

1
2 STATE OF NEW YORK : COUNTY LEGISLATURE
3 COUNTY OF ONONDAGA

4 -----
5 In the Matter of
6 Resolution No. 181
7 Corporation Law Section 1411

8 to Consider Transfer of
9 Van Duyn Home and Hospital

10 to

11 Onondaga Civic Development Corporation
12 -----

13 PUBLIC HEARING in the above matter, conducted
14 at the Onondaga County Court House Legislative
15 Chambers, Room 407, 401 Montgomery Street,
16 Syracuse, New York before, JOHN F. DRURY, CSR,
17 RPR, Notary Public in and for the State of New
18 York, on November 26, 2012 at 7:00 p.m.

19 MEMBERS OF LEGISLATURE PRESENT:

20 Brian F. May	1st District
21 John C. Dougherty	2nd District
22 William H. Meyer	3rd District
23 Judith A. Tassone	4th District
24 Michael Plochocki	6th District
25 Danny J. Lledka	7th District
Christopher Ryan	8th District
Mark A. Stanczyk	9th District
Kevin Holmquist	10th District
Patrick Kilmartin	11th District
David H. Knapp	12th District
Casey E. Jordan	14th District
J. Ryan McMahon	15th District, Chairman
Monica Williams	16th District
Linda R. Ervin	17th District
Jamie McNamara	Assistant Clerk
Lori H. Tarolli	Chief Deputy County Attorney

Reported By:
John F. Drury CSR, RPR
Court Reporter 471-7397

Chairman

CHAIRMAN McMAHON: Good evening.

This public hearing is now called to
order to consider the proposed transfer
of Van Duyn Home and Hospital to the
Onondaga Civic Development Corporation.
Clerk, please call the roll.

(All present but 5th and 13th District Legislators)

CHAIRMAN McMAHON: Thank you. Will
everyone please stand and salute the flag.

(Pledge of Allegiance recited).

CHAIRMAN McMAHON: Please read the
notice of the public hearing. Motion to
waive the reading?

LEGISLATOR KILMARTIN: So move.

CHAIRMAN McMAHON: Motion made to
waive the reading. Any objection?
Hearing no objection, the notice is
hereby waived. Was this notice duly
published?

CLERK McNAMARA: Yes, notice was
duly published.

CHAIRMAN McMAHON: I would ask
everyone to try to keep their remarks
between three to five minutes. Our

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* attached to transcript Christian Personalism -
A Manifesto

Compani

first speaker is going to be Bob Compani.
Bob, please state the organization
you're with and your address for us for
the record.

BOB COMPANI: My name is Bob Compani
and I am the director of the Private
Sector Division of CSEA. I would like
to thank the county leaders for allowing
me the opportunity to speak tonight.
Part of my job as the director of the
Private Sector is to negotiate first
contracts in the private sector. One of
my recent assignments had me negotiate a
first contract for one of our nursing
homes that was privatized. I'd like to
tell you all about that experience
today.

The Fulton County Nursing Home is a
public facility that was located in
Gloversville, New York. I live in
Gloversville, New York. Several months
ago it was stated in our local newspaper
the state officials announced that
Gloversville was the most poverty

Compani

1 stricken city in the State of New York.
2 There is few available jobs and the jobs
3 that do exist there are low paying with
4 little or no benefits. The County
5 Nursing Home was one of the few large
6 employers left in the county with as
7 many as 240 employees when it was a
8 public facility.

9 In early 2012 the Board of
10 Supervisors made the decision to
11 privatize the nursing home. It went to
12 a company called the Centers for
13 Specialty Care. Centers took over the
14 operation on April 1st, 2012. They
15 seemed quite reasonable and seemed like
16 a company we could deal with. In these
17 negotiations with the Centers we got the
18 following items agreed to.

19 They recognized CSEA as the
20 bargaining representative of those
21 employees. They honored the current
22 wages for ex-county employees who
23 remained in the home. They agreed to
24 honor seniority of the workers who
25

Compani

1 remained in that home. We negotiated an
2 agreements procedures with binding
3 arbitration and we got Centers to set up
4 a training fund for these employees.

5 Now that all sounds good, but as
6 they say on TV, wait, there is more.
7 The employees lost the right to have a
8 defined pension plan and was replaced
9 with a 401(k) savings plan that they
10 have to contribute to. Starting wages
11 for new hires were cut by over \$2 an
12 hour. The longevity program that was in
13 place had rewarded dedicated long term
14 employees ended immediately. Holiday,
15 weekend, overnight shift differentials
16 ended immediately. Only Christmas and
17 New Year's if you worked did you get a
18 premium. Employees vacation time was
19 cut. The work week was cut from 40
20 hours to 37 and-a-half hours. Meaning
21 even though they kept they're current
22 rate of pay they lost two and-a-half
23 hours worth of that pay every week.

24 The financial department was closed
25

Compani

1 and about 30 to 35 people were not
2 offered jobs by the new employer.
3 Another 10 or so chose to leave on their
4 own. A handful of them were replaced
5 and the total workforce after the
6 transition to private sector was about
7 170. Down from about 240.

8 As of August 8, 2012 only 40
9 ex-county workers remain at that
10 facility. The rest of those workers
11 that were there long times have all quit
12 due to changes at the Home. The workers
13 felt that the quality of care was
14 suffering significantly since the
15 transition.

