

9/22/05 LAP CHAIR APPROVED

**WHITE CITY VA MEDICAL CENTER  
Local Advisory Panel Public Meeting  
September 8, 2005  
Theatre Building**

**Start Time 1:00 PM**

➤ Participants:

- Local Advisory Panel (LAP) Members: Les Burger, MD, FACP, LAP Chair; Hank Collins, Director, Jackson County HHS; Madeline Winfrey, Nationally Appointed VAWS Representative, American Legion Auxiliary; Donna Markle, Associate Professor, OHSU School of Nursing; Marty Kimmel, Jackson County Veterans Service Officer; Andrew Mebane, MD, Chief of Staff, SORCC
- PricewaterhouseCoopers (PwC): Scott Burns, Adrienne Setters, Brett Burt
- Perkins+Will: Russell Triplett
- Other VA Participants: AJ Allen, Network Planner, VISN Support Team Lead; Carol Bogedain, Quality Manager, White City SORCC; James Johnson, VHA Support Service Center, Central Office

➤ Welcome and Introductions

- Pledge of Allegiance, Jerry Heckers

➤ Purpose of Meeting/Review of Business Rules: Les Burger

- Discussed Agenda for LAP Meeting
- Reviewed rules during public comment portion
  - Each speaker will have three minutes to make presentation, monitored by stop light timer on stage; no yielding of time to other speakers
  - All questions are to be addressed to LAP Chair
- Recap of First Meeting
  - Process Overview Meeting
  - Reviewed the presentations
  - Reviewed the process of how the LAP meeting would be run
- Purpose of the meeting is to review options, identify any additional options, and come away with a template for the Secretary to review

➤ Forecasting VA Health Care Demand: AJ Allen

- Reviewed Secretary's CARES Decision
- Provided a dot map of VISN 20 showing distribution of enrollees.

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- Provided an overview of Veterans Enrollment projections from 2003 to 2023 for Sector 20b2B that includes Jackson, Klamath, and Lake Counties. Enrollment was broken out by Priority 1 – 6, Priority 7 – 8, and total enrollment.
  - Provided an overview of percent discharges for residential care from White City by county
  - Jackson County has greatest percentage of discharges
  - Discussed access and drive time for VISN 20
  - Outpatient workload was presented, broken out by ambulatory care and outpatient mental health
  - Mental health projections show a significant increase over the 20 year period
  - Model is based upon new mental health strategic plan
  - Changes in alignment due to increase in rehabilitation and social programs
  - Inpatient bed projections for 2003 to 2023 were presented, which showed a slight decline in bed need. However, the number of actual beds in use at the SORCC is far less than the 755 shown in the presentation. This number is the official operating count; however, there are 400 – 450 actual operating beds. So there is actually an increase in bed need.
  - LAP recommended that the inpatient workload be presented as one slide with bed totals in lieu of the two slides for the LAP public meeting
  - Background information on the CARES Health Care I Demand Model Forecasts and the demand from OIF/OEF war veterans was discussed in general terms.
- Business Plan Studies for White City SORCC: Scott Burns, PwC
- Provided an overview of Business Planning Option (BPO) development process
  - Purpose of the meeting
    - Review options
    - Obtain public input
  - Discussed the Project Overview Timeline
  - Reviewed the Capital Planning and Re-use Studies
  - Discussed White City Public Input and key concerns
  - Provided an overview of the White City site
  - Discussed the current status and projections for White City
  - Options Development
    - Universe of Considered Options
    - Five Capital Planning Options and 10 Re-use Options were considered
    - Three BPOs passed through the initial screening for access, quality, and cost
  - Presentation of the following three BPOs for White City (see table below):
    - Baseline BPO 1 (CP-1): Option description
    - BPO 2 (CP-2A/RU-1-10): Option description, assessment, and proposed Site Plan

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- BPO 3 (CP-2B/RU-1-10): Option description, assessment, and proposed Site Plan

