

**VETERANS & SENIORS COMMITTEE**  
**OF THE**  
**SUFFOLK COUNTY LEGISLATURE**  
**VERBATIM 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 January 24, 2011.

**MEMBERS PRESENT:**

Leg. Steven H. Stern, Chairman  
Leg. Vivian Vilorio-Fisher, Vice Chair  
Leg. Edward P. Romaine  
Leg. Lou D'Amaro

**ALSO IN ATTENDANCE:**

Renee Ortiz, Chief Deputy Clerk  
Laura Halloran, Budget Review Office  
Benny Pernice, Budget Review Office  
Ben Zwirn, County Executive's Office  
Tom Ronayne, Director of Veterans Service Agency  
Holly Rhodes-Teague, Director of Office for the Aging  
Paul Perillie, Aide to Majority Leader  
Deborah Harris, Aide to Leg. Stern  
Dot Kerrigan, AME Legislative Representative  
Joanne Anderson, East End Health Care Coordinator, Veterans Administration  
Philip Weisbroat, Facilities Manager, Veterans Administration  
Kara Hahn, Communications Director for PO's Office  
Rick Brand, Newsday  
Jack Caffey, Aide to Presiding Officer  
And all other interested parties

**VERBATIM MINUTES TAKEN BY:**

Diana Flesher, Court Stenographer

## **THE MEETING WAS CALLED TO ORDER AT 11:41 AM**

### **CHAIRMAN STERN:**

Good morning everyone. Welcome to the Committee on Vets and Seniors. Happy, healthy New Year to everyone and welcome back.

I ask everybody to please rise and join us in the Pledge of Allegiance led by Legislator D'Amaro.

### **SALUTATION**

Please remain standing and join us in a moment of silence as we keep all of our brave men and women fighting for our freedom overseas in our thoughts and prayers.

### **MOMENT OF SILENCE OBSERVED**

Thank you. Welcome everyone. We do not have legislative items on the agenda today, but we are looking forward to hearing from our Directors and from our guests. So, Holly, I'll have you come up first.

### **DIRECTOR RHODES-TEAGUE:**

I just want to wish everybody a Happy New Year. Our office is busy as usual, but I don't really have a report for you. If anybody has questions on any of the programs, you know, HEAP we're busy steaming along. The funding from the federal government did come back down so we're better off than we were a couple months ago when we thought they were cutting funds. So we are able to still help people. And that probably should stay open until at least April or May at this point. So we're happy about that. We've done over 6,000 applications at this point through our office that are over at DSS for final approval.

### **CHAIRMAN STERN:**

Do you have any idea how that compares with last year?

### **DIRECTOR RHODES-TEAGUE:**

You know, I was just trying to find that out. Because I believe the funding is back to where it was, the levels for New York State but I'm not really sure. I have to double check that. I'm working on that one. Because I know a month or two ago the money was severely cut. And then, you know, they came through at the last minute so we're very happy about that. Because there was talk that the program would have closed in late December, January at one point. And that would have been a horrible crisis with the cost of fuel right now.

### **CHAIRMAN STERN:**

And do you have any idea where we stand in terms of applications -- you had said the number, but compared to last year?

### **DIRECTOR RHODES-TEAGUE:**

Last year at the end of the program we had done about 6600 applications through our office so we're at 6,000 right now. So I'm anticipating maybe a little bit more but not a lot more. Because it slows down, you know, after January. So I think we're probably going to be about at the same target as last year, so.

### **CHAIRMAN STERN:**

Okay.

### **DIRECTOR RHODES-TEAGUE:**

Any questions? No? Okay, thanks.

**CHAIRMAN STERN:**

Thank you. Tom? As we welcome up Director Ronayne, it's also a pleasure to welcome Philip Weisbroat and Joanne Anderson. We're going to hear today about the status of the East End Veterans facility. Welcome, Director Ronayne.

