

VETERANS AND SENIORS COMMITTEE
OF THE
SUFFOLK COUNTY LEGISLATURE
MINUTES

A meeting of the Veterans and 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 July 20, 2015.

Members Present:

Legislator Steven Stern - Chairman
Legislator Tom Barraga - Vice-Chair
Legislator Sarah Anker
Legislator Al Krupski
Legislator Tom Muratore

Also In Attendance:

Jason Richberg - Chief Deputy Clerk of the Legislature
George Nolan - Counsel to the Legislature
Debbie Harris - Aide to Legislator Stern
Tom Ronayne - Director of Veteran's Services
Holly Rhodes-Teague - Director of Office For the Aging
Pegi Orsino - Executive Director, Retired Senior Volunteer Program of Suffolk (RSVP)
Rick Brand - Newsday
All Other Interested Parties

Minutes Taken and Transcribed By:

Gabrielle Severs - Court Stenographer

VS 7/20/2015

(The meeting was called to order at 12:41 p.m.)

CHAIRMAN STERN:

Good afternoon, everyone, and welcome to the committee on Vets and Seniors. I'm going to ask everybody to please rise and join us in the Pledge of Allegiance led by Legislator Barraga.

(Salutation)

LEG. BARRAGA:

I'm going to ask everybody to please remain standing and join us in a moment of silence as we keep those members of our military who recently lost their lives, Sergeant Carson Holmquist, Staff Sergeant David Wyatt, Lance Corporal Squire K. Wells, Gunnery Sergeant Thomas Sullivan, Logistics Specialist Second Class Randall Smith, and those injured in the most recent attacks as well as all of our brave men and women fighting for our freedoms overseas in our thoughts and prayers.

(Moment of Silence Observed)

Thank you. Again, welcome, everyone, and thank you for joining us. We do not have votes to take today, but we are joined by our guests. Holly, why don't you come on up, and, Pegi, why don't you come on up as well.

MS. RHODES-TEAGUE:

Who do you want first?

CHAIRMAN STERN:

Go ahead.

MS. RHODES-TEAGUE:

Okay. I don't have a lot to talk about, but I thought I'd mention the White House Conference on Aging. It finished up on July 13. They had a White House conference, 200 people in Washington D.C., and then they had listening sessions across the country to hear what was going on. I know we talked a little bit about this earlier, a couple months ago, that the White House Conference on Aging, there was no budget for it. They were determined to do something, so what they did is they had listening tours throughout the country. The closest one to New York was Massachusetts in -- they were by invitation only. The one from Massachusetts, Director Corinda Crossdale from New York State Office For the Aging was invited, and New York felt that the voices of New Yorkers should be heard, so what they did is they did their own listening tours. They went to five communities across the state including Farmingdale, and that was held on March 27, and the whole White House Conference on Aging was around four domains, and the four domains were retirement security, healthy aging, long-term services and supports, and elder justice.

So the four domains that they spoke about, and I know Legislator Stern did go do the one in Farmingdale, they had people talk on whatever domain they wanted to speak about, and they also had a website where people could, you know, write in what they felt about certain things. So to the document that I just passed around is the synopsis of what New York State put together, and they took what happened at the five locations around New York State and they kind of shrunk it down as best they could, and Corinda Crossdale, the director, did speak in Massachusetts on the issues that came up in here. So I just thought as legislators you might be interested in seeing what people are thinking about in terms of their retirement security and healthy aging and the elder justice and the long-term services and supports, and obviously for me, long-term services and supports is near and dear to my heart because that's what we do every day in the community, so I really just thought it might something you might be interested in seeing and reading about, so that's really what this is for.

And then if you wanted more information as to what the actual White Conference on Aging did, they do have reports on their website. They did position papers for each of the four domains, so I just wanted to bring that up because it happens once every 10 years. This one was less than fabulous if you ask me because with the 0 budget, they couldn't do much with it, but it is what it is and that's what they've done so I just wanted to give everybody a heads-up on that.

CHAIRMAN STERN:

Thank you, and I know that this is going to be helpful information because it's a great synopsis of what's going on around the state and many of the subjects that were brought up and still need to be discussed not just in New York State but throughout the country. Holly, looking to long-term services and supports, and as you said, it's what we do here.

MS. RHODES-TEAGUE:

Every day.

