

**VETERANS & SENIORS COMMITTEE**  
**OF THE**  
**SUFFOLK COUNTY LEGISLATURE**

**Minutes**

A regular meeting of the Veterans & Seniors 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 September 11, 2007.

**Members Present:**

Legislator Steven H. Stern, Chairman  
Legislator Jack Eddington, Vice-Chair  
Legislator Cameron Alden  
Legislator Jon Cooper (not present)  
Legislator Jay H. Schneiderman

**Also In Attendance:**

William J. Lindsay, Presiding Officer  
Verna Donnan, Budget Review Office  
Deborah Harris, Aide to Legislator Stern  
Holly Rhodes-Teague, Director of Office for the Aging  
Tom Ronayne, Director of Veterans Service Agency  
Paul Perillie, Aide to Majority Leader  
Debra Alloncius, Legislative Rep for AME  
Joe Dujmic, County Executive's Office  
Paul Arfin, Intergenerational Strategies  
Fred Sganga, Executive Director, New York State Veterans Home at Stony Brook  
Jonathan Spier, Director of Communications, New York State Veterans Home at Stony Brook  
All Other Interested Parties

**Minutes Taken By:**

Diana Kraus - Court Stenographer

**Minutes Transcribed By:**

Denise Weaver - Legislative Aide

**(THE MEETING COMMENCED AT 1:11 PM)**

**CHAIRMAN STERN:**

Welcome. Committee on Veterans and Seniors will come to order. I'd ask everybody to please rise and join us in the Pledge of Allegiance led by Legislator Alden.

***SALUTATION***

I'd ask everybody to please remain standing and join us in a moment of silence, as we always do, keep our brave men and women fighting for our freedoms overseas in our thoughts and prayers. And of course today we have another anniversary of that tragic day of 9/11. And so we always keep in our thoughts and prayers those that we lost on that terrible day and the days after, particularly our first responders. And we remember to remain ever vigilant in the future.

***MOMENT OF SILENCE OBSERVED***

Thank you. Tom, want to come up?

**DIRECTOR RONAYNE:**

Good afternoon, Mr. Chairman.

**CHAIRMAN STERN:**

Director Ronayne, good to see you.

**DIRECTOR RONAYNE:**

Members of the Committee. Thank you for having me back again. The summer is winding down or the summer has now wound down. It's been a bit of a slow season for us although there have been some activities and things taking place. I'll be fairly brief today, partly because we have with us today -- I'm very pleased to have with us at the Chairman's invitation, Fred Sganga, the Executive Director of the Long Island State Veterans Home at Stony Brook and John Spier, the Director of Communications, who I expect will give us a very informative briefing on their programs and their operations. So I'll be intentionally brief.

I did want to touch firstly on two upcoming events. And Legislator Eddington is really spearheading these two. We learned recently that the members of our community in the National Guard, the Army National Guard assigned to the first of the 69th, affectionally known as the Fighting Irish or the Fighting 69th, are going to be redeployed. They are going to be returning again to Iraq. And because of that, Legislator Eddington has prepared a couple of events. One of them he is hosting on October 3rd, which in essence, I think, Jack, it's going to be a veterans benefit seminar to make the members and their families aware of what is and what is not available for them and how to access those services?

**LEG. EDDINGTON:**

Correct.

**DIRECTOR RONAYNE:**

The second will be an actual pre-deployment briefing that we'll be conducting with Legislator Eddington and the leadership of the first of the 69th at the Bay Shore Armory where they are based. There will also be members of the same unit who are assigned out of the Huntington Armory participating in the program.

We'll have at least two service officers from my office in addition to myself there to provide counseling and benefit information not only to the service members but also to their family

members, their dependents, their spouses because there's a great deal that goes on while these folks are overseas doing the job that we're asking them to do. So taking care of the soldiers is only a part of our mission. The family members, their children, their spouses, their dependents are also a part of what we're tasked to insure they receive what they are entitled to. So that will take place on September 16th from noon to three o'clock at the Armory.

The third thing I'd like to just touch on briefly, and I do have a handout, it's really nothing more than a copy of an e-mail chain that I had been included in. We've spoken several times about Honor Flight, which is a program funded entirely or staffed entirely by volunteers who take World War II veterans from around the country and at zero cost to the veterans, they transport them from their hometown, they fly them to Washington DC, they're picked up in a tour bus and they spend the day touring the various war memorials and war monuments in the city. They break for a lunch about midday. And the second half of the day is spent at the World War II monument that was unveiled just a couple of years ago.

Unfortunately, we're losing our World War II veterans at such a rapid pace that not only the declining numbers but all to, unfortunately, the frailty in which many of them are living prevent a lot of them from being able to make this trip.

Again, there is no cost to the veteran, their family. This is done entirely as a service to thank them and acknowledge not only their service. All of the grunt work is done by what we call guardians. And the guardian is nothing more than a volunteer who volunteers to accompany the group on this trip to Washington. The guardians pay their own way. So Honor Flight picks up the tab for the veterans. The guardians pick up their own tab. And on average depending on where they're coming from and going on, it runs about \$200 a guardian. And that covers the discounted airfare, that covers the meals, the transportation and so forth. And each guardian is asked to chaperone two to three depending upon on the conditions and their state of how ambulatory they are or are not. They guardian two to three -- two to three World War II veterans.

It's an extraordinary program. And I'm very happy to say that over the last eight or so months I've been working with a gentleman by the name of Chris Cosich, who is the Long Island point of contact. He's the gentleman who's trying to get the Long Island Chapter of this up and running. I'm very happy to tell you that on October 13th they've got a block of 57 seats flying out of MacArthur on Southwest Airlines to BWI for an Honor Flight on Long Island. And I can tell you that if you can bring this word back to your constituents, there are a number of seats still available. World War II veterans, when I've spoken to them they chomp at the bit at this opportunity. So --

**LEG. SCHNEIDERMAN:**

Do they return the same day?