**DIRECTOR RONAYNE:**

Good morning, Chairman, members. Thank you for the invitation to appear before you again today. I don't have a great deal to report on other than as the Chairman stated, we have visitors with us from the Department of Veterans Affairs to brief us on the status of the Riverhead Clinic.

**MR. WEISBROAT:**

Chairman Stern, Vice Chair Fisher, Legislators D'Amaro and Romaine, members of the County Legislature, veterans and guests, thank you for this opportunity for my colleague and me from the Northport VA Medical Center to speak with you today. We thank the County Executive and all the Legislators as well as the County Executive's Veterans Advisory Board who represent the vast majority of the organized veteran service organizations in the County for your tremendous support of this project.

The Veterans Affairs Department officials continue their efforts to provide the best support possible for the nation's military veterans. We have been busy putting into place opportunities to transform the VA to a twenty-first century organization. It'll ensure that we provide timely access, the benefits, the high quality care to our veterans over their lifetimes. This project is part of an ambitious VA program to improve access and quality of health care both physical and mental for veterans in geographically rural areas with an emphasis on the use of the latest technologies, recruitment and retention of a well educated and trained health care workforce and collaborations with non VA community partners.

We are now able to move mental health care in the American Legion Hall into a professional clinical setting. The opening of the Riverhead CBOC will allow for the expansion of primary care services from three days a week in a shared space on a secured military base to a five or six day in a stand-alone modern setting. I would add to that that we are looking to expand evening hours, weekend hours, especially for our younger veterans that are coming back that have families and schedules that they're trying to maintain when they come back.

The other thing to understand is I'm going to use the word "market." And the word "market" in terms of the VA is, they want to always look at markets across the nation. So the market for Long Island concern, Nassau and Suffolk County make up the Long Island market. The VA's grateful for the partnership with their National Guard Base used by the 106 Rescue Wing in Westhampton and having invaluable feedback from veterans which has been used to create programs and scheduling considerations as we move forward.

For today's purposes I, Phil Weisbroat, I'm the VA Northport Facility Manager, will update you on the physical status of this CBOC, which is a community based clinical program at Riverhead; shall be at Griffing Avenue, 300 Center Drive in Riverhead. Within the space that you have provided for us, it's 4,000 square feet. The facility will have six exam rooms, two individual counseling rooms for behavioral health, two large conference rooms for small sessions. There will be an on-site drawing area for the laboratory. There's going to be administrative spaces; that way we can process anything with the veterans having to do with paper work, benefits. There's going to be also a designated entrance with an elevator access. There's a spacious lobby and registration area handicapped accessible, wide hallways.

Like I said the elevator's private. There's technology for teleretinal camera. There's 14 handicapped parking spaces, drop off point. We work with Tom Ronayne, which could go up and down depending on the amount of veterans. There's handicapped restrooms. There's proximity to Suffolk County Offices, public transportation, DAV shuttle. There's a medication room for education regarding self injection for insulin. There's an office for HBPC or mental health. HBPC is a

community program;; help veterans within the community. Joanne Anderson will be speaking to how we're going to be expanding the program. And, by the way, these are things that weren't in place three, four years ago that we're adding onto right now.

You know, I know I'm reading a little bit. The reality is it's an incredible space. People been working on this for years. It's a model for counties, the VA working together. The location that you provided is an excellent location. We don't think we could have found this on our own without your help. And we're really proud for this moment. It's really something to be proud of for everybody.

So I want to thank you. And I know everybody back at the VA thanks you. Joanne?

**MS. ANDERSON:**

Thanks, Phil. Good morning. Nice to be here. I want to explain a little bit about my new role at the VA just so you understand how I can help you and how we can work towards a nice liaison. I'm the East End Health Care Coordinator, new position, in the role ten weeks; loving it, learning a lot. Previous positions at the VA have been in acute care and managerial in long-term care. So I welcome the new challenges that have been presented before me.