CHAIRMAN STERN:

It's what you do here with your team. What would you say are maybe the top one or two issues and opportunities and challenges that you see from that list and the kinds of things that we should be thinking about here at the county level of government?

MS. RHODES-TEAGUE:

Well, looking towards to future, one of the issues that I see is that, you know, as the population ages, we definitely need to put supports in place in terms of home care. You know, obviously nobody wants to go to a nursing home or to an assisted living if they don't have to. They'd like to stay in their home. In order to do that, we have to have the workforce available to assist, and right now I don't think that workforce is available.

I think there needs to be more done to come up with a career ladder for those who work as home health aides, and then maybe they can move up into other positions, and I don't really see that that's happened yet because there is a great need for more home health aides. There's needs for somehow figuring -- get more interested adult day cares, because adult daycare's, then, you have people in one place that, you know, they don't have to worry about somebody not showing up or showing up later or playing on their cell phone. You'd have more structure, so that's another place where -- I think adult day care is a great concept, and I don't think a lot of people have bought into it truthfully, and it's a shame because I think it really does work well. But as part of that, you know, if you have somebody that wants to be in adult daycare, you know, you've got to think from the family member's standpoint, how hard it is to get that person up, dressed, and out the door in the morning to get them to that adult daycare, so that's another place where there may be assistance needed for just an hour or two. It's hard to get those short-term assistance, you know, those hours there, so there's a lot -- I think we just have to be mindful of the fact that our population is jumping through the roof. You know, I think 19 percent of Suffolk County's population is over age 60, and that's still growing. We have the largest population out of New York City for over age 60, so we certainly -- and then again, if you look at the east end, you're looking at 28, 30 percent of the population being over age 60, so it just magnifies some of the issues or the challenges that we see throughout the county. So that would be my take, that we have to develop the workforce that we need.

LEG. KRUPSKI:

You mentioned the adult daycare. How would you organize something like that on a countywide scale? I know it's done locally, but I mean how difficult would that be to get different communities or different maybe -- are there other segments of the population besides just government that could get involved in that?

MS. RHODES-TEAGUE:

There's been private adult daycare's. I think it's a cost factor. I think there needs to be some subsidies for that. I don't see as much of that. I know the towns are very, very reasonable in the adult days that they have. Southhold has some really nice programs. Southampton has a nice program. Some of the other towns have let the programs go because they're labor intensive and they just weren't able to keep them going, so I think it would have to be a partnership between individuals, government, and private sector to really come up with one that -- you know, one is reasonably prices and two is high quality.

LEG. KRUPSKI:

But are there -- when you say "high quality," are there standards that have to be met?

MS. RHODES-TEAGUE:

Right now --

LEG. KRUPSKI:

Could it be like a more casual approach to it that would -- I know adult daycare, a lot of it, is giving the caregivers time relief, right?

MS. RHODES-TEAGUE:

Right.

LEG. KRUPSKI:

So could there be a more casual approach to these services that are being offered to kind of expand the system?

MS. RHODES-TEAGUE:

Right now, there are no regs, per se, for adult daycare. What there is is there are guidelines from the State Office for Aging of what they expect from adult daycare, and there's been some discussion on the state level as to what should happen with those regulations because they had some issues when the Medicaid managed long-term companies came into effect two years ago, in New York City, there was some major issues, so it caused a lot of people to look at those regs because there were pop-up adult day cares and they weren't very good quality. They actually had a story, not so much in New York State but in another part of the country, where people were throwing in an adult daycare into a mall, and basically people were fending for themselves in the mall for the day.

So there has to be regulations. People are not going to bring their loved ones someplace if they don't feel they're getting the care that they need. I don't know if you can have a more casual approach to it. I think you need to have some structure to the programs, you know, especially because the adult day cares, you know, you have the two models: social adult and medical. Medical is very expensive, traditionally paid for by Medicaid because of the cost, but the social model a lot of times you have people who will not age out, but they can no longer be taken care of at the adult daycare because they may have a severe form of dementia or something else that can't be taken care of in that model.