**DIRECTOR RONAYNE:**

They return the same evening, yes. It's a -- and it's a door to door. They pick you up at your home, fly you to Washington, take care of you during day. And when they drop you off it's back at the house. So they really, really are providing an exceptional service.

**LEG. SCHNEIDERMAN:**

Anywhere in Suffolk?

**DIRECTOR RONAYNE:**

Yes, Jay. Yes, in fact, Mr. Cosich is out in --

**LEG. SCHNEIDERMAN:**

My district is the farthest. And, of course, I am the child of a World War II vet, who's still alive 86 and frail. And yeah, this might be something that my father would be interested in. So -- but I'm sure there may be other constituents in my district as well who -- but we are pretty far from MacArthur Airport. Some of my district like Montauk --

**DIRECTOR RONAYNE:**

Well Mr. Cosich, the gentleman who's spearheading this from Long Island, I want to say he's from East Hampton.

**LEG. SCHNEIDERMAN:**

Really?

**DIRECTOR RONAYNE:**

Could be Southampton, but I want to say it's East Hampton. So he's an east-ender himself. So he fully appreciates the challenges involved in, you know, the logistics of this. And I've included Mr. Cosich's phone number on the handout. So he'd be more than happy to hear from --

**LEG. SCHNEIDERMAN:**

And they provide meals as well?

**DIRECTOR RONAYNE:**

Pardon me?

**LEG. SCHNEIDERMAN:**

They provide meals?

**DIRECTOR RONAYNE:**

Yes, yes.

**LEG. SCHNEIDERMAN:**

Okay.

**DIRECTOR RONAYNE:**

I am told that there is also, depending upon the size of the group traveling, that there is also at least one physician and at least one EMT or paramedic on the trip, every trip. So if there are, you know, emergent or non-emergent medical needs that need to be addressed, they have the capability of dealing with that in the moment versus having to, you know, dial for services and wait for somebody to get there. They actually do travel with medical professionals as a part of their team. So I would encourage anybody who has World War II vet in your district --

**LEG. SCHNEIDERMAN:**

Or family.

**DIRECTOR RONAYNE:**

-- to share Mr. Cosich's telephone number with them. And these folks are really eager to push this program and get it out there for public awareness.

**CHAIRMAN STERN:**

Tom, Mr. Cosich's number is this 325 number?

**DIRECTOR RONAYNE:**

No. It's up on the top. The local contact, Chris Cosich, is 631-267-5744.

**CHAIRMAN STERN:**

Oh, I see, written across the top there, okay.

**DIRECTOR RONAYNE:**

Yes.

**LEG. SCHNEIDERMAN:**

That by the way, is an Amagansett phone number.

**DIRECTOR RONAYNE:**

I'm sorry?

**LEG. SCHNEIDERMAN:**

You're right, that's from my district. That's Amagansett, New York.

**DIRECTOR RONAYNE:**

So Chris and his wife are very active in this. They've come to several public events. They've spoken at the County Executive's Veterans Advisory Board. And I'm very happy to see that they've gotten this October 13th block of seats. This to me sends the message that they are up and running and serving these World War II veterans that we owe so much to.

**CHAIRMAN STERN:**

Legislator Alden.

**LEG. ALDEN:**

Through the Chair, Tom, do you know if this went out to the local American Legions?

**DIRECTOR RONAYNE:**

Again, when Mr. Cosich spoke at the Veterans Advisory Board, we had representatives of all of the major veterans organizations there. And it's part of our mission and the Veterans Advisory Board to take that message back to the respective groups. So I can tell you that the American Legion was exposed to it as was the VFW, AMVETS and most all of the others.

**LEG. ALDEN:**

But I would want to call like to a couple of my local posts, you think?

**DIRECTOR RONAYNE:**

Absolutely, absolutely.

**LEG. ALDEN:**

Good, okay.

**DIRECTOR RONAYNE:**

He is not shy about hearing from people. His worse case is that he's going to have to somehow scrounge and get another X number of seats. Okay. He doesn't not want to hear from people because of limitations and space of seating. He would rather be challenged with trying to figure out how to accommodate additional veterans versus not hearing from them.

**LEG. ALDEN:**

And this is even veterans from the east end?

**DIRECTOR RONAYNE:**

Yes.

**LEG. ALDEN:**

All right.

**DIRECTOR RONAYNE:**

Absolutely.

**LEG. ALDEN:**

From Jay's district.

**LEG. SCHNEIDERMAN:**

Good to know.

**LEG. ALDEN:**

All right.

**LEG. SCHNEIDERMAN:**

It's a long day for them to MacArthur and Washington and back.

**CHAIRMAN STERN:**

Tom, thanks so much. Good to see you.

**DIRECTOR RONAYNE:**

Okay. Thank you.

**DIRECTOR RHODES-TEAGUE:**

Good afternoon. I just wanted to let you know that with the fall comes the changes in Medicare again. October we'll start -- where they start doing their mailings to the beneficiaries on Part D. The plans can start marketing October 1st. The changes for all the plans have to be out by October 31st and the open enrollment period is November 15th. So come November 15th the seniors have until December 31st in order to make any changes to the prescription drug program that they're in.

Just so you know so if get any questions on it, the plans cannot market and sell over the telephone to a senior unless a senior has called them for information. So they can't just get cold calls from these companies trying to sell them a plan over the telephone. That's something that I don't know if everybody's aware of. And if they have any questions, if anybody they think might be scamming them or if there's a question on the plan itself, they can call our office. We'll try to help them out. And then the other place they can call is the 1-800 Medicare number. Quite honestly I think they'd have a better chance of getting through to us than to the 1-800 Medicare number.