A little bit about the East End Health Care Program right now, we're mimicking other programs nationwide. And it's a three-prong program. The three prongs actually entail clinic management, usage of a mobile unit and providing care in the home. The position of physical and mental health care can be offered, as we said, now in the Riverhead CBOC. That's a little bit further out east in a neighborhood setting. There's a mobile unit. I'm setting up a schedule right now to put the mobile unit out on a schedule, which you can see on the Northport website and Home Based Primary Care Program.

I know Phil just told you a little bit about the clinic. Right now I'll share with you the Westhampton Clinic where we are servicing our veterans three days a week for about 24 hours. We're seeing about 1500 patients. We hope to double that with the expanded hours almost up to a 56-hour program and some night scheduling options which will include the evening and the Saturday hours. And, you know, hoping really to reach out to that market penetration group as far east as, of course, Montauk and Orient Point.

The mobile unit, just to share with you a little bit information about that, the VA mobile unit that we currently have, it's about a 40-foot, I think most -- a lot of people have seen it, 40-foot vehicle. And it's used to provide the outreach activities that our outreach program coordinator, you know, puts together a schedule for. We hope, as I said, to put it out on the road, I'm shooting for a six-month program, at least three days a week in a variety of areas. I'd like to share that time on the road between the north fork, the south fork and Shelter Island. So I'm already accepting reservation dates to get the rig out there.

Some of the sessions that we can plan for the mobile unit are hypertensive screening, a great memory screening and geriatric program that I'm pulling from nationwide here to us in Suffolk, wound assessment, coordinating with our wound care program back at the VA. Of course, the flu vaccine and maybe a Lyme's disease clinic, women's health information. I'm working with our women's health coordinator back at the VA to bring that program out on the road, OEF/OIF Program, fabulous wheelchair maintenance program that we got going in long term care and getting that out and really servicing the veterans perhaps via the mobile unit as well. And I'd also like to bring Ask The Pharmacist Day Brown Bag Program out onto the mobile unit. I welcome any other feed back about anything that you might want to use the mobile unit for.

A little bit about the Home Base Primary Care program, I'm not sure if anyone really here is aware of it, it's a fabulous program. It's designed to deliver comprehensive long-term -- longitudinal care in the home of veterans with chronic, complex diseases and disabilities. It's perfect for the veteran for whom routine clinic base care is no longer effective. Right now the VA Northport team has about 70

patients enrolled in the program. Our catchment area, if you're not aware, our catchment area is a 30 mile radius around the Northport VA Medical Center itself. And I hope to expand that catchment area. So we do go to the edges of like Lynbrook, Nassau County, 30 miles east of Northport's really -- some of our patients are in the Mastic area. I really want to expand that radius to about, you know, a good 50 miles. We need to really, you know, beef that up a bit. And we get our referrals through acute care geriatrics, self referrals and through social works and discharge planning social work service.

So that's a little bit about the East End Healthcare Program. Thank you.

**DIRECTOR RONAYNE:**

Just for purposes of clarification, we referred to the CBOC several times. CBOC is the acronym for Community Based Outreach Clinic. So when we refer to CBOC, we're talking about the overall. Also, I think, I don't know if it was mentioned or not, but I think we'll also be doing enrollment into the VA system at the Riverhead facility as well.

**MR. WEISBROAT:**

I think the only thing I would add also is regarding more on the status, the construction is complete. What they're doing now is we're going through a punch-list. We're in touch with, you know, Tom and also with Keith Larson. So we're about to give them a punch-list for anything that's remaining. It's regarding fire safety, you know, we're dealing with patients. And that's basically it. Once the corrections are made, we'll be moving in. We've actually already started moving in furniture. I know Tom and others have encouraged us to already start gearing up the space so we're not waiting until the actual moment when the punch-list is done. We're trying to get a head start and we're looking for early spring for an opening.

**DIRECTOR RONAYNE:**

I think VA also at this time has -- you've begun installing furniture.