The towns do a great job. Some of the issues I've heard, though, is that, you know, because they don't have the longer hours, people can't work. So if you're trying to maintain some semblance of your life outside of being a caregiver, then they need the hours so they can go to work and work a regular job, because how many people have jobs that are five hours a day? Nobody, I mean, unless you work in a part-time position. So there's a lot of issues, you know, it's not that they can't be overcome; I just think that the system has to be built. As you said, I think we have to look at the entire system. You know, is there a way to get aides for an hour or two to help people get dressed and out the door in the morning? You know, can we change the culture? Because people don't look at adult daycare as a viable alternative, I don't think, you know.

LEG. BARRAGA:

To your knowledge, was there anything -- any discussion with reference to assisted living? I have quite a few constituents now who enter assisted living but I'm not aware of any sort of compensation or financial assistance.

MS. RHODES-TEAGUE:

Assisted living, there's only one or two that take Medicaid and then everything else is paid on your own. They're very expensive. They fill a great gap for people who have funds, but if you're at a moderate income level, you're not going to be able to afford the assisted living, and with assisted living, once you're out of funds, you need to find another place to live.

LEG. BARRAGA:

I have (indiscernible) of constituents who have gone into assisted living, but the monthly fee could be anywhere from 2500 to 6- 7,000 depending on --

MS. RHODES-TEAGUE:

It's pretty high. It's pretty high, and again there are some -- there's one or two that I know that take Medicaid. There's a long waiting list.

LEG. BARRAGA:

The other question I have, the cap on social security. They take social security out up to a certain income. Was there any discussion in raising that level? We've raised it in the past, because certainly that would generate a lot of additional revenue even though you now have to cover or give social security payments to the people who --

MS. RHODES-TEAGUE:

I have to look at my retirement security issues on here. I don't know. I know there's been talk about raising it because people want to be able to keep that benefit going for as long as possible; whether they do anything with that, I'm not sure. I think everything's on the table when it comes to social security and depending on what side of the pile you're on.

LEG. BARRAGA:

They've always -- in the past, they've raised it, but they haven't done it recently. You never hear too much discussion about raising the cap.

MS. RHODES-TEAGUE:

Well, one of the things they have here is raise --

LEG. BARRAGA:

Get it up to 150, 175.

MS. RHODES-TEAGUE:

-- or eliminate the tax cap. So, yes, there were discussions, I guess, but whether anything comes of that, I don't know.

CHAIRMAN STERN:

Okay. Everybody good? Holly, thank you.

MS. RHODES-TEAGUE:

Thanks.

CHAIRMAN STERN:

Pegi, welcome.

MS. ORSINO:

Hi. Good afternoon. I'm Pegi Orsino. I'm director of RSVP Suffolk and RSVP stands for the Retired Senior Volunteer Program. We're celebrating our 43 year in September, and we start back in 1972 with, I think it was like, 32 seniors who wanted to do something for the community, and as of this past quarter that I'll be just giving you a few numbers on, we had 892 enrolled, so they rendered in the last 90 days about 24,000 hours of service to 78 organizations that we partner with and that can be -- the way that RSVP operates is as a clearinghouse for senior volunteer opportunities, and so we partner with other not-for-profit organizations that missions and services are driven mainly by volunteerism, and that allows us to offer diversity of volunteer opportunities and kind of a one-stop shopping because volunteering is kind of an intimidating process. You don't just run into the middle of Saint Charles and go, I'm here. What would you like me to do? So by us being able to have the partnerships that we do with the hospitals, schools, food pantries, soup kitchens, environmental centers, et cetera, they're able to come into our office and speak with our coordinators as to what their skills and interests and past professional skills if they want to use them or talents are, and then we try to best fit them to an opportunity that kind of close to home or close to their heart and that the hours fit their schedule, and then, you know, we call and clear the way for them to go over to Smithtown Avenue Elementary or whatever and talk to the teacher that wants to be in the American Reads program, and the final word is actually on appropriateness for the potential candidate is left to the site. You know, we do send them over there and we give them that lead, and often the first opportunity they get is not exactly what they had in mind, so we'll go back again and offer them another opportunity.

And it's worked very well in that we're able to find out a little bit more about them. Our enrollment form has, like, 24 different categories of things you might be interested in, so it gives us a lead when we get the enrollment form back as to what they will be looking for so that the interview that they have at our office is very effective and efficient in that we're not going through all 78 sites going, Well, what do you think?