I just wanted to let everybody know I do have some forms on some of the dates that are of interest in terms of the health insurance changes. So I'll pass those out to you so you have them for your office. And again if anybody has questions on the health insurance and the Part D and changes that are coming up, we are going to get the information, where to train staff, train the HICAP volunteers and probably our contractors as soon as all those changes come out so they know what's going on for the seniors. I just wanted let everybody know that that is coming up; we are in the fall. So anybody have questions?

**CHAIRMAN STERN:**

Holly, have you seen that telemarketing effort as an issue?

**DIRECTOR RHODES-TEAGUE:**

You know, honestly last year there was some discussions that people were getting phone calls. There were more problems I think this -- with changes this -- the last six months when there was some other -- I can't even tell you exactly what happened but we were getting some less than honest people who were trying to change plans that seniors were in. And I know the state addressed it with the feds and the feds have come up with some stricter guidelines for the companies.

So I'm hoping this year's going to be a little better for the seniors. And we were able to help the seniors who had problems so, you know, it's always good, though, if you have a senior who said that, you know, they -- that somebody was not treating them as well as they think they might be that to give us a call and we'll try to help them out in getting that information to the federal government either through the state, to the feds or to the 1-800 Medicare number directly. Because we don't want to see anybody, you know, get hurt by these companies because there are people out there who are not as honest as we'd like, so. Anybody else?

**CHAIRMAN STERN:**

Questions? Questions? Okay. Holly, thank you.

**DIRECTOR RHODES-TEAGUE:**

Thanks.

**CHAIRMAN STERN:**

Paul. Paul, welcome.

**MR. ARFIN:**

Yeah, thank you. Thank you for the invitation.

**CHAIRMAN STERN:**

Sure. If you could just state your name for the record before you begin.

**MR. ARFIN:**

Yeah, my name is Paul Arfin. And I'm President of an organization by the name of Intergenerational Strategies. And again I thank the Chairman for inviting me. And he made me an offer I couldn't refuse. I said to his aide, what does he want me to speak about? And he said anything you want. So here I go.

Thirty-six years ago along with colleagues I began to come to this horseshoe. It's hard to imagine that it was 36 years ago in 1971. And my discussions were that we had a rapidly growing youth population in Suffolk County and we needed youth services and we needed recreational opportunities for young people. Well, here we are in 1971, decades ago, so I'm here to talk more about intergenerational issues. Back in '71 talking about social issues really was not something that the Legislature was famous for concentrating on.

Today's challenges don't primarily concern a growing youth population but an aging one. Not to say that the challenges facing young people and young families aren't still with us. And my hope today is to stimulate some thinking and discussion about intergenerational issues we face and the opportunities they offer. I do have a handout of my remarks. And if somebody could take them I'll have one for everybody.

I'd like to talk about some broad issues and follow them with some specific ideas. This is an appeal for funding of anybody or whatever. It's an opportunity that I'm grateful for to talk about some ideas and issues and practical responses to them. I recently read a book by the name of What Are Old People For? It's written by William Thomas, a world renowned geriatrician whose previous book the Eden Alternative provides a highly successful formula for transforming nursing homes into elder-center communities that reduce loneliness, helplessness, and boredom among the very old.

I present these ideas to you today because I believe they offer a framework for addressing some of the aging and intergenerational issues facing us today and into the future as our County ages. So each of the half a dozen statements I'm going to make are basically out of this book and the wisdom of -- I'm blanking -- my age is showing -- Dr. Thomas.

For tens of thousands of years children, adults and elders were sustained by a complex multigenerational interchange that occurred predominantly within the context of the family. Despite the advantages of that tradition we no longer have the luxury of fostering exchanges between the young and old solely within the family. In its place, we must develop an approach that embraces community responsibility for its dependent members.

Aging issues are often framed as generational conflict that pits the young and old against each other. These battles damage the ancient alliance between the very young and very old. Both parties are forced to independently confront adults in the public arena and demand access to

resources and advantage treatment. We've seen it here in the Legislature. These battle's weaken the delicate fabric of the human community and the strong inheritance that is the product of our long experience with longevity.

We speak in grave tones of the graying of America and worry about whether the demands made by an aging population will lead to our ruin. But these concerns are trivial compared with the real danger confronting Long Island families, our government, American society and the global environment.

What is often missing from this generational discussion is a proper accounting of what elderhood can contribute to society, a holistic one that appreciates and respects the contributions that people of all ages have made and are making to the pursuit of happiness and our collective well-being.

The current debate surrounding aging in its entitlements is distorted by the nearly exclusive emphasis that's placed on the financial cost of publicly funded programs and the pitiful lack of attention that's paid to the more qualitative elements of the ongoing exchange between the young and the old.

By lionizing youth and using the benchmarks of a healthy adulthood as the gold standard of well-being, contemporary society has created a simple but radical reinterpretation of age and aging. Old age has been recast as a merciless descent from an apex of youth, a hurtling fall and a peculiar form of brokenness that must be resisted with every available means.

Long established ideas about aging and the aged have given way to a public health philosophy that sees the graying of industrial societies as a looming disaster that must be met with ever more creative programs and policies. Missing from these experts' equations is the idea that this bloom of longevity might actually represent a vast reservoir of meaning and worth. We need to restore a healthier, more balanced understanding of the human life cycle that allows us to see old age as part of human development.

The society that cultivates the ability to bring life worth living to the least among us enriches itself beyond measure. When we honor those who can do nothing for others, we enlarge a capacity for compassion that serves all people and serves as a beacon of hope.

In order to develop a more positive view of aging and greater ties among the young and older, I suggest the following ideas: develop a public education campaign through the Office for the Aging and the Youth Bureau that stimulate awareness of the realities of aging that counteract the many myths of aging.