16 The cost of health insurance for
17 these employees was also greatly
18 impacted. What used to be free for the
19 individual now costs them \$20.00 a week.
20 That doesn't sound bad, but hang on. If
21 you want full family coverage it costs
22 an employee out of pocket \$980 a month;
23 out of pocket. That's an astounding
24 \$245 a week if you want your family
25

Compani

1 covered by health insurance at this
2 facility. The new plans don't cover as
3 much and they have out of pocket co-pays
4 as well.

5 As more and more qualified employees
6 quit this facility it becomes harder to
7 staff the facility and more of the
8 qualified employees are ending up
9 getting mandated beyond belief. The
10 enormous amount of mandated hours can
11 create a huge effect on these workers
12 and cause a huge amount of stress.

13 Since the privatization, morale in
14 the work force has suffered significantly.
15 And as stated above only 40 of those
16 experienced, ex-county workers remain at
17 that facility. This means about 130
18 highly experienced people quit. And
19 they quit in Gloversville, New York,
20 which is considered the poorest city in
21 the State of New York.

22 The exodus of qualified workers
23 together with the paltry starting wages
24 and non-existent benefits is creating an
25

<div>9</div> <div>1 Compani</div> <div>2 atmosphere where the quality of care as</div> <div>3 well as worker morale is certainly going</div> <div>4 to suffer more. In the long run the</div> <div>5 poor morale and paltry benefits have</div> <div>6 driven good workers from the facility</div> <div>7 and replacing these workers with</div> <div>8 inexperienced low paying workers will</div> <div>9 cause the quality of care in this</div> <div>10 facility to plummet. All this means</div> <div>11 that the elderly who reside in these</div> <div>12 homes and depend on the care of these</div> <div>13 workers and depend on the county who's</div> <div>14 obligated to provide this care to these</div> <div>15 people, they'll suffer more and more.</div> <div>16 On a personal side, you need to be</div> <div>17 aware my wife's aunt is in this facility.</div> <div>18 So not only did I negotiate this</div> <div>19 contract but I witnessed first hand how</div> <div>20 some of the quality of care has declined</div> <div>21 significantly in these few months.</div> <div>22 I want to point out a couple of</div> <div>23 these before I add. Orange juice was</div> <div>24 cut from the menu completely. It was</div> <div>25 replaced with apple juice, cheap apple</div>	<div>11</div> <div>1 Compani</div> <div>2 And finally, my wife's aunt had a</div> <div>3 roommate at the Home who passed away;</div> <div>4 rest her sole. They moved my wife's</div> <div>5 aunt from the room awaiting the coroner,</div> <div>6 they put her in a comfy chair in the</div> <div>7 lobby, with my wife and my mother-in-law</div> <div>8 present. Her aunt sat there for hours.</div> <div>9 Until my wife complained to me, and I</div> <div>10 picked up the telephone and called the</div> <div>11 administrator of the Home because he</div> <div>12 knows who I am, because he negotiated</div> <div>13 the contract with me. Surprisingly they</div> <div>14 found a room at that time. And that</div> <div>15 disturbed me just as much as if they</div> <div>16 didn't find her a room because it's not</div> <div>17 -- it shouldn't have been because of who</div> <div>18 she was and who she was related to that</div> <div>19 she got that room. It should be for the</div> <div>20 simple reason that she was a fragile</div> <div>21 elderly Fulton County resident who</div> <div>22 needed love and care.</div> <div>23 Residents are now admitted from</div> <div>24 outside the county based on their</div> <div>25 ability to pay, and county residents</div>
<div>10</div> <div>1 Compani</div> <div>2 juice, no nutritional significance</div> <div>3 whatsoever, nothing more than colored</div> <div>4 water. And the only reason they did</div> <div>5 that was to save money. Because of the</div> <div>6 short staffing situations I've seen</div> <div>7 first hand or heard of these following</div> <div>8 instances.</div> <div>9 A non-speaking resident was lost in</div> <div>10 this facility for a few hours and they</div> <div>11 could not find her, due to the</div> <div>12 inexperienced work force. When an</div> <div>13 experienced worker showed up they found</div> <div>14 her between the bed and the wall where</div> <div>15 she had fallen and she laid there for</div> <div>16 hours.</div> <div>17 Another resident disappeared from</div> <div>18 the Home and was found wandering up the</div> <div>19 road. And just recently a meth addict</div> <div>20 from the Bronx was admitted to this Home</div> <div>21 on the same floor as my wife's aunt.</div> <div>22 And they had taken up residence in the</div> <div>23 Home with elderly citizens. I do not</div> <div>24 consider that a safe situation at all,</div> <div>25 but perfectly legal.</div>	<div>12</div> <div>1 Wright</div> <div>2 need to look elsewhere if they need a</div> <div>3 place to put their elderly and their</div> <div>4 fragile. I'm urging you not to let this</div> <div>5 happen here. Do what's right for this</div> <div>6 county and do what's right for the</div> <div>7 people who live in that Home and depend</div> <div>8 on you. Thank you.</div> <div>9 CHAIRMAN McMAHON: Thank you, Bob.</div> <div>10 Jeff Wright. And Jeff, just give us</div> <div>11 your address.</div> <div>12 JEFFREY WRIGHT: Yes, sir, Mr.</div> <div>13 Chairman. Jeffrey Wright, 153 St. Louis.</div> <div>14 My mother is a resident at Van Duyn.</div> <div>15 And you just heard a horror story of</div> <div>16 what can happen. We can't predict what</div> <div>17 will or won't happen. But I assure you</div> <div>18 that the people in the County of</div> <div>19 Onondaga need to be loyal to the people</div> <div>20 that are working in Van Duyn. Because</div> <div>21 those people in Van Duyn are loyal to</div> <div>22 the residents. It's amazing, the care</div> <div>23 that is being provided up there.</div> <div>24 And to take the chance that you risk</div> <div>25 losing any of that care should not</div>