And in 2014, we delivered over 100,000 hours of service, which IndependentSector.com (sic) puts at a value of about \$2.3 million, and I have to say the organizations that we deal with, whether they be museums or food pantries, et cetera, are so hungry for volunteers that, you know, it's endless, the amount of opportunities that they have out there as opposed to the amount of seniors that we have, so I'd appreciate -- I left brochures with all of you, but I really appreciate the idea that you call my office and we'll send you out more brochures particularly for recruitment purposes because we've lost, over the last two years, about 100 volunteers, and that was probably due to two seasons of very bad weather, and we don't ask the seniors to go ice skating to get to their site; and we have snowbirds and we have people that after the two seasons have said "Enough" and have moved.

So our numbers are always -- and because it's an aging program, our numbers are always up and down, so whenever we can get the word out to any of your constituents over 55, it's a big help to us because there's nothing better than after 42 years of service, somebody going, What is RSVP? You know, it sounds like a tuxedo rental place.

So we'd really like to -- this is a community awareness thing, and I know that everything in the world is driven by numbers. Sometimes they're like, Well -- our federal funders will be like, Well, what's your beneficial impact? I think any time you can take a 74-year-old out of their house and watching daytime TV and put them in the community reading to a child and having a purpose, that's beneficial impact, and it's not just, you know, the outcome measurements and everything else. It's giving seniors a purpose and giving them an opportunity to stay anchored in our neighborhoods and to feel worthwhile. As a culture, we kind of look at people over 65 as kind of like dinosaurs. Now I've reached the dinosaur age, so it gets older and older every --

LEG. BARRAGA:

Thank you very much.

(*Laughter*)

MS. ORSINO:

And we also have some wonderful programs that we have volunteers actually working in and one of them is the Telephone Reassurance Program, and that calls about 400 homebound seniors a day just to see how they are doing and to check on their wellbeing and sometimes just to socialize because this is not an era where Aunt Rosie lives down the road from your grandma who lives in your house. Adult children and their grandchildren are moving out of state or out of distance, so sometimes our volunteers are the only voice that they're going to hear in a day that's saying, How are you, Ethel? And she can tell us how she's doing or that her screens are in need of repair because there's mosquitos coming in and we can give them resources for getting their houses fixed because these seniors desperately want to stay as independent, as viable for as long as they possibly can, and as many of the resources that the Office For the Aging and RSVP can give to them, the better off we are for them to remain independent. Nobody wants to go to a nursing home.

We have the community Computer Connections Program, which you've all been very generous in donating computers from the county in terms of we take refurbished computers. We have tech-savvy seniors that refurbish them under a Microsoft license, and they give them back to the low-income families with children and individuals who really can't afford a computer. We're all under the impression that everybody has a computer in their house and that's not true. There's kids that need to do reports every nights and need to do academic research, and they're not able to do that without going to the public access, and at the library it's a little stressful because you're going, Oh, my God, my hour's almost up, I got to get out of here.

In the safety of their home, too, they have a better -- well, we had a mother thank us tremendously because she was, like, commuting from library to library trying to get some public access time, and she said, I work full time and then in the evenings, I just drive from library to library so the kids can get all their homework done, so thank you so much for giving us a computer.

In the last two years since Sandy had visited us, we've given about 350 computers to Sandy victims that -- that's the last thing on your mind is getting your computer replaced, but it's also one of the last things you're going to need when you're rebuilding your house but you'll need it for doing your insurance claims and processing papers, so we've been happy to help them. We have computer banks over at the V.A. hospital that one of our volunteers goes and teaches the vets in the nursing facility how to just get on the computer and, you know, talk with their grandchildren and stay informed.

So we've given about 3,000 computers back to the community, and the tech-savvy seniors are, like, thrilled to pieces that we have something for them other than stuffing envelopes. I've been to some of their meetings, and it's like talking third-world country dialect when they start talking about gigs, megabytes, hard drives, you know, washing the system and stuff. I'm like, Okay, thanks guys, keep up the good work, and I leave.