Two, Expand the Office for the Aging's public education activities to older adults and the public at large about healthy and positive aging.

Three, provide incentives to contract youth, aging and family agencies to develop new intergenerational programs.

Four, provide seed funding to enable organizations to develop programs that enable older people to age in their own homes where 90 percent of them want to remain.

We need to stimulate public debate about some heavy duty issues. And I hope that the Legislature and others will be part of this debate. Should Medicare be for all Americans? Should disincentives be eliminated for working into the traditional retirement years? Should we enable eligibility for health benefits after employees leave full-time employment and before they're Medicare eligible? Should sabbaticals be established for individuals who've completed the first half of work and beginning to consider new careers? Should publicly-supported, university-based leadership initiatives be established to prepare older adults for second careers in education, health care and social work, similar to what we did when the troops came home from World War II?

We recognize their education needs and their housing needs. We have issues today. While they're not war related, they're real issues. And this could be a way of partially addressing them.

I suggest that some of these questions be considered by the County itself, in effect as an employer of over 10,000 people. The County could address some of its looming workforce shortages by implementing some of these programs to enable the County to retain some of its valuable older workers and avoid the loss of their institutional knowledge.

And I just want to close, and hopefully there's some comment or discussion, but as I handed out to you, our organization is cosponsoring a conference on Veterans Day called "Intergenerational Programs That Work." I'm sorry. "It Takes a Village Intergenerational Programs That Work." And I encourage you to drop in and be our guest. We're bringing in people from around the country who are operating intergenerational programs that address the needs of immigrants of very old people, of young people, addressing the issues concerning the environment. And we're going to have this at the Wang Center at Stony Brook. And this is part of our effort to stimulate thought and debate about these issues.

**CHAIRMAN STERN:**

Okay. Questions? Paul, thanks so much again for being with us today. And, of course, you're right. The first step in addressing some of these important issues is debating these issues and bringing awareness to these issues that exist now and certainly will just grow exponentially in the future.

Participating in the Countywide Senior Citizen Task Force that we had, you know, over the past couple of months was a great way for both professionals and seniors themselves to be able to participate in that kind of process. This is something that we'll be looking forward to. I guess I would ask when it comes to particular strategies I know you're going to talking about that for an entire day at the conference, but what would you say might be one of the top one or two intergenerational strategies --

**MR. ARFIN:**

Sure.

**CHAIRMAN STERN:**

-- that are going to discussed at the conference?

**MR. ARFIN:**

The Executive Director of a program that started in France years ago is is coming to the conference. It's called "Little Brothers Friends of the Elderly." It's in nine different cities. It's not in the New York metropolitan area. It involves thousands of junior high school and high school young people who go to the homes of homebound elders during holiday times, they make telephone phone calls, they make home visits, they celebrate holidays together. It's part of what I talked about earlier, that the family is not there all too often. And we need to think about how we can reach out to one another. So there's one.

A program called "Groundwork Yonkers", which now is "Groundworks USA" is now in 19 different cities around the country. And what they do is is they bring younger and older people together into teams. And they identify a Brownfield or a lot that is in decay. And they work together to convert that piece of property into a playground, into a park, into a garden area. They work together. They design the area then work together physically and then they evaluate their work. That's another example.

Let me just think quickly. I'll give you -- Glamour Gals. The head of Glamour Gals, an national organization, high school girls go to nursing homes on a monthly basis and provide facials and -- I forgot it -- beauty treatments to older women.

Isabella Geriatric in the Bronx operates a child day care center within a nursing home. Let me just see, just real quickly. From San Francisco a group is coming to talk about how they provide services to help new immigrants learn English and achieve citizenship.

Speak Up. And last but not least, Speak Up in Westchester County brings together young people, high school kids to learn about issues facing older adulthood; older people. And then they are trained as advocates in the public arena to speak on behalf of older people.

So those are just, you know, a brief taste. There's about 30 of them. So it's really something that houses of worship, and I know speaking to the head of the Veterans Home, they're sending several people and -- so it's a program that's geared towards institutional care as well as community base care. And it basically -- most of these programs are volunteer programs. And some have received seed funding to get started and whatever but these programs bring out the best of us.

**CHAIRMAN STERN:**

Very good. Paul, thanks so much for being with us today and we wish you every success on the upcoming program in November.

**MR. ARFIN:**

Thank you.

**CHAIRMAN STERN:**

Thank you. Gentlemen, welcome.

**MR. SGANGA:**

Thank you and good afternoon. And we appreciate this opportunity to present to the Legislature this afternoon. My name is Fred Sganga. I'm the Executive Director of the Long Island State Veterans Home at Stony Brook University. Working the computer for me today is Jonathan Spier. And Jonathan is our Director of Community Relations.

On the invitation of Tom Ronayne, who we are very grateful to and is a big supporter of the Long Island State Veterans Home, he asked us if we can provide some kind of overview to the Legislature about what we do, so here we go.

Today's presentation will include an introduction, a little discussion of our mission vision values, some of our statistical and operational highlights. We'd like to educate the Legislature about what we're doing for Suffolk County in terms of bringing in state and federal dollars to Suffolk County through our VA Grant Programs and talk about some of the goals for 2007. And this is all in your handouts, by the way.

Who are we? We are one of a 128 State Veterans Homes in the United States and Puerto Rico. There are veterans homes in all 50 states and in the Commonwealth of Puerto Rico. We're one of five State Veterans Homes in New York State. The others -- next closest one being in St. Albans Queens, followed by Montrose, which is in the Westchester area. And then there are two homes in Upstate New York, Batavia and Oxford.