Wright

1 happen. You as leaders in this county
2 need to ensure that we continue to
3 provide the care that is being received
4 up there and ensure that the employees
5 up there will maintain their standard of
6 living. We cannot act like corporate
7 America, we cannot act like Verizon and
8 destroy middle America. Where is the
9 American dream?

10 It's your responsibility to be loyal
11 to these people because they're loyal to
12 the residents. Do not let this happen.
13 Find a way to fund this facility. Ask
14 the county residents what they're
15 willing to pay. Because I'll tell you
16 it's a great security to know that we
17 have this facility and the care that
18 they give to people that we need to look
19 out for. I hope some day, that should
20 this go through, you don't have to go:
21 I wonder if we hadn't done this. If I
22 or my family member would be receiving
23 inferior care? Don't put yourself in
24 that position. Think about the older

Graham

1 Americans, the older county residents
2 that are living up there. Thank you.
3 CHAIRMAN McMAHON: Thank you, Jeff.
4 Phil Graham. Phil, we know your
5 organizations, if you can just let us
6 know your address.

7 **PHIL GRAHAM:** I'm Phil Graham, 120
8 Vanida Drive, Camillus, New York. Good
9 evening Chairman and Legislators, I'm
10 Phil Graham, CSEA Local 834 President.
11 First, CSEA is completely opposed to
12 the privatization and sale of Van Duyn.
13 We believe that this is abdication of
14 our responsibility as a community to
15 care for our elderly and infirm
16 citizens, and it completely rejects the
17 185 year old legacy of caring we have
18 continued since the county poor house
19 was built in 1827.

20 As we stated at the recent budget
21 hearing, privatizing Van Duyn sets into
22 motion a chain of events that we lose
23 direct control over. In Delaware County,
24 this recently caused them to shut the

Graham

1 doors of their former nursing home for
2 good, leaving their residents to be
3 hastily relocated hundreds of miles away
4 from home and family, and leaving
5 taxpayers holding the bag for over half
6 a million dollars owed from the original
7 sale. Before the facility closed, the
8 quality of care provided went seriously
9 downhill, and promises to the community
10 for better care were completely broken
11 and abandoned. We do not want this to
12 happen here.

13 Second, we believe that you are
14 using the transfer of county property to
15 an LDC in a manner and purpose that goes
16 completely against the original intent
17 of what LDC's are for, that is, economic
18 development. It may be illegal and CSEA
19 is looking at potential legal challenges
20 to privatizing vital public assets by
21 transferring their ownership to LDC's.
22 We've already seen Lewis County back
23 down from creating an LDC after we
24 warned them that a legal challenge would

Graham

1 be filed if they went through with it
2 with their hospital and nursing home.
3 Even the state comptroller agrees
4 that using LDC's in this manner are
5 fraught with the possibility of abuse.
6 In his office's report on the Municipal
7 Use of Local Development Corporations
8 and Other Private Entities dated April
9 2011 he says, "The use of LDC's and
10 similar organizations to finance local
11 government operations and projects
12 increases the risk of waste, fraud or
13 abuse of taxpayers dollars or assets."
14 His and other reports compare LDC's to
15 another level of shadow government that
16 are not subject to oversight by the
17 comptroller's office to protect the
18 taxpayers. In fact, CSEA is strongly
19 supporting legislation proposed to
20 reform the use and abuse of LDC's to
21 bring more oversight and transparency to
22 these local entities which are operated
23 with public monies.

24 Lots of questions surround this

Graham

particular transfer of Van Duyn to an LDC that need to be answered before this Legislative body votes on the issue.

First, why do we need an LDC for this sale? A buyer has already been determined, and that buyer should be required to meet all the thresholds of a direct sale if one is to be made. Why would we spend public monies to assist the buyer in getting a mortgage to assume the ownership of Van Duyn? Can they not get a mortgage on their own? If we spend public money to assist, aren't we lessening the amount of money we get from the sale?

Speaking of money, how can we go ahead with this transfer if we don't even know how much money would be realized with this sale? Why are there not exact figures being provided? Would the county be guaranteed full market value when the LDC sells the property? Isn't it irresponsible to vote on a transfer when we don't know in advance

Graham

what the financial impact would be in this county?

Speaking of figures, why won't the county give us the facts behind this supposed \$115 million ten year subsidy that the county chief fiscal officer Steve Morgan projected in various media reports? We asked for the information and even put in a FOIL request, and we've gotten no response. Without proof to the contrary we can only speculate that such projections were fabricated to advance the administration's agenda to get rid of Van Duyn.