The Chronic Disease Self-Management program is another licensed program that we have with Stanford University, and it's been tremendously helpful in that we've taught about, in the last five years since we've become master trained, I think we've delivered about 100 workshops, and this is chronic disease. We call it "Living Healthy With Better Choices in Suffolk," because nobody wants to know they have a chronic disease. It sounds awful. As a matter of fact, when I went to the training for being a master trainer in Albany, they started off with anybody over 60 has at least two chronic conditions, and I was like, I don't think; turned out I had four. So things that we think we're maintaining our health with is really a chronic condition, and if these people -- research has shown if you can be better educated in your chronic condition and there's very many commonalities to chronic conditions whether you have heart a condition or lupus or diabetes, you can have less

frequent trips to the E.R. and less trips to the doctors and feel a little bit empowered about your own chronic condition and take responsibility for it and know what medications you're taking for it, and we've had huge success in the amount of people that have gone through the workshop and really enjoyed it.

We also have a diabetes self-management workshop which is very much needed in Suffolk County because there's an awful lot of elders walking around with type II diabetes that could be helped through nutrition information that is gleaned from this course and how to exercise more.

We have the health insurance information counseling and assistance program which we were given the contract for by the Office For the Aging last year, and it has been a tremendous success for us and a learning experience for us because being that close to Medicare, I was always like, I'll learn it when I have to learn it, but we had to learn it, and we've expanded the program to 22 counselors that help us on a dedicated helpline to seniors that have Medicare concerns, questions, confusion. The confusion is amazing as is the training for Medicare because every 20 minutes, something else changes, so you think you have it and then you don't and so I can't imagine at 84 -- and they have a wonderful website, Medicare.gov, that's interactive with what your needs are, but if you don't have a computer at your house or you don't know how to operate a computer, it becomes even more confusing.

So we have counselors on our helpline, and we've expanded to an additional 11 libraries in Suffolk Country that have face-to-face contact because some people are not auditory, myself being one of them. If you explain something over the phone to me, as I'm hanging up the phone, I'm going, I don't know what he said. So if I can talk to somebody and they can explain what the Medicare benefit I'm confused about or applying for, all the better.

So we just started off last year. It was kind of trial under fire. We had a tsunami of seniors during open enrollment period, so as 17 phone calls would come in, another 17 would be on the line, so it was like a continual thing, but we kind of have more under our belt this year, and we're thrilled. Talk about a volunteer opportunity for people that want to make a difference in somebody's life. When you hear somebody say the end of a phone call, Oh, I get it thank you so much, that's what it means to make a difference, you know, that you can go through that maze and somebody see the light.

So all of our programs, I feel very honored to be part of them and enthusiastic and passionate about because, as Holly said, we have the biggest senior population in all of New York State, and this is just challenging that energy that's out there in ether system or behind doors and bringing them to places where they feel like they still make a difference, where they can still bring their talents and their intellect and their passions to serve the community better, and we all win with that one. It's just more than I can say, so thank you.

MS. RHODES-TEAGUE:

I just wanted to say on the HIICAP program, it's been a great partnership because we still take calls in our office for health insurance, and what Peg and I had decided when we were doing this is that I couldn't do -- our office couldn't keep up with all the calls, and we has been doing it for a few years, and they weren't going to be able to keep up with all the calls, so between our office taking the calls that come in our main line and then they take the calls that come in on the HIICAP line and all our staff is trained as their volunteers are trained when it comes to the health insurance. It's a great partnership. We're severing a lot of people between the two programs, and I think it's really -- it's probably the best model we could come up with, so we're very happy, because we had -- you know, I think I have mentioned before that volunteers were never my strong point, so, you know, it made sense for us to use the, you know, the number one volunteer organizations for us rather than us try to replicate another volunteer program, so it's really worked out well.

MS. ORSINO:

It's been great, yeah.

MS. RHODES-TEAGUE:

It's been a good partnership.

CHAIRMAN STERN:

And in that program, how often are the volunteers trained and retrained? Because, as you point out, just when you got it down, they'll change a regulation, they'll change a rule, they'll change the law, and so it's constantly changing and so it's tricky information to begin with, but when you have to explain changes along the way, how often do the volunteers go through training?

MS. RHODES-TEAGUE:

What happens for -- the State provides training once a year, and the person who comes down is an excellent trainer. We open that up to our contractors, you know, my staff, the HIICAP volunteers. So even though it's technically HIICAP training, we open it up so that everybody has an opportunity that we can get the word out because everybody should know about the health insurance that they're working with older residents. So that's main training but then again in our office, we get information coming in all the time and our case management unit has training every other week, so if we have something that we think pertains to the health insurance, then our office will get hold of Pegi and let her know what we hear and you also let us know when you hear stuff as well.