All the homes, all the -- four of the homes are operated within the state under a different state agency. They're run by the Department of Health. We're the only long-term care facility operated by SUNY, State University of New York. And we're the only State Veterans Home in the entire nation that's located on a campus of an academic institution.

The other Homes as you can see we are by far the largest Home in the state at 350 beds. We also run a 50 slot adult day care program. The only State Veterans Home in the United States of America to run adult day care. Our Batavia Home has 126 beds. Our Montrose Home has 252 beds. Oxford New York has a 242 bed facility. And our closest colleague in St. Albans, Jamaica, Queens has a 250 bed facility.

Historically back in 1979 New York State Legislature approved a feasibility study based on a group of veterans under the leadership of Mr. Jack {Flatley} who was a United States Navy veteran who thought that we needed a Veterans Home on Long Island to serve our veterans. After that approval the Commissioner of Health at the time indicated that he felt the Home should be on the campus of SUNY Stony Brook. And part of that reason is is that they were looking for 25 acres in Suffolk County or on Long Island to build the Home. And SUNY was approached being 1200 acres. They were told as long as we don't have to run the nursing home, that's fine, we'll be happy to give you the land. They did the deal. And then when it came time to run the Home, the Department of Health said we want nothing to do with this new Veterans Home on Long Island and SUNY wound up running the Home. So in retrospect it was a good thing.

VA approved the construction funding in 1987. We opened up our doors in 1991. In 1994 we achieved a 100% occupancy for the first time. In 1995 we went into the ambulatory care business of adult day care. And most recently in 2003 we built a new addition to the building a \$2.3 million east pavilion, which added 15,000 additional square feet including our new education center for nurse training programs.

In your packet today is our Mission Vision Value Statement. I must tell you all of us who work at the Long Island State Veterans Home never forget the reason why we come to work everyday. Certainly our customers or our residents who live at the Home, each of us as employees recognize that the brave men and women who fought for our everyday freedoms are now people we take care of everyday. So we never forget that fact.

You've heard the expression, teaching hospital. We're very privileged to have a teaching hospital across the street from us, Stony Brook University Hospital. But I will tell you that the Long Island State Veterans Home is a very rare nursing home from the perspective of our academic mission. We are what you would call a teaching nursing home. As you can see on the screen, all day long if you were to come into our facility we have medical students, medical residents, geriatric fellows, nursing students, CNA students, PA students, PT students, nurse practitioner students, dental assistant students and on and on and on and on.

We're very proud of the fact that in terms of education as it relates to the geriatric population, we are clearly seen as a leader not only on Long Island but throughout the United States in terms of educating the future to dealing with our elder care population.

Listening to go Paul earlier, it's clear that the baby boomers are coming. The year 2010 to the year 2030 we will never, ever, ever see an aging like we have of the -- of our population not only here on Long Island but across the United States. I myself being one of the baby boomers. We take very strongly our mission to train future health care practitioners as it relates to geriatric people.

Stony Brook, we have wonderful affiliations. As you know we have a school of medicine, a school of dentistry, a school of health technology and management, a school of nursing and a school of social work. And unlike the hospital that receives stipends for taking on graduate medical education, we don't get a nickel for what we do but we still are happy to be a site as it relates to training of future health care professionals.

We do have a strategic partnership with the university as well. While we do take veterans from all parts of New York State, once they come to the Home, if they need hospitalization, pretty much they -- 98% of our veterans do wind up going to Stony Brook University Hospital for any kind of acute care.

We purchase all our services directly from the hospital as well so whether it's a blood test or an x-ray, most of our veterans utilize University Hospital. And we also purchase about \$800,000 insured services with the university. Bottom line is we value our close working relationship with Dr. Kenny and Stony Brook University.

Some of our highlights in 2006, and what we did for you today was give you a five year look back. The Long Island State Veterans Home is a very, very, very busy place. Our current occupancy is running this year at 99.8%. We've been over 99% for the past six, seven years. Today my waiting list for veterans needing skilled nursing care is about 30. What does that translate to? Well, if you take 350 beds multiply that by 365 days, that's about 127,000 days of care. The only reason we don't run hundred percent occupancy is the fact that we do not admit new veterans on Saturday or Sunday. If I did do Saturday and Sunday admission I'd be at a 100% occupancy.

We also run a day care program; adult day care. Part of our dilemma with day care is educating the public about adult day care. I'm clearly convinced that when you talk to eight out of ten people on the street they don't know what adult day care is. Our Adult Day Care Program is a six-day-a-week program, Monday through Saturday. It includes round trip ambulette service where we come to your home, pick you up. We provide you with a breakfast meal, a lunch meal. We provide you with comprehensive nursing coverage, almost like a nursing home without walls. You're eligible for all the physical therapy, occupational therapy, speech therapy that you need. We do on-site dentistry, on-site podiatry, on-site optometry and ophthalmology and there's audiology as well.

Then we send you back home around four, 4:30 in the afternoon. And for our seniors who live alone we send them home with a brown bag dinner as well. The lunch we serve actually is equivalent to a dinner meal because we know for some of our veterans that will be the biggest meal of the day that they have.

When the I arrived at the home in 2001 we catered to about 28 people a day while our licensure was for 50. We're up to about 42 people a day that we serve. We do have a little bit more room in our day care program. And we certainly appreciate the job the Legislature does in helping us to promote this program.

We are also thinking about expanding day care into Nassau County. While we call ourselves the Long Island State Veterans Home, one of the dilemmas we face in day-care is that you must be within a one hour drive time to the home. So we can only really care for veterans as far east as about Riverhead. And we can care for our Suffolk vets as far west as the Suffolk County/Nassau County border.

We have been approached by County Executive Suozzi as well as Tom Ronayne's counterpart, Ed Aulman. They are very anxious and excited to see if we can put a day care program in Nassau County as well. And we are working currently with the Department of Health to try and pull that off in the next 12 months.