Another question on finances. If the county transfers Van Duyn property to the LDC and they secure bonding based on its value, would the money solely be used to fund Van Duyn's operations or will the county be borrowing against the value of those bonds to finance other projects that have nothing to do with Van Duyn, as has happened in other municipalities. That would be an abuse

Graham

of taxpayers money.

Another question on finances. Why is Onondaga Civic Development Corporation projecting nearly a \$400,000 operating loss over the next three years in their four year financial plan contained in their annual report? Can we as taxpayers trust that our investment in Van Duyn would be properly maintained by a corporation that is patiently going to run deficits the next three years? If this sale doesn't go through as expected will they have enough money to properly maintain the facility?

If Van Duyn is sold to a private operator what guarantee do we have that the operator will maintain their ownership? How can we guarantee that what happened in Delaware County will not happen here?

Finally, when CSEA met earlier this year with Legislative Chair Ryan McMahon to discuss our concerns related to Van Duyn, we were told that we would have an

Graham

open door and that we would be part of the ongoing conversation regarding Van Duyn's ownership. Why was our local union leadership not contacted by any Legislators regarding the transfer to an LDC?

As elected officials you are public advocates and have an obligation to the community to make sure the community has a safety net to fall back to, especially since we paid for it with decades of public investment through our taxes. How can you get rid of this vital public asset without first going to the public and explain what could be lost? CSEA will consider any vote to transfer Van Duyn to an LDC as abandoning our social responsibility to our community's seniors, and we will hold you accountable if the promises are not kept.

More importantly, the people who live at Van Duyn and who might some day live at Van Duyn, will hold you accountable for the actions you take

Graham

going forward. Shame on any of you who violate the public trust that you have been invested with to care for our seniors if you vote to go ahead with the transfer of this sale.

For 185 years we have taken care of the less fortunate in Onondaga County. Van Duyn nursing home will go into the red for the first time in 2013. And the county has decided that we can no longer care for the residents at Van Duyn. Can we walk away from our obligation as a community to have a true safety net? For our needy elderly? The new buyer has promised to keep Van Duyn as a safety net. But they are in the business of making money and not losing money. Promises are easy to make and easier to break.

If this county is walking away from its obligation what will happen to our elderly in the future? Let's all take a deep breath and get all the facts before we make such a big decision. Do we want

Graham/Denton

our elderly to face an uncertain future? When we have to travel up to two hours away to visit our elderly family members in the future if the safety net is not there anymore? Can we all look at the financial numbers at the Van Duyn, talk to the residents, the families, the workers. How would we all feel if our family member was a resident at Van Duyn? Would we take a better look at this and not make such a hasty decision?

These people that are up there are the baby boomers, considered the greatest generation in America. Now let's not let them down. They built this great country, now it's our turn to take care of them. Thank you.

CHAIRMAN McMAHON: Thank you, Phil. Virginia Denton. Virginia, if you could state your organization and address for us.

VIRGINIA DENTON: I'm a retired architect, I no longer, I'm not representing an organization. I'm

Denton

speaking on behalf of retaining Van Duyn as a public entity. And I certainly do appreciate this opportunity. Please know that I fully understand and appreciate the dilemma you have regarding the budget deficit projections that you say you are facing. I spent most of my professional career managing multi-million dollar current year budgets for a non-profit.

But we have a choice here in this instance. I have had my aunt, who is 94 years old, suffers from dementia, at Van Duyn for slightly over two years. And it has become very clear to me that the reason you have a deficit is because Van Duyn is so well staffed with uniquely caring and competent people. I've observed this personally over and over again as I visit my aunt three times a week for the most part; something one doesn't see or hear about with privately owned facilities. Just doesn't happen. There are horror stories out there.

Denton

The only way a private firm can overcome that deficit and make a profit is to make considerable reductions in staff and related services that are provided. Under those circumstances this puts people looking for other work. And likely on public assistance for a period of time. Since you also pay benies, I think you still do, which I doubt a private firm would, the administrative staff is able to be more selective in hiring good staff. And I would plead with you to consider those two aspects of what I'm saying.

Having said that I would like to offer an alternate proposal. And I know you don't want to hear this: Raise the property taxes to cover the deficit. Here's my arithmetic. You're projecting a deficit of \$115 million over nine years. That translates to 12 million or \$12.7 million per year. According to your property tax office there are 180,000 property taxpayers in the county.

Denton

1 That translates to somewhere between 69
2 and \$70.00 per year in increased
3 property taxes. I'm tempted to say
4 that's chump change but I don't want to
5 be rude. Since I would guess that many
6 in this room will no doubt need help for
7 either themselves or loved ones over
8 time and some in due time. And private
9 firms simply cannot provide the kind of
10 care a public institution can.

12 And as a taxpayer what I'm saying
13 translates to a sound investment in the
14 future. Rather than what seems to me to
15 be a shortsighted loss of a municipal
16 asset which is critical to how I see we
17 should be responding to our elders and
18 the care of elders. I'm serious about
19 it. Who knows what's going to happen to
20 any one of us? And Van Duyn is a very
21 very special place. I've watched it,
22 seen it, over and over again as I
23 already said. So I would hope that in
24 the very least that perhaps there would
25 be, I don't know if you would have to

Seitz

2 mull this over, whether there could be a
3 referendum on taxpayers as to whether or
4 not they would be willing to support
5 that. But to me it's an investment in
6 the future. Thank you very much.