**MR. WEISBROAT:**

Yes.

**DIRECTOR RONAYNE:**

The IT people are in there doing the phone systems and the computer network. So there is activity both on the County -- on the County side of the project as well as the VA at this point.

**CHAIRMAN STERN:**

When you say -- thank you, first of all, for your presentations. Exciting stuff. When you say that you're going to be offering evening hours, what might evening hours include?

**MR. WEISBROAT:**

We're finding there's a lot of returning veterans that often they have -- they have different challenges in terms of children, for example, if they have small children. That's one. We're finding also they need evening hours, weekend hours, they're working full-time often. They're younger. They have a lot going on on their plate when they come back. So we're doing everything possible to help them have hours that make sense for them. Even at the facility itself we're doing the same thing also. And it's an adjustment. And these are things that we're trying. So evening hours right now is really going to be based on their schedule. Again, this clinic is growing. So if we choose a weekend or we choose evenings, that would really have to do with the veterans themselves what they express. We're just looking to meet their needs at this point.

**CHAIRMAN STERN:**

So as veterans come in and utilize the services, that's going to be one of the questions that you're asking them?

**MR. WEISBROAT:**

Yes.

**CHAIRMAN STERN:**

If they can't come during the day, can they come in the evening, what hours work for them and their families?

**MR. WEISBROAT:**

Yes. And we also have a jump start because we have an OIF Program at the facility itself. And we can get a feeling already what hours work for them as well.

**CHAIRMAN STERN:**

The mobile van that you utilize you had mentioned some East End communities. It's limited just to those East End communities that you had mentioned?

**MS. ANDERSON:**

No. The mobile unit -- no. The mobile unit we can put out on a route, on a schedule. We can do, you know, any of our communities here, more local, you know, in Suffolk County, sure.

**CHAIRMAN STERN:**

So it could be done throughout Suffolk County?

**MS. ANDERSON:**

Absolutely. I've got a team that I'm in the process of hiring to have that nice consistent programming, flexibility that we want for a program like that on the mobile unit. So, sign up.

**CHAIRMAN STERN:**

So who mans the mobile unit? Who does the driving, who provides the services within the van?

**MS. ANDERSON:**

Great questions. In the process -- the selection process of hiring a driver/medical support assistant that will serve in a dual role to actually help me transport and get the vehicle to the location it needs to be. And then also work in the role as a clinical support person enrolling and engaging in the program for the day. I do have an RN; fabulous background in education. And she'll be working full-time for me on that mobile unit as well. I hope to schedule in a nurse practitioner so that vesting exams can actually be done. We don't have to ask our veterans to come back to the VA. And that 20 minute vesting exam can be done on-site as well.

**CHAIRMAN STERN:**

Good. The Home Care Program, is that -- are services provided to spouses of veterans at home as well or is it limited strictly to veterans themselves?

**MS. ANDERSON:**

Right now that service is really for veterans themselves. Of course, we have a beautiful program put together by the staff with the Home Based Care Program for caregiver support. And that service is provided for either veterans, spouse, children how to engage and provide the best possible comprehensive care.

**CHAIRMAN STERN:**

Are those services that are then paid for by the veteran, his or her family themselves, are there government benefits that are utilized? Does that kind of service qualify for Aid and Attendance Program? And to what extent, if any, do you help the veteran apply for those benefits?

**MS. ANDERSON:**

I'm going to defer on that question, the specifics on it. But can I get back to you regarding the aid

and, you know, the benefit support? I'll make sure I get that information back to you.

**CHAIRMAN STERN:**

Sure. You had said that the catchment area right now is 30 miles and you'd like to go wider than that. Is that just a self-imposed limitation or are there some regulations that we're working within? Where does that 30 mile radius or the 50 mile radius number come from?

**MS. ANDERSON:**

That guideline 30 miles is set by the way the program is currently staffed. And that staffing -- we're doubling the staff as we speak. We got the go ahead to double the staff so that we can really increase our catchment area.