I never, ever, ever forget to tell, Steve Strongwater, the CEO of Stony Brook Hospital the value of the Home to his hospital. This is just a -- this first slide shows you new admissions. While we're 350 beds we do an awful lot of end-of-life care. We can do short-term rehab. We have a wonderful physical therapy and occupational therapy department. And we do do some short-term rehab. But the majority of our care is end-of-life care, palliative care. We flip over about two out of three beds every 365 days so there's a lot going on.

If you do need admission to the hospital and we usually admit about 250 people or so or veterans to Stony Brook Hospital, we have value to Stony Brook University Hospital from the perspective that they can count on the Home to send them business as well.

Average nursing home in the United States of America has 70% women, 30% men. Not true with the Veterans Home. We're about 93% men and about 7% women. Most nursing homes focus on activities involving the ladies, things like crocheting and knitting. We smoke cigars and watch belly dancers all day cause that's what we do at the Veterans Home. It's a different population. It's a male population. And one of the things that we think makes a difference is the fact that we do cater to the -- to our male veterans.

How many employees work there? There's 496 FTE's. The bulk of them are in our nursing care division. Without nurses you don't have a nursing home. And the bulk of the care is provided by registered nurses, licensed practical nurses and certified nursing aides. Okay. We also rely a lot on volunteers under the direction of Susan Helmus our Director of Volunteers. We're very proud to tell you that there's about 220 or so Suffolk County citizens who volunteer at the Home and last year gave us over 33,000 hours of service. I can tell you our Home is not a boring place. And our volunteers help to make a difference in terms of the care that we render.

Who pays for care? We wanted you to know that we take on all the traditional payer sources. It's not free to veterans. We do take Medicare, Medicaid, private pay. And if you have long-term care insurance we accept that as well. I think the Legislature should know that we just completed a survey of all nursing homes in Suffolk County. The average cost of care in Suffolk County for a nursing home day is \$385 a day. If you were to multiply that by 365 you're talking about \$140,000 per year for nursing home care. While our care is not free, through entitlements that you receive from the federal government, our daily rate for those veterans who must pay privately is about 240 a day. So 385 or 240. We do think we're the best deal in town.

Pretty much so as you can see on this screen the yellow represents our veterans who are on the Medicaid Program. 25% are on the Medicaid pending. And that's a separate issue that we've discussed with the County Executive in terms of the time it takes for a veteran who we think qualifies for Medicaid to be approved into the program. I will tell to get a veteran approved in New York City it takes about two to three weeks. In Suffolk County approval is running about two months and Suffolk County -- I'm sorry, Nassau County it's running about two months to be approved for Medicaid. And Suffolk County it remains a six to nine month process. So that's something we are concerned about.

The reason is is that we do accept veterans on a Medicaid pending status. So if you present yourself to our Home, we will take you in our Home, we will care for you up to nine months without receiving dime one towards the cost of your care. And we do that because we think our veterans put on a lot on the line to protect our freedoms. But we would like to see some quicker movement from the County if we could.

About nine percent of our veterans are on the Medicare Program. And Medicare will pay for nursing home care up to a 100 days after a three day hospital visit. What happens after the 100 days? You either pay privately. And that's the red portion of the screen that you see, private pay, or you qualify for the Medicaid Program.

We think the Home has an outstanding reputation so not only being the best value but we think the care is great as well. Back in 2004, Dr. Antonio Novello, who is the Health Commissioner under Governor Pataki put a challenge out to the 600 nursing homes in New York State to make their homes a safer place. We were entered into a competition to prove that we were the safest Home in the State of New York. And on March 11th, 2005 we were awarded from the New York State Department of Health the very first patient safety award. And we beat out 600 other nursing homes in New York State.

We also belong to NYAHS. That's the New York State Association of Homes and Services of the Aging. And while we brag about our building, it's really the people in the building that provide the care. Every year NYAHS holds a competition where it breaks up the state into six different regions, Long Island being it's own region. And we compete against the 60 other nursing homes who submit documentation on employees who work at their homes. I'm proud to tell you that our employees have won this award in 2003, 2004, 2005 and 2006. And we do believe our people make a difference.

I want to educate you a little bit about VA grants and funding. I'll let you know what kind of dollars are coming into Suffolk County. Currently the federal government provides a VA per diem grant to

all honorably discharged military veterans for long-term care. That number currently for skilled nursing care is \$67.71 a day. And for day care it \$40.48 per day. What that means is is that for any veterans in the room, you kind of have a long-term care policy for yourself if you stay in a State Veterans Home somewhere in the United States of America. Right now all our veterans at our Home qualify for this per diem dollar amount.

This is pending. It's coming down the road but we wanted our Legislature to know this as well. The National Association of State Veterans Homes, of which I'm the Northeast Regional Director, we met with Congress in the fall of 2006. And we said that any veteran who is 70% more service connected disabled should be entitled to free care in any State Veterans Home in the United States of America. While I'm pleased to say that Congress agreed with the Association, they did pass the legislation. President Bush, signed it into law on December 22nd of '06. Unfortunately, Secretary Nicholson from the VA is dragging his feet on deciding what the rate of pay will be for the various State Veterans Homes across the nation. We are bringing that to closure. And once we do have that brought to closure, we'll be promoting this anyway we can.

Just to give you a sense in our 350 bed home, we have about four veterans right now who are 70% or more service connected disabled. Three of them are on the Medicaid Program. So they'll be coming off the Medicaid Program. And Uncle Sam will be paying for their care at the Long Island State Veterans Home.