7 CHAIRMAN McMAHON: Thank you,
8 Virginia. Michelle Seitz. Michelle, if
9 you can give your organization and your
10 address.

11 **MICHELE SEITZ:** My name is Michelle
12 Seitz, and I'm a resident of the
13 Eastwood area of Syracuse. I'm here
14 because my dad was a patient at Van Duyn.
15 He was a long time county employee and a
16 veteran of World War II, and he spent
17 most of his adult life helping people
18 whenever he could.

19 In December of 2003 he fell at home
20 and fractured his hip. He had surgery
21 on the 26th of December, and then
22 suffered a massive stroke. This was the
23 second stroke that he had had. He was
24 able to be cared for by my mom and the
25 family at home prior to this. As time

Seitz

2 passed his condition got worse. PT at
3 the hospital was unsuccessful. Our
4 family physician told us we could no
5 longer care for him at home. He was
6 then transferred to an extended care
7 facility, which I choose not to name.
8 He was there for three days, and because
9 of the very poor care he received there
10 he ended up back at Crouse Hospital in
11 the intensive care unit.

12 Now the fight began for a new
13 facility. Not one nursing facility
14 would accept my dad. Here was a man who
15 had fought for his country, had spent
16 most of his adult life doing for others,
17 was Commissioner of Buildings and
18 Grounds for the County of Onondaga, and
19 they said that he needed too much care.
20 The social worker handed me a list and
21 stated, you try to call some of these
22 places, maybe you can beg them to take
23 him. I did.

24 I called every nursing facility in
25 Onondaga County. Not one person would

Seitz

2 take him. They said they didn't have
3 the chairs, they didn't have equipment
4 to get him up. Granted he could not --
5 he was unable now to speak and he could
6 not walk. But there were a lot of
7 people that I've witnessed at Van Duyn
8 that were in even worse condition than
9 him. But nobody would take him. They
10 said to us, if you know anybody or
11 anybody that could do you a favor now is
12 the time to call.

13 Mr. Pirro has been a lifetime friend
14 of my dad's and had offered to help if
15 there was anything he could do. So I
16 put a call in to Nick Pirro. Someone
17 screened him from Van Duyn and he was
18 transferred there and remained there
19 until his death in 2008. No one can
20 know how frightening the situation was
21 for my family. We were told he could be
22 moved to a facility possibly one to two
23 hours away. We are an extremely close
24 family. So many questions arose. How
25 often could we get there? What if there

Seitz/Langley

was an emergency? Would my dad think that we had abandoned him?

Van Duyn is our safety net. A place that will accept our most fragile and vulnerable people when everyone else says: Took too much care. Van Duyn is just not a geriatric population, there are young children there, there is middle aged people and older people that call Van Duyn their home. I would like to think that Van Duyn will continue to be county owned and be our safety net.

If you or I or a member of our family could no longer live at home I'm sure you would want your loved ones to remain in Onondaga County. Thank you for the opportunity to speak.

CHAIRMAN McMAHON: Thank you, Michelle. Susan Langley. Susan, if you can give us your organization and address please for the record.

SUSAN LANGLEY: Thank you for the opportunity to speak. My name is Susan Langley, I'm a writer, nothing to do

Langley

with any kind of thing that you would be discussing. I'm here because my son James, who is now 40 years old has lived at Van Duyn for about 22 years now. He's extremely fragile. And he was born with a condition named pulmonary hypertension. The baby looks like the baby is breathing. But the lungs did not kick in properly. And two days after he was born he turned blue. He suffered severe brain damage.

He understands a lot. His two sisters and I, when my ex-husband and I split up, we took care of him when we lived in Baldwinsville until he was 21. One of my daughters is very familiar, Karen Fisher, with your Legislature, and she loves her brother very much.

I'd like, since we've covered a lot of ground already, I would just like to say a few things about the 22 years that Jimmy has been at Van Duyn and some of the things that I've experienced there. First of all, I am very worried like

Langley

other people have mentioned that a private facility, if they do not make enough profit, what are they going to do down the road? Are they going to resell it? Are they going to close? It would break my heart.

I hate to tell you this because some people think I'm crazy, but I see Jimmy almost every night. I go up and have supper with him. I hold up two books and I say Jimmy, which book would you like to read tonight? And he'll go (made a motion). And then when I leave I say Jimmy, I says, will you give mom a kiss good night? And he pulls his head right over. He may not be able to speak like we can speak but he understands and he is no less a person than any of us here in this room.

One of the reasons that -- there is three people that I'd like to mention tonight. Because they kind of personify Van Duyn. One of them was the young man named Carl Ehrlick, who was a few doors

Langley

down from Jimmy. And Carl had been in his car with his fiance. There was a car crash, Carl had thrown himself over his fiance, and he was severely handicapped and he saved her life and she was fine. Nobody went to visit Carl. And Carl had a voice just like a radio announcer. Whenever you went by, he'd say, hello like that. And the nurses, the staff, the aides would all go in. They were Carl's family. I hope I was a small part of Carl's family.