**CHAIRMAN STERN:**

It's all based on staffing levels?

**MS. ANDERSON:**

Yes, exactly.

**CHAIRMAN STERN:**

All right. Legislator Romaine.

**LEG. ROMAINE:**

Yes. You're putting in the furniture now, you're getting the IT stuff ready. When do you think you will see your first patients at the facility?

**MR. WEISBROAT:**

We're looking at early spring right now. Actually the punch-list is going out this week. And we estimate it could take three weeks with many of the items on the punch-list. But we really have to go line by line, you know, and make sure that we're not overlooking anything.

**LEG. ROMAINE:**

Okay. What I'd like to do is be able through my communications to send out to people and let them know when this is going to be available and all the different services that are going to be available. I represent all of eastern Brookhaven as well as Riverhead, Southold and Shelter Island. So a large area of the catchment area -- I represent to William Floyd Parkway. So a large catchment area that you will be talking about are going to be affected by people who are constantly asking me, *whatever happened to that East End Clinic?* Because it was talked about. It was ballyhooed. There was a debate whether it was going to be attached to the local hospital Peconic Bay Medical Center or whether it was going to be in the County Center. The decision was made to do it there. I want to let them know that there's a private elevator and where it is in that building. I know the building well. I served as County Clerk for 16 years in that building so I'm very familiar with the building.

But I want -- I want to be able to first get a letter out to my veterans posts, the American Legion, other veterans groups, Veterans of Foreign Wars, a whole host of others and let them know about that and then I would like to encourage them. And you'll let us know or give us a number where people can call if they have questions.

**MR. WEISBROAT:**

Yes.

**LEG. ROMAINE:**

Okay. Let me give you my number. I'm at 852-3200. And I'm on Griffing Avenue which is right across the river from your facility. So I definitely want to coordinate my efforts with you to make sure that we reach out to the veterans in my district and make them aware when these services go on line. Thank you, again.

**MR. WEISBROAT:**

Okay. What I'd like to do in that case is, when we review the punch-list, once we have firm dates as to when everything will be corrected, which we expect probably maybe a week or two, we may know more at that point, we would let you know that way you'd have a better idea of the day.

**LEG. ROMAINE:**

I'd be happy to do that. And I'd also be happy at some point to do a walk-through with you. I was over there -- well, it had to be almost a year ago when it was -- well, maybe about eight months ago, when it was in pretty -- you could see how the outline was going to go. But I'd like to do a walk-through with you on that when you're ready, just to take a look at the facility. So if I'm asked about that, because I'm always out at different groups, I could speak about that.

**MR. WEISBROAT:**

Definitely. Tom and I will work together to make that happen.

**LEG. ROMAINE:**

All right. Thank you so much.

**DIRECTOR RONAYNE:**

One thing I'd like to add just so that everybody is aware, the clinic is fairly centrally located. But what is important for you to be able to get out to your constituency is that DAV has a wonderful transportation network. And the expectation would not necessarily be that a veteran get on a bus or climb into his car and have to make his way to the facility. They can telephone. And I think there's already a number, a telephone number up for the facility where they can make arrangements to be picked up, brought to the facility, have whatever their visit would be done for and then return back to their door at no cost.

**LEG. ROMAINE:**

Tom, you make an excellent point. I assume although this is a clinic and obviously very different from Northport, would there be transportation available for the veterans who wanted to take a bus there?

**DIRECTOR RONAYNE:**

Suffolk bus?

**LEG. ROMAINE:**

No, no, no. Besides a Suffolk bus. Like there is buses to go to Northport.

**DIRECTOR RONAYNE:**

Yes.

**LEG. ROMAINE:**

Would there be buses available for the clinic?

**DIRECTOR RONAYNE:**

DAV operates vans. Ten-passenger vans.