MS. ORSINO:

Right.

MS. RHODES-TEAGUE:

So we're constantly sharing information back and forth.

MS. ORSINO:

Yeah.

CHAIRMAN STERN:

And you had mentioned that there's some type of relationship with -- was it 11 libraries?

MS. ORSINO:

Yes.

CHAIRMAN STERN:

What is the relationship with the 11 libraries and why 11?

MS. ORSINO:

Well, actually, we're looking for more. I think, actually, we're probably up to 18 because Holly had some of the libraries already that the counselors -- how it works is that if we're talking to somebody on the help line and they're not understanding what they're saying or have much -- many more questions, we usually ask them if we can make an appointment for them at one of the libraries that we have a counselor at and the libraries are more than happy to accept the counseling appointments, such as John Shiccitano (ph) being one of our premier counselors, he actually works at four libraries himself during the week. Sachem will call and say, You have four appointments from 10:30 to, you know, 2:30, and this way they can go in with their papers and they'll be able to be explained to by a trained counselor, what they're looking to do, what they need to do, and we're looking to loftily put a counselor in every library because there's a need for it.

CHAIRMAN STERN:

So when there's a relationship with a library, there's a counselor there on -- does that mean a regular basis?

MS. ORSINO:

On an assigned day, yes.

CHAIRMAN STERN:

So one can just walk in off the street and know that on that day, there's going to be a counselor there from a particular hour to a particular hour.

MS. ORSINO:

Correct. We usually encourage that they make appointments so that they're not sitting around for four hours while the four people ahead of them, you know, who signed in. So usually it's by appointment, but we'll tell them on the phone, on Wednesdays, you can go to the Greenlawn library; on the second Tuesday of every month, we're out in the Cutchogue library; on the third, you know, Thursday, we have four in Huntington and Sachem and whatever areas, so we're looking to expand that also.

CHAIRMAN STERN:

I ask about the number because with all of our seniors in every community and only 11 libraries, you would think that their canon should be more. So is the reason that there are not more is just because of a limitation in the amount of volunteers?

MS. ORSINO:

Yeah, we're always recruiting for the HIICAP Program, and many people, as soon as they hear it's Medicare, they go, I don't think that's going to be my expertise. We have a couple of people that actually joined because they saw it on volunteer match and said, I had a PhD, and I couldn't fill out the paperwork, so I would like to be a volunteer, so it works both ways.

CHAIRMAN STERN:

And the Telephone Reassurance program, of course there's nothing like a human voice on the end of the line and we all know very well situations where that contact could quite literally be the only interaction that a senior might have in that particular day.

MS. ORSINO:

Sure.

CHAIRMAN STERN:

I guess my question is, because there are other elements of the program where there's computer training, there's computer use, et cetera, so is the telephone reassurance program strictly limited to telephone contact, or are there other methods of contact: e-mail, utilizing some of the computer technology that you are utilizing in other parts of your program?

MS. ORSINO:

Well, we've actually, you know, kind of tossed around trying to Skype with people and stuff again. A majority of the client that we're dealing with right now are not computer literate. As the generations ages and those people that have, you know, more experience with technology go, our clients are mostly very comfortable with answering their phone and our volunteers are very chatty, so it's a great match.

CHAIRMAN STERN:

Here, at the county level, we have all worked to help ensure that, you know, many of the most vulnerable in our communities have a lifeline particularly in a natural disaster or other some type of

emergency.

MS. ORSINO:

Yes.

CHAIRMAN STERN:

As part of our emergency preparedness, we've all been trying to get the word out that those most vulnerable in all of our communities become part of the emergency -- preparedness emergency response program so that our first responders know where they are, what kind of assistance they might be, and so I would think that many of the same users of the Telephone Reassurance program should be those very same people who are on those lists. Is that the kind of thing that you discuss and help make sure that they are on that list if they have a need?

MS. ORSINO:

Yes, absolutely. We've explained what it is to them, asked their permission so that we can register them because sometimes they're just not capable or confused by the issue, but, yes, all of the vulnerable populations are registered at this point, either through the fire department, the townships, or the emergency preparedness, yes.