As Carl became very ill he got pneumonia. Who was around Carl's bed when Carl was dying? It was the supervisor, it was the CNAs, it was some of the visitors. They felt just as badly as if a member of their own family had died.

One of the other stories I would like to tell you is a few years ago there was a thing call the Berger Commission. And the Berger Commission's aims were to close as many hospitals and

Langley

1 of course nursing homes as possible.
2 Nick Pirro's mother was one door down
3 from Jimmy. This is on 3A, the floor
4 3A. So we had gotten acquainted, and
5 Nick Pirro was just a super guy. My
6 mother, even though Mrs. Pirro had had a
7 stroke and couldn't talk very well,
8 while I was taking care of Jimmy she'd
9 go over and she'd say, she says Mrs.
10 Pirro, her name was Camille, she says
11 that Nick is the nicest son any mother
12 ever had. Even though Camille couldn't
13 understand perfectly, you know, she
14 understood.

15 While I was standing at this Berger
16 Commission meeting and Nick Pirro was
17 standing right next to me. And this
18 little lady raised her hand. She looked
19 to be about 80. She said for 50, 60
20 years, I forgot which, she said, I've
21 seen my husband every day of my life.
22 She says, he's in a nursing home in
23 Oswego. I took the bus here to be -- to
24 come to this meeting. She didn't say
25

Langley

1 this because she wasn't allowed to speak
2 at that meeting. She told people around
3 her this, including myself and Nick
4 Pirro. And she -- when she raised her
5 hand to tell people this, that he was
6 going to be moved two hours away, and at
7 80 years old with no transportation and
8 only the bus she was afraid she would
9 not be able to see him. And she raised
10 her hand and they just said to her, no
11 questions. That's why I appreciate you
12 people so much. She says no questions,
13 no questions are allowed here. And she
14 started to cry. I'm telling you when I
15 think about it it's still breaks my
16 heart.

17 There is one more person I'd like to
18 tell you about up at Van Duyn who kind
19 of personifies the spirit and the care
20 at Van Duyn. His name is Bob. I met
21 him when Jimmy was down at the clinic.
22 Bob is a World War II vet. And we got
23 to chatting. He was a pilot in World
24 War II in the Pacific Theatre. Bob told
25

Langley

1 me, and he's very proud of this, he told
2 me that when he was flying he would have
3 to spin and roll to avoid the flack. I
4 would call them bullets, they called
5 them flack.

6 Okay, so twice he was shot down.
7 Twice he parachuted out of his plane.
8 And then he'll say, the first time he
9 got out okay. The second time, and this
10 was Bob's absolute climax of his whole
11 point, he would roll up his pantleg and
12 show off the bullet holes in his leg.
13 There are many veterans like Bob at Van
14 Duyn. Bob's favorite thing now is to go
15 out on the Van Duyn's grounds. He's in
16 a walker, and he faces the woods up at
17 Van Duyn. And he saved up some bread
18 crumbs and things. And if any of the
19 squirrels and rabbits and foxes and deer
20 come by he feeds them.

21 But the point of all this is there
22 is love. These people are still people.
23 They are human people. They might not
24 be able to walk and talk and act exactly
25

Langley/Law

1 like you or me. But they're inside the
2 same people. After a while if you've
3 seen, you know, like enough people
4 there, they don't look like handicapped
5 people to you, they don't look like the
6 disabled, they don't look like
7 Alzheimer's, all you see is the person
8 inside.

9 And in closing I'd just like to say,
10 human beings and people like these, I
11 don't think they should be privatized.
12 Privatize everything else, privatize
13 everything in the whole wide world, but
14 please don't privatize human being. And
15 I thank you very much.

16 CHAIRMAN McMAHON: Thank you, Susan.
17 Tom Law. If you could state your
18 address for the record.

19 **TOM LAW:** Thank you 135 Pulaski
20 Street, Apartment 2. 35 years here.
21 I'm sure Mark Stanczyk can solve this
22 whole thing as a minority person here,
23 he has to think hard. He's a finance
24 person. I'm joking, you know a little
25

Law

1 bit with this. But I'm from his old
2 neighborhood so we talk to each other a
3 little bit.

4 First of all, I have a copy here for
5 you Mr. Chairman and for the clerk each
6 of you, from the Catholic Worker
7 Community. You have this with the title
8 to it but it gets at, it's a pretty
9 unique document. It took about four
10 years to create, of discernment in
11 personalism. Christian personalism.
12 It's been called a pretty unique
13 document by other Catholic workers and
14 workers in the vein of Dorothy Day, in
15 the dignity of the person, and care-
16 given bureaucratic systems. It's
17 addressed in here pretty thoroughly as
18 far as morality of preserving dignity of
19 the aged, of the infirm, of the
20 vulnerable. And I really think it's a
21 foundational type document that's
22 uniquely available here because of this
23 local process. So it may seem like a
24 lot to get through because it's about 20
25

Law

1 pages, but I'll tell you if it were used
2 as a guiding document going forward to
3 help preserve the thoughtful dignity of
4 care givers and of institutional care it
5 probably could be a reference for the
6 next hundred years. I'm very serious
7 about that. Because it has some very
8 deep statements of the issues, the
9 challenge and preserving the dignity,
10 human dignity. So that's a gift to the
11 Legislature and to the whole community.
12 I really would hope it could be shared,
13 copies made and it could be shared.