We've also done an awful lot in the VA Construction Grant Program as well. Every year Congress puts about \$110 million in a pot. The 128 State Veterans Homes across the country compete for these dollars to either expand or renovate their existing homes. I'm very proud to tell you that in the last five years we've secured over \$7.2 million in capital improvement grants at our Home in Stony Brook.

Real quickly, we've done things like replace our nurse call system, renovate our elevators, replace our tub rooms and install special listing devices similar to what you would see in a Broadway theater into our multipurpose room. We've replaced our nursing stations, our pantries, our laundry rooms. We've done some back of the house work, things that involve electrical, roofs, HVAC, environmental safety, bulk oxygen and homeland security.

We've done some grants that include upgrading our medical records to an electronic medical records system, replacing our phone switch, creating an education center AV system, making our building completely wireless. And we do have about a dozen or so veterans who have laptops in their room. We're also going to be renovating our kitchen because the building is 16 years old. We're going to be renovating our laundry room and we're adding a new service elevator to the building.

And lastly we are going to be replacing our HVAC systems. Each of the -- while we have central air in the building, each of the rooms temperatures are regulated with a -- in room HVAC units. We have about 300 of them. To remove them and replace them costs about \$1.8 million. This project was just recently approved this year by the VA. And we're very grateful to Senator John Flanagan for helping us getting our matching monies.

The way the program works is is that when you submit a grant application to the VA you do so by April 15th. You kind of know within two, three weeks if they like the project. And then you have 'til August 15th to get your matching money from the state. The VA will fund the project up to 65% if the state will match it at 35%. So when you see that number 7.2 million, 65% of that number came from the federal government while the other 35% came from state government. I'd also like to put in a plug for Assemblyman Englebright and Assemblywoman Eddington who have also helped us in the past in terms of securing state matching monies.

What are some of our operational goals for 2007? Well, we're pleased to tell you that we think we'll maintain our occupancy at 99% or better. We're also implementing Operation Rejuvenation, which is a total remake of our Home of about -- at a cost of about \$5 million. We're trying to take our

individual rooms, which kind of look like Stony Brook Hospital and make them look more like a Marriott Hotel. We've renovated three of the rooms already. We've received wonderful responses from our residents and their families. The tricky part now will be to get this done while we're 99% occupied. But we think this project will take about two years.

We continue to enhance the nursing homes case mix index. And all that means is the more seriously ill you are, the better we get paid from Medicaid and Medicare. Our issue though is to take care of those veterans regardless of what their problems are.

We continue to work with the Medicare Part D process. I am happy to report that one of the benefits from the Medicare Part D Program was that the federal government when they put the program together really didn't put a lot of thought into veterans or into any kind of nursing home residents who live in nursing homes; so whereas pharmacy used to an expense for us, with Medicare Part D it's now an additional revenue resource to us.

We'd like to achieve 50 per day in day care. We're also encouraging LPN education among our employees. And we're excited that a lot of our CNA's do choose to go on to LPN school. We will continue our CNA training program. We continue -- we do very well on our state and VA surveys year after year. And just once in my life I'd like to be deficiency free from the Department of Health. So hopefully that will happen.

We never forget our fiduciary responsibilities. Year after year we operate the facility within our established budget.

And lastly we want to continue to be Long Island's premier provider of long-term care to the veterans who need it most, the frail elderly.

In conclusion the Long Island State Veterans Home will remain committed to its core mission, which is to provide compassionate health care to New York State's frail elderly veterans, their families at a time we think, which is where they need us most and that's end-of-life.

Thank you, Legislator Stern, for letting us present today. And we'd be happy to take any and all questions.

**CHAIRMAN STERN:**

Sure. Frank, thanks so much. Questions? There's no question that not only is it outstanding care provided at the facility but you correctly point out it is also one of the best long-term care values anywhere really. And I've seen that so many times over the years where a family might initially say well we don't want a loved one to go to a state facility. They quickly realize when they visit the facility and visit with the people there, that it is one of the finest facilities, you know, in the entire region. And that's always great to see.

I also see so many examples of where men who might not be enjoying a quality of life in the community or even participating in activities at senior centers or other adult day care programs, then become residents at the Stony Brook facility. And even though perhaps end-of-life care is where that gentleman might be at because he is with colleagues and friends that quality of life goes up exponentially at a very important time and that's already great to see and know.

**MR. SGANGE:**

Very true.

**CHAIRMAN STERN:**

Yeah, Legislator Alden.

**LEG. ALDEN:**

Your budget comes down through the State Department of Health?

**MR. SGANGE:**

No. We -- believe it or not we run -- we don't receive a nickel in state funding other than the Medicaid Program or the Medicare Program or peoples' private long-term care insurance. We also get the VA per diem money, which is considered a grant program, a federal grant program. So in terms of the Governor's budget there's no money put to our State Home.

**LEG. ALDEN:**

You're not even on it.

**MR. SGANGE:**

I'm sorry.

**LEG. ALDEN:**

You're not even in the Governor's budget?

**MR. SGANGE:**

Well, we're part of SUNY so we appear on the SUNY budget. The only exception to that, Legislator Alden, would be the state matching monies that we get through SUNY.

**LEG. ALDEN:**

Okay.

**MR. SGANGE:**

That our State Legislators advocate on our behalf.

**LEG. ALDEN:**

And that would be like on a grant basis?

**MR. SGANGE:**

Yes.

**LEG. ALDEN:**

Each and every year.

**MR. SGANGE:**

Correct.

**LEG. ALDEN:**

Are you having trouble hiring and then retaining RN's?

**MR. SGANGE:**

I will tell you, we're very fortunate. We use no agency nurses whatsoever. You know, my thought is a tired nurse is better than no nurse. We don't have a lot of mandatory overtime. We're pleased to tell you that. We're doing some pretty creative things to keep our vacancy slots filled.

