run legitimate, good homes and have regulations and requirements in order to be able to stay in that home. And they're frustrated with the rogue sober home providers, the ones that I deal with every day in my district; they're frustrated with them because they give them a bad reputation. They're trying to do the right thing and, you know, these guys are just making a ton of money, and it's taxpayers dollars.

And I can see probably somebody is going to say, "Well, how much is this going to cost?" Well, guess what? That person who's in that home where there's drug activity going on, he's going to his program, comes back and uses drugs, winds up in jail. I think in the bottom -- in the end, it shows we're spending more and more money every day and, you know, if we're going to spend the money, let's spend it right. You know? That's just the way I see it.

And I did talk with George. You know, I don't know if we went to do it through legislation to create that board. I do want to sit down and talk would you. Jeff Reynolds is still here. You know, we have some great people in the community with -- who are experts and I know are more than happy to work with us to make sure that if we have this network of homes -- I mean, California has that Sober Living Network. They created that because they know the State's coming down with some laws. I have strong support from Amy Paulin, the Assemblywoman in Westchester; finally I'm getting a bit more support up in Albany. But, you know, I think we have to do something, because if we're going to wait for OASAS; we'll be waiting another six years. And you know, we're not helping anybody. And Kathy Liguori had mentioned, you know, kids on heroin, you know, it's not getting any better. We have to make sure we get something for them, yoo.

I appreciate all the help you've given. I will tell you, I did send the -- my bill to Nassau County, to the Chair of Health and Human Services, and asked her to review it, and maybe Nassau County should be doing the same thing. So I am still waiting to hear from her, but I am looking forward to it.

So, with that, I guess we -- I made the motion to approve. Did we get a second, Or did I make a motion to approve?

MR. SLAUGHTER:

Yes, I think Muratore seconded it.

CHAIRPERSON BROWNING:

Okay. I made the motion, Legislator Muratore seconded it. All in favor? Opposed? Abstentions? Okay, *motion is APPROVED (VOTE: 4-0-0-1 Not Present: Legislator Eddington.)*

Are there any other issues that you'd like to bring up while you're here?

COMMISSIONER BLASS:

There are many other issues, but none necessary to bring up at this moment.

*(*Laughter*)*

D.P.O. VILORIA-FISHER:

Wise man.

CHAIRPERSON BROWNING:

Yeah. Well, actually, while we got you.

DEPUTY COMMISSIONER HERNANDEZ:

You're not going to get away.

MR. ORTIZ:

Good try.

CHAIRPERSON BROWNING:

Just out of curiosity; how many retirement applications have you -- have been submitted?

COMMISSIONER BLASS:

We submitted a proposal for 66 retirees, and we did it carefully so as not to impact the validity of our requests for the 2011 budget which are still in discussion, and most of the 66 have been given the green light by the Executive's Office.

CHAIRPERSON BROWNING:

Okay. And what department are they in?

COMMISSIONER BLASS:

It really is an even spread over all the divisions. The one division that was prohibited was Medicaid and Child Protective Services. And we approached this, as the mandate of the Executive's Office was, that this has to be a cost-saving measure, which we understood clearly. And the positions were very carefully discussed internally and we are going to be able to achieve 20% of them, approximately between 20 and 40% of them will be able to be backfilled, but with lower-salaried staff because they'll be new. And 60% will remain vacant, but they will be -- in salaries it will be 80% savings that will not be refilled.

So it was a careful juggling act. It took a lot of intensity of effort and we feel that the department will be able to meet its mandate and allow these retirements to go through.

CHAIRPERSON BROWNING:

Okay. Thank you.

COMMISSIONER BLASS:

Thank you.

CHAIRPERSON BROWNING:

Okay. Next is **1795-10 - Amending the 2010 Adopted Operating Budget to accept and appropriate 100% Federal grant funds passed through the New York State Department of Health for the American Recovery and Reinvestment Act (ARRA) Early Intervention Administration Program (County Executive).**

D.P.O. VILORIA-FISHER:

Motion to approve and place on the Consent Calendar.

CHAIRPERSON BROWNING:

Motion to approve and place on the Consent Calendar, Legislator Viloría-Fisher. Second, Legislator Kennedy. All in favor? Opposed? Abstentions? ***It's Approved (and placed on Consent Calendar - VOTE: 4-0-0-1 Not Present: Legislator Eddington).***

1798-10 - Amending the 2010 Adopted Operating Budget to accept and appropriate 100% Federal grant funds passed through the New York State Department of Health to the Suffolk County Department of Health Services for the Immunization Action Plan (County Executive).

I guess same motion, same second, same vote. ***Approved and placed on Consent Calendar (VOTE: 4-0-0-1 Not Present: Legislator Eddington).***

1820-10 - Appropriating funds in connection with the Stony Brook University Hospital Comprehensive Psychiatric Emergency Program (CP 4018) (Kennedy). I guess that's CPEP, Legislator Kennedy?

LEG. KENNEDY:

Yes, Madam Chair. As a matter of fact, we're very excited and I spoke with Dr. Strongwater today and as a matter of fact, the excavation has just actually begun today to add this addition. That notwithstanding, there is a Memorandum of Understanding that's still being worked out between the County Attorney's Office and Stony Brook, so I have to ask that it be tabled today. Once we have our writing worked out, then we can have the Bond Memorandum issued by Bond Counsel and we can move forward with it.

CHAIRPERSON BROWNING:

Okay. So you've made a motion to table, I'll second. All in favor? Opposed? Abstentions? ***TABLED (VOTE: 4-0-0-1 Not Present: Legislator Eddington).***

D.P.O. VILORIA-FISHER:

John, if you don't mind, I'd like to be listed as a cosponsor on that.

LEG. KENNEDY:

I would welcome it. Thank you.

D.P.O. VILORIA-FISHER:

Madam Clerk?

CHAIRPERSON BROWNING:

1842-10 - Amending Resolution No. 417-2010, ending the voucher system and directing the Department of Social Services to develop a comprehensive plan to house homeless sex offenders (Schneiderman).

MR. NOLAN:

It has to be tabled.

CHAIRPERSON BROWNING:

Oh, Okay. I guess, Counsel says it needs to be tabled, so I'll make a motion to table. Second, Legislator Muratore. All in favor? Opposed? Abstentions? ***It's TABLED (VOTE: 4-0-0-1 Not Present: Legislator Eddington).***

With that, we have nothing more on the agenda, so we're adjourned.

(*The meeting was adjourned at 3:49 P.M. *)

{ } - Denotes Spelled Phonetically