14 CHAIRMAN McMAHON: We'll put it in
15 the minutes.

16 (Added to end of transcript).

17 TOM LAW: My own comments to start
18 with this, to this kind and dignified
19 body I put it that way; dignified body.
20 Some folks have limited, the following
21 things limited, means faculties, health
22 and family members alive and available.
23 Limited. Limited by small things, maybe
24 old age health to get in and out of bed
25

Law

1 even such as that.

2 This deserves a pro and con list I
3 would say, and are in simplest terms to
4 make a decision like this. And I would
5 think it needs an appendix, financial
6 appendix that supports the financial
7 conclusion. So I'm saying like the old
8 Abraham system, Lincoln system, you
9 know, line down the middle of the sheet,
10 pro let's do this, these are the
11 advantages; con let's not do this
12 because it's got too much disadvantages,
13 and linked up with the finances, you
14 know for the weight of the taxpayers
15 money, as a taxpayer decision.

16 But going in the creative direction
17 I would say this. My family has been in
18 insurance for, since 1954, '55 my
19 father, so what's that 45, 57 years, my
20 brothers, Mass Mutual's general agent
21 now the last five years or so, about a
22 hundred employees, the largest life and
23 a health - a plug here, not a plug, a
24 fact.
25

Law

1 So where I'm going with this,
2 insurance is about sharing risks and
3 pooling resources and covering those who
4 are needy at that time in that two years
5 for that incident, that hospital stay,
6 and you know, going forward long term
7 care. I don't see why in a county
8 that's already self insured, an
9 arrangement of an insurance type nature
10 with some type of surcharges, some type
11 of annuity. I mean people who die here
12 could say, well, we have the Onondaga
13 County Elderly Plan, I'll give them some
14 stock. You know when I die I'll give
15 them a life annuity, before I die, give
16 a third of my assets and it will pay me
17 \$400 a month. And the annuity will go
18 on after I'm gone to provide the health
19 care for the elderly in the county.
20

21 So I think what I'm saying here is
22 there is an outreach potential here
23 that's not only general but also
24 selective. Doesn't have to be everybody
25 being taxed although that does make some

Law

1 sense. I mean maybe it could be partly
 2 funded by that. But I'm going at the
 3 greater financial solution. And that
 4 would be a creative annuity situation.
 5 Also we have a strong history in
 6 Tarky Lombardi here of taking care of
 7 people in their homes. A lot of you
 8 probably know the history of that, that
 9 he proposed in about 1972 or so, maybe
 10 '74, home health aides. And we became a
 11 national model I think through his
 12 initiative and whoever was feeding him
 13 and helping him support it. So we
 14 already have a pretty substantial
 15 tradition in terms of Van Duyn, its own
 16 history locally. And Tarky Lombardi's
 17 attempt to keep elderly in familiar
 18 territory here, people, neighbors,
 19 church they know, street they know,
 20 rooms they know, gardens they know.
 21 Those are some pretty good substantial
 22 starters.
 23 But the goal I would say is not to
 24 abandon the elderly even to career
 25

Law

1 oriented professionals. Without the
 2 career oriented professionals being
 3 named as graceful, quote graceful,
 4 familial surrogates. That I would say
 5 is our ideal. That people taking care
 6 of our elders be graceful familial
 7 surrogates. I think we can all see eye
 8 to eye with that, you know, with that as
 9 a starting model, as a statement.
 10 As far as blindly accepting a
 11 proposal without having a board of
 12 visitors, say appointed, that follows
 13 this through and monitors some baseline
 14 of care. That wouldn't be a bad idea
 15 either, I think that's the way a lot of
 16 small county supervisors work, like, you
 17 know, let's go visit this place, you
 18 know. So maybe not as a group, maybe a
 19 little more clandestine, like let's just
 20 stop in on the fly. You know, like
 21 foresight accordingly but I'm saying
 22 just so you know on the ground of what's
 23 happening, you know, reality check.
 24 What else can I say? Our nursing
 25

Law

1 home situation grew, I mean if you look
 2 at the story of Father Fahey, our
 3 nursing home situation nationally grew
 4 through the availability of dollars. So
 5 that high-rises, maybe like Van Duyn in
 6 some sense about its age, high-rises,
 7 large elderly care centers were you
 8 might say bulkified because the dollar
 9 flow became there. Well, this is a way
 10 to deal with it. And we've got families
 11 moving away, the elderly need care and
 12 the families aren't available, you know.
 13 Let's get them together. You know,
 14 group it up.
 15 So we don't, in that model you know
 16 was a little bit profit driven at its
 17 end. It started maybe in the '70s but I
 18 think by about 1990 there was, shall we
 19 say, a somewhat wanting looking at how
 20 many dollars per month can we charge,
 21 you know. Is it 1,700, is it 2,100, is
 22 it 1,395? You know, what can we charge
 23 per month, you know. So that's not the
 24 basis of an ideal system I think
 25