One of the things I did not mention, which I'd like to mention at this time is that Congressman Chris Smith from New Jersey about two-and-a-half years ago had introduced legislation that was passed by Congress to create a VA matching grant to recruit and retain RN's. Unfortunately, that, although it was passed, Secretary Nicholson has been dragging his feet for about two-and-a-half years now. The regs for that actual grant money came out about a week ago. The way that's going to work is is that I'm entitled to \$125,000 from the federal government if the state will match that money. And then I can use it in a variety of programs to recruit and retain nurses.

What our plan is, just so you know, we actually obtained our state matching money two-and-a-half

years ago from Tom DiNapoli who's now the Comptroller for the State of New York. But Tom who's a dear friend to the Long Island State Veterans Home pledged that money two-and-a-half years ago.

We originally thought to do nursing scholarships, but I was afraid that if I gave you money for school and then after school you decided not to work for me, I didn't want to have to chase you down. So our new concept, which has been approved by the VA is that I plan to attend all the graduation ceremonies at Stony Brook and Suffolk Community College; and let you know that if you come work at the Long Island State Veterans Home, I'm going to take care of your monthly loan payment. Just hand me over your loan payment booklet and we'll take care of your payments. And we think we're getting a very positive reaction from students not only in Suffolk but from all over.

**LEG. ALDEN:**

Do you coordinate at all with our facility in Yaphank?

**MR. SGANGE:**

No.

**LEG. ALDEN:**

Do you have any interaction?

**MR. SGANGE:**

It's a fine facility. John {DeJulio} is the nursing home administrator there. And other than taking a transfer from their home to our home we don't do anything.

**LEG. ALDEN:**

Okay. What you just mentioned that sounds like a good idea that might work well for John to go to some of those graduations, especially the Suffolk Community College ones and offer the same thing that you might be offering there.

**MR. SGANGE:**

Yeah, but then he'll be competing with me.

**LEG. ALDEN:**

No. But you'll be competing with us on our own --

**MR. SGANGE:**

We'd love to work together with John.

**LEG. ALDEN:**

Because it --

**MR. SGANGE:**

Yeah. No, our money is going to come from the VA. And it's just for State Veterans Homes.

**LEG. ALDEN:**

Okay.

**MR. SGANGE:**

Just so you know, that's not open to every nursing home.

**LEG. ALDEN:**

Right. We're having trouble, you know, keeping or actually recruiting and then keeping nurses at the Yaphank facility. And I think a lot of other nursing homes are experiencing the same thing in Suffolk County.

**MR. SGANGE:**

Yeah, I mean I don't think -- here's the problem. There's more -- unfortunately, I was watching the news last week. And we've heard about these offshore medical schools in the Caribbean. They're now creating offshore nursing schools. And the reason is is that we have more qualified people who want to become nurses than there are slots available for them to be educated as nurses. So I think that's a big problem. I think Dr. Kenney at Stony Brook is trying to address that problem. But even here on Long Island we have many, many, many more candidates who are qualified to get into nursing school than we do have spots to educate those people. And you really have to incentivize the graduates to want to come work for you. Just to give you a sense, a nurse coming out of nursing school now, bachelors degree, they can earn close to \$75,000 right out of school per year.

**LEG. ALDEN:**

In a private institution.

**MR. SGANGE:**

In a -- yeah in a hospital or a private institution.

**LEG. ALDEN:**

And how much would they start at over at --

**MR. SGANGE:**

We pay them about 65. That's a state rate.

**LEG. ALDEN:**

Okay. And that's --

**MR. SGANGE:**

But great benefits.

**LEG. ALDEN:**

-- that might be more than what we're paying in Yaphank --

**MR. SGANGE:**

I don't know that number, so.

**LEG. ALDEN:**

-- to start. Okay.

**MR. SGANGE:**

Yeah, I can tell you -- I mean I don't think --

**LEG. ALDEN:**

Well, your problem is our problem too, so.

**MR. SGANGE:**

Yeah. I mean if the Legislature came up with money where you would pay peoples nursing loans off, I don't think you'll have any problem filling those nurse vacancies. I think people would do two, three years in a County home to get their nursing. That's after tax dollars, you know. If my loan payments \$300 a month, that's a lot of money, especially if I'm coming out of school.

**LEG. ALDEN:**

There's an idea for our budget consideration. If this Committee wanted to put something like that together as a, you know, either as a resolution form.

**MR. SGANGE:**

You just got to give me credit for it, though.

**LEG. ALDEN:**

Oh, we actually will, footnote it.

**MR. SGANGE:**

We'll call it the Sgange something, I don't know.

**LEG. ALDEN:**

We'll footnote it, sure.

**MR. SGANGE:**

I'm teasing.

**LEG. ALDEN:**

And if we get too many, we'll send some over to you.

**MR. SGANGE:**

Send some to me, that's fine. Actually you should want to take care of the Veterans Home because it's in your County.

**LEG. ALDEN:**

I do.

**MR. SGANGE:**

Right, Jack?

**CHAIRMAN STERN:**

Anything else?

**MR. SGANGE:**

Again going forward, thank you for all your referrals. Believe it or not we know that veterans in need sometimes turn to their Suffolk County Legislature for information. And all of you have been very gracious over the years to refer people to our Home and for that we are thankful.

**CHAIRMAN STERN:**

Thank you.

**MR. SGANGE:**

Okay.

**CHAIRMAN STERN:**

Very good. Anything else?

**LEG. EDDINGTON:**

Nope.

**CHAIRMAN STERN:**

Okay. Make a motion to adjourn.

**LEG. EDDINGTON:**

Motion to adjourn.

**CHAIRMAN STERN:**

Okay. Second and we are adjourned. Thank you.

(THE MEETING CONCLUDED AT 2:09 PM)  
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