LEG. BARRAGA:

Just a quick follow-up with reference to the seniors who go to the libraries. Do they have to make an appointment in advance or they just walk in?

MS. ORSINO:

Usually, we make an appointment in advance so that the volunteer knows how long they will be staying, you know, whether it be four hours for that day or eight hours for that day.

LEG. BARRAGA:

Is there an effort on part of the volunteer to suggest to senior that they bring someone with them who might be a little young? Because often, you know, my experience is when you speak to seniors, at times when it gets a little complicated, they get very confused.

MS. ORSINO:

Yes.

LEG. BARRAGA:

They're more confused when they leave than when they came.

MS. ORSINO:

Yes. We always ask that an adult child or if their neighbor is helpful to them, bring over that person because two ears are better than one. They get a letter from Medicare and they panic, and so even when we're talking to them, they're not hearing, they're just --

LEG. BARRAGA:

I just Americans in general, regardless of age, are very confused with reference to what Medicare covers and what it doesn't.

MS. ORSINO:

Yes.

LEG. BARRAGA:

I've got a whole slew of people out there who still think Medicare covers long-term care insurance and it doesn't. I mean, if you go into a physical rehab program, I think there's 100 days of coverage, but after that, you're sort of on your own. Either you qualify for Medicaid or they come

and knock at the door and they want to be paid. Some people are hugely disappointed that yes, they can't go into a nursing home because they have Medicare; just like, Oh, it will cover it.

LEG. BARRAGA:

New York State, I always find it very interesting. New York State, you can go into a nursing home even if you do have money. Spousal refusal: You never hear about it, nobody wants to talk about it, but it happens all the time.

MS. ORSINO:

Yeah, there's all sort of different angles to that, yes.

LEG. BARRAGA:

It's not necessarily legal, but if you and I are married and I go into a nursing home, you can turn around and say, Look, I'm not going to pay for him, and the nursing home has to put an application in for Medicaid. It's up to law enforcement, the authorities, the courts to come and go after you, all right, to get the money, and most of the time, it doesn't happen.

MS. ORSINO:

It's true, and those people that, then, really do need the facility, you know, they're on a wait list or they can't afford it so they stay home and age out and don't get the care they need.

LEG. BARRAGA:

I just -- I wanted to ask that question because I think it's very important if you have someone who's elderly and they're coming in to discuss any topic, it's often appropriate to have somebody a little younger, maybe, in the family with the, so you've got two people sitting there assimilating the information.

MS. ORSINO:

Surprisingly enough, when we ask, you know, do you have adult children and can they get on the computer for you, because it really is a very user0friendly program, the senior will go, Oh, I don't want to bother my kids. I go, They want you to bother them because it's about your healthcare benefits. You know, they don't want to bother their kids.

Plus the fact, yes, when they go to a library, we always ask that somebody else is there for the matter of taking notes, even, because if they're discussing with the counselor -- but most of our counselors, I have to say, are hugely -- they go above and beyond, like John, again, writes a letter so that they have it in writing what the steps he talked about doing with them should be done so they have comprehensive minutes of their meeting and it really does help.

LEG. BARRAGA:

Thank you very much.

MS. ORSINO:

You're welcome.

CHAIRMAN STERN:

Legislator Krupski.

LEG. KRUPSKI:

I'm going to go to the RSVP program. Is there outreach also to municipalities? Because I know, and I live in a community that's very old and we are really blessed with the amount of volunteers and people have not only the great resource of their life experience but also the great resource of their time to give. Do you reach out to municipalities, town or county, because they have so many volunteer committees also?

MS. ORSINO:

Absolutely.

LEG. KRUPSKI:

Oh, okay. I didn't see it listed here.

MS. ORSINO:

Oh, yeah, that's been circulated to not only that but senior centers, Village of Patchogue, Bellport Village, all the different senior forums, the housing complexes. Unfortunately, the housing complexes, too, once they're filled to capacity, whether they be apartments or whatever, management leaves so there's no way of us in a gated community getting the word out and these are people that have free time and the -- certainly the financial means to be able to transport themselves to a volunteer opportunity, but that's the unfortunate part.

LEG. KRUPSKI:

Thank you.

MS. ORSINO:

You're welcome.

CHAIRMAN STERN:

Legislator Anker.