Law

1 necessarily. You know, how much money
 2 can be charged.
 3 So there is also driving this a
 4 legal harvest, in that people try to
 5 protect their assets when they go into
 6 the nursing home. So the question
 7 becomes from a moral standpoint about
 8 means testing. Some people are fragile,
 9 some people have small families. Some
 10 people have low assets. Some people
 11 even have negative assets. I mean they
 12 might even, their house you know, maybe
 13 they've already taken out, they come to
 14 83 and they've already taken out all the
 15 reverse mortgage. So you know, they
 16 can't even pay for their pharmaceutical
 17 drugs anymore.
 18 Well, do they need Van Duyn more
 19 than -- more this year than somebody who
 20 is worth, you know \$189,000 but it's off
 21 the books? Now there is a moral
 22 question for you. But it raises means
 23 testing. And I don't think that's a
 24 false question as far as means testing,
 25

Law

1
2 you know. And stringing people out into
3 the system that they can afford, you
4 know, and where they can afford it.

5 What else? Well, general welfare is
6 a question of government and faith in
7 government. If we're going to have an
8 attractive government here we probably
9 want our faith in government as a part
10 of the quotient for the quality of local
11 life to be seen as, yeah, our local
12 government, not national government,
13 it's local government. And they do a
14 lot of good stuff here. They do a lot
15 of good things, they do a lot of good
16 services, they take care of business.
17 They watch taking care of people so
18 people feel like they belong here, they
19 feel good being here, they feel there is
20 a future here. They get a look around,
21 they can breathe and say hello.

22 CHAIRMAN McMAHON: Mr. Law, if you
23 can wrap it up please.

24 TOM LAW: Yes, thank you. Finally
25 just that some people aren't independent.

Goodwin

1
2 Maybe everybody is who is a Legislator
3 here is independent in a lot of ways
4 with their health and with their
5 earnings. But there are people who
6 become dependent. And that's not bad.
7 Weakness can show, point to the dignity
8 in the Christian person. Weakness can
9 maybe show the glory of God. That's
10 maybe not a bad thing, the glory of God.

11 CHAIRMAN McMAHON: Thank you, Mr.
12 Law. Patrick Goodwin. And if we can
13 have your organization and address for
14 the record please.

15 **PATRICK GOODWIN:** I'm a nurse
16 through a local agency, I live at 3
17 Wilson Drive, East Syracuse, New York,
18 I'm a taxpaying citizen. I worked at
19 Van Duyn for a year and-a-half. So I
20 know the skeletons in the closet. I
21 also know the fact when I first started
22 there we were told in the meeting that
23 the place was losing \$3 million a year.
24 They implemented electronic records.
25 And that was supposed to save close to 2

Goodwin

1
2 million.

3 I resigned from the facility due to
4 things I'd rather not discuss here today.
5 And I read in the newspaper they were
6 still losing \$2 million. So as a county
7 taxpayer I would like to know why.
8 Especially when the administrator who's
9 running the organization said that was
10 the cure-all.

11 There is a lot of fine people that
12 work up there. After I graduated from
13 school in 2008 I gained quite a bit of
14 experience after leaving the nursing
15 home on the east end. I hate to see
16 these individuals lose their jobs but I
17 don't like to see my taxes go up either.
18 So what is the solution here?

19 I elected you folks to make that
20 decision. Look into it to see how you
21 value life. As a nurse I have to be
22 their advocate. I was their advocate
23 when I worked there. It cost me, but I
24 can look back and I'm proud of what I
25 did there. I'm not proud of what

Goodwin

1
2 happened but that's for another day.

3 And all I can say is that we can't
4 go ahead and look at this in dollars and
5 cents. There are human lives at stake
6 here. There is a lot of folks there
7 when I worked as a nurse weren't happy
8 with the facility. And they told me
9 this. I went ahead and advocated for
10 them because that's what a nurse does.
11 It's great that a lot of folks did have
12 wonderful care, because like I said,
13 there is probably 98 percent of the
14 people that work there are there for the
15 residents.

16 Okay, I also worked short staff
17 there. And we were supposed to, under
18 the mandate of Medicaid and Medicare
19 have the proper staffing. I worked
20 shorthanded. So these are things that
21 those individuals do as employees, they
22 suck it up.

23 So what can we do as taxpayers?
24 When I heard the woman say there was
25 only 70 to \$80, I'm willing to suck it

Goodwin

up. Thank you.

CHAIRMAN McMAHON: Thank you
Patrick, is there anyone here that wants
to speak and have not signed up? Anyone
else here that would like to address
this body? Hearing that, Mr. Kilmartin?

LEGISLATOR KILPATRICK: Mr. Chairman,
I move that the meeting be adjourned.

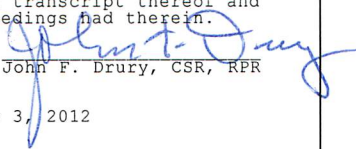
CHAIRMAN McMAHON: Public hearing is
adjourned.

[Conclusion of Public Hearing].

* * * *

C E R T I F I C A T E

This is to certify that I am a
Certified Shorthand Reporter and Notary
Public in and for the State of New York,
that I attended and reported the above
entitled proceedings, that I have
compared the foregoing with my original
minutes taken therein and that it is a
true and correct transcript thereof and
all of the proceedings had therein.


John F. Drury, CSR, RPR

Dated: December 3, 2012