**LEG. ROMAINE:**

Right. Would those vans be available?

**DIRECTOR RONAYNE:**

Absolutely.

**LEG. ROMAINE:**

For Riverhead?

**DIRECTOR RONAYNE:**

Absolutely, dedicated specifically to Riverhead.

**LEG. ROMAINE:**

Okay. Right, because I understand it's clinical in nature. And it's limited in nature. You can't do everything there. But most of the things that veterans go for you probably could do there. Most of the things. You know, 80 percent of what people take the bus trip for -- the problem that I had with Northport, which is a very good facility, is that if you took a bus there, first of all, if you lived out east, forget it. I mean the bus left, I think, Riverhead before seven o'clock in the morning. It didn't make it to Northport until after nine. And then you had to either left at 12 or one o'clock; you had to have all of your appointments done or else you missed the bus. And that was the problem for a lot of the veterans that lived out on the East End.

And then, you know, if the bus is leaving from Riverhead and you happen to live in Greenport or Shelter Island, you're leaving your house at, you know, five o'clock in the morning to get to Riverhead by -- so you don't miss the bus at seven o'clock in the morning; it's a long day. This clinic will help because 80 percent of what these guys go in for, you know, the checkup, get blood drawn, hypertension, diabetes, whatever it is can probably be done at the clinic.

**DIRECTOR RONAYNE:**

Yes.

**MR. WEISBROAT:**

Yes, it's going to have primary care and mental health; has both. And the teleretinal.

**LEG. ROMAINE:**

Right. So all of that, all of that is extremely helpful. It's going to be extremely helpful. You know, my father served in World War II. He died last year, about a year ago, 93 years old. And he would take the bus. I mean at the very end I was driving him because I said "you can't be on that bus." But he would take the bus. He lived in Manorville. He would take the bus. So he got very good service, but he had to go to Northport. That was the biggest thing. You're going to be serving the people on the East End very well; because now for most of the things that they have to go see, they can come to Riverhead. And it's much less a trip for him. He probably would have driven his car, God forbid, but he would. And he'd navigate there. But from Manorville for him it was 15 minutes. Okay? For people out in Greenport, it's maybe 40 minutes, 45 minutes. Maybe a little longer, but at least it's a doable thing.

And you're going to see more veterans take advantage of something that they're entitled to, which I have to say you guys have a very organized system. Because the times I would take him over to the VA Center, he got processed. You know, he had his eardrums blown out in the war so he couldn't hear a thing. So he would get his ears tested, he'd get his eyes tested. He got decent care. So I want to say thank you. I know you also had a clinic in Patchogue at one time. I don't know if it's still operating.

**MR. WEISBROAT:**

Yes, it's still operating. And we're also expanding there as well.

**LEG. ROMAINE:**

Because I took him to Westhampton. I also took him -- in the end I was driving him all the time to Patchogue because unfortunately he came down with dementia and Alzheimer's. But you guys provided very good -- very good care for him. And I want to say thank you about that. And they'll be a lot more veterans, because we have a whole wave -- look at how many we have serving now in Iraq and Iran -- excuse me -- Iraq and Afghanistan and then throughout the world. So we have a lot of veterans. If I'm not mistaken, in terms of Vietnam veterans, Suffolk County, I think, is the number one or number two County in the United States in terms of Vietnam veterans who made their home here.

**DIRECTOR RONAYNE:**

We're home to the largest population of veterans of any County in the State of New York by a considerable number.

**LEG. ROMAINE:**

Right. I got to tell you, a lot of these guys are now retiring. A lot of retirees tend to gravitate and move east because there's -- although some people think it's very expensive housing, around Riverhead you can get less expensive housing particularly because we have the most mobile homes in the County. But thank you again for all your help. I can't wait 'til the clinic opens. It will be a big boon to myself and Legislator Schneiderman who represents the south fork, big boon to -- because Riverhead is not that far from any one location on the East End, but Northport was. It was a real haul for some of the veterans. And I've heard that from people particularly who live out east. But thank you again.