LEG. ANKER:

I want to thank you for all the work that you've done with advocacy with our senior community, I have a very large senior communities in my district: all the Leisures, Birchwood, Strathmore, probably about 50; and do you have problems getting into some of those communities with what you're trying to do?

MS. ORSINO:

Even in offering the workshops which are free, I don't know who it is that I have to see to get that governing body to go, Oh, sure, because we give out with the chronic disease self-management, there's a textbook and a relaxation tape they get for free. There's no reason not to attend particularly if you have leisure time; and yet for some reason, we're usually dead-ended.

LEG. ANKER:

I'll try to help. I know a few people. We'll try to get you in there. One other quick question: As far as what we're doing here in America to help our seniors, can you give us some idea of what are other countries doing that are providing better care or additional care as far as senior your population?

MS. ORSINO:

Well, I think in other countries culturally, elders are seen as esteemed individuals and so they are given a place in their children's homes, in their grandchildren's homes; not so much here. Even adult children kind of on occasion abdicate; you know, they'll be like, You call my mom because I'm working, which is fine, but they need to call their mom. They'll go, Don't you have weekend service? I'm like, Well, if you live in the community, we'll call them. I think that the resources in other countries, although limited, are very much geared to that esteemed elder. We're kind of I think -- and I love America, but I think that we see elders as problems rather than solutions, you know, and we see them as Medicare and social security, and we don't see them as people that can really, really add to the manpower for nothing.

LEG. ANKER:

And I think an important word is "value." They're valuable. Their experience, their wisdom. There's so much opportunity that we can have with our senior population, interaction with our young kids, that we don't pursue, and I think that's something we can work together both with our Office For the Aging and your advocacy group, but we will definitely be in touch.

MS. ORSINO:

Thank you. Yeah, these people are walking history books, so the kids are kind of, you know, really puzzled and thrilled that somebody actually got milk for a nickel, you know, when they walked down to the deli and stuff, and some of the stuff that they can impart isn't in history book. It's just, you know -- and a lot of kids don't have grandparents. I know that when my kids were small, they said they were afraid of older people, and of course older people are afraid of younger people, so it really, you know, just kind of goes together but there's nothing to be afraid of. Like we have a lot of people that apply and they'll go, What do you mean you have to be 55? I'm only 54. I go, We'll wait, you'll get to be 55, which is true.

LEG. ANKER:

As far as with that thought, what I have noticed, too, is the gap with the different generations and technology. I was at Leisure Village and I asked how many of you use a computer, and this is maybe about 100 or so people, and maybe there were about four or five people that raised their hands; and here you have the generation, you know, my children, that's all they do. They use technology extensively, so with that in mind, maybe there's something we can do to connect those generations because there is a fear of technology with the older generation.

MS. RHODES-TEAGUE:

I just want to mention a project that went on in the Town of Southold that was an absolutely fabulous project. They took the tablets that we received after Hurricane Sandy that were given out to senior centers, and Southold actually ran with it and ran with it hard. They had -- the school district came in and worked each week with a group of seniors at the senior center to work on the tablets and show them how to use it. The project expanded to the point where the children really looked out for the seniors, and when one had a spouse pass away, they wrote them condolence cards. They had end-of-year barbecue with them. They invited one of the seniors to speak at the classes, so it really was a fabulous intergenerational project, and it all started because they were teaching them how to use the tablets. So that was really a win-win and it could definitely be duplicated elsewhere if there's an interest someplace because it -- the school district took it on as a project, and they're going to continue it in the following school year as well. The kids were young. They were, I think, fifth grade, and the kids had a ball with it. They had three classes, probably around 60 kids. They rotated them each week so the kids didn't lose a lot of time going to do the project. It was an unbelievable project, so, I mean, I give kudos to the town for that. They did a great job.

LEG. ANKER:

So that project, it's all set up, you know, there's a whole process to it?

MS. RHODES-TEAGUE:

It worked out really well, yes, and I can give you the information who to contact. It was a wonderful project.

CHAIRMAN STERN:

Holly, as always, thank you. Pegi, it was great to see you.

MS. ORSINO:

Thank you. Good to see you. Thanks.

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CHAIRMAN STERN:

All right. There being no other business before the committee, we are adjourned.

(The meeting was adjourned at 1:26 p.m.)