**CHAIRMAN STERN:**

Legislator Viloría-Fisher.

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

Thank you, Mr. Chair. Miss Anderson, I have just a very brief question for you. You mentioned the staffing of the mobile unit. And you mentioned a driver, medical support assistant, an RN and possibly a nurse practitioner. Are all of these positions in our current operating budget?

**MS. ANDERSON:**

They are. They are in our current year. We're not going to have to exceed our operating budget for the VA. Also proud to share with you that we do have designated funding also for some of these programs, for the Rural Health Program, East End Healthcare Program, which we're taking advantage of to bring the programs out.

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

So these positions are currently filled? There are people in these positions, but you're going to move them into the mobile unit or are we hiring people for these positions?

**MS. ANDERSON:**

The RN is currently trained and working on her orientation. She's received some wonderful recent training in the teleretinal program. And she is definitely ready to go. I'm interviewing in part of that whole selection process for the other two positions as well.

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

Okay. So they're actively being filled?

**MS. ANDERSON:**

Yes.

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

Okay, thank you. So the RN is someone who's currently on the payroll. And the nurse practitioner and driver/medical support assistant you're interviewing for those two positions?

**MS. ANDERSON:**

Correct.

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

Okay, thank you.

**CHAIRMAN STERN:**

You are the East End Coordinator.

**MS. ANDERSON:**  
(Nodding head yes)

**CHAIRMAN STERN:**  
Had there been an East End Coordinator before? This is a new position.

**MS. ANDERSON:**  
(Nodding head yes)

**CHAIRMAN STERN:**  
Congratulations. Exciting time.

**MS. ANDERSON:**  
It's exciting to be a trailblazer. I have some fabulous programs out there to model after. I'm very sensitive to the needs of Long Island, eastern end of Long Island. I've lived here my whole life. I have relatives all throughout Suffolk County so -- but I'm modeling our program after a lot of input from other programs throughout the state and other states, but I welcome continual input also from all of you.

**CHAIRMAN STERN:**  
As Legislator Romaine points out, these are services, of course, that have been much needed for so long. So it is truly an exciting time to see it all happen. Of course we all wish you every success in the future in serving our veterans and the families. And of course anything that we can do to be of assistance, always feel free to let us know.

**DIRECTOR RONAYNE:**  
And I think we would all agree these services are incredibly important to our veterans. And they are unacceptably long overdue. So we're very excited that we've been able to create this wonderful partnership between Suffolk County and the Department of Veterans Affairs specifically at Northport to make this happen. It's a very exciting time for us.

**CHAIRMAN STERN:**  
Again, thank you so much for being with us today. Director Ronayne, anything else?

**DIRECTOR RONAYNE:**  
I just wanted -- it had nothing to do with us. But recently there was a ceremony held at Calverton National Cemetery where it was really an extraordinary event. There were the remains of twenty veterans from the City of New York, some of whom had passed away as far back as 2006. They were indigent, they were homeless, they had no next of kin, a number of different scenarios. But we had a mass ceremony and interred all 20 veterans at one time. New York City still has another 28 that we're going to be bringing to Calverton. And I've identified one veteran here in Suffolk County in the same circumstance who we're working with the Public Administrator's Office to have the body claimed and interred under the same program that we worked with the City of New York.

**CHAIRMAN STERN:**  
Anybody else? All right. Very good. Thank you.

**DIRECTOR RONAYNE:**  
Thank you.

**CHAIRMAN STERN:**  
We are finished. Motion to adjourn.

**LEG. ROMAINE:**

Motion to adjourn.

**CHAIRMAN STERN:**

Motion by Legislator Romaine, second by Legislator D'Amaro. We are adjourned.

**THE MEETING CONCLUDED AT 12:15 PM**

**{ } DENOTES SPELLED PHONETICALLY**