<b>BPO Designation</b>	<b>Label</b>	<b>Description</b>
<p><b>BPO 1</b>  <b>Comprising:</b>  <b>CP-1</b></p>	<p>Baseline</p>	<ul style="list-style-type: none"> <li>• Current state projected out to 2013 and 2023 without any changes to facilities or programs, but accounting for projected utilization changes, and assuming same or better quality, and necessary maintenance for a safe, secure, and modern healthcare environment including the Secretary’s Decision to maintain all current services</li> <li>• VA to pursue opportunities to reduce the footprint of the campus</li> <li>• Develop a Master Plan, proposing an efficient, cost-effective, and appropriately sized infrastructure design that will reduce vacant and underused space on the campus, and consider enhanced use lease opportunities</li> <li>• Plan for alternative use and disposal will serve to enhance the VA mission</li> <li>• Three projects have approved applications from VA. They are the three “thirds” of a new dorm-type residential building as stated in the Planned Capital I Improvements section of the report.</li> <li>• Seismic retrofit will be required for most buildings. Demolish or mothball underutilized buildings.</li> </ul>
<p><b>BPO 2</b>  <b>Comprising:</b>  <b>CP-2A/RU-1-10</b></p>	<p>Domiciliary Renovation/<i>Minimal</i> Construction</p>	<ul style="list-style-type: none"> <li>• Expand outpatient care facility to meet demand. Demolish and replace buildings that require major seismic upgrades.</li> </ul>

BPO Designation	Label	Description
		<ul style="list-style-type: none"> <li>• Renovate the existing inpatient areas of Building 201 and construct an addition to accommodate increased ambulatory utilization</li> <li>• Construct new facilities management, boiler plant, and warehouse building</li> <li>• Existing domiciliary buildings to be upgraded</li> <li>• Re-use/redevelopment of remaining available parcels.</li> </ul>
<p><b>BPO 3</b>  <b>Comprising:</b>  <b>CP-2B/RU 1-10</b></p>	<p>Domiciliary Renovation/<i>Moderate</i> Construction</p>	<ul style="list-style-type: none"> <li>• Expand outpatient care facility to meet demand. Demolish and replace buildings that require major seismic upgrades</li> <li>• Renovate the existing inpatient areas of Building 201 and construct an addition to accommodate increased ambulatory utilization</li> <li>• Include renovated and expanded outpatient building described in BPO 2 (above). Construct new domiciliary buildings. Construct new facilities management, boiler plant, and warehouse building.</li> <li>• Re-use/redevelopment of available vacant and vacated facilities and property, pending relocation and phased construction of structures replacing those in RU parcels identified in the report and presentation.</li> </ul>

- Discussed White City SORCC Re-Use/Redevelopment Opportunities
  - Retail
  - Recreational
  - Institutional
  - Multifamily
- Reviewed parcels and compliance with the VA Mission

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- Discussed the identified re-use/redevelopment opportunities for White City SORCC
- Discussed the two Options not selected for assessment
- Next Steps – LAP will review the BPOs and recommend:
  - Which options should be further studied
  - Additional options as deemed necessary
  - Specific concerns to be addressed
- Website: <http://www.va.gov/cares> or <http://vawww.va.gov/cares> (website available at all times, however, portion to provide input only available through September 18, 2005)
- Mail stop address
  - White City Study
  - VA CARES Studies
  - P.O. Box 1427
  - Washington Grove, MD 20880-1427

### **Open Testimony & Deliberations**

#### ➤ Testimony 1

- Submitted presentation to LAP
- 60% disabled veteran, patient of White City facility for past five years
- Has seen facility grow, bloom, and blossom
- Is a haven for treatment he receives
- This facility is a showpiece, and speaker brings family and friends to see it when they come to town
- Suggested that using Parcel 4 for other ventures is unworthy because it will block or destroy view of the current facility
- Opposed to using parcels for any commercial uses
- Has seen encroachment on other government facilities
  - This has had an impact on the poor, weak, and addictive

#### ➤ Testimony 2

- Resident of Medford for five years
- All members of speaker's VSO are disabled and rely on White City for medical care
- Concurred with the previous speaker on the re-use issues
- Projections of population growth of the area of 15%
- Potential exists for a increase in population
- Facility is an attraction for people who are close to retirement, which will cause an increase larger than what was projected in presentation
- Concerned about the future enhancement of the facility to provide inpatient care including medical services that are not available in White City, which require travel to Portland, etc

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- Recommends that the property remain the same until it is analyzed for future needs
- Testimony 3
  - Past commander of the American Legion and volunteer at the White City VA facility
  - Concern about Parcel 10
    - Blue Star Memorial in place on Parcel 10 with first memorial icon installed in the 1950's
    - Place of respect for veterans and provides space for recreation and relaxation
    - Wonders what will happen to this sacred ground if chosen for re-use
- Testimony 4
  - Widow of World War II veteran
  - White City's SORCC has ranked in high measure and success for the past few years
  - Success due to staff, structure, and programs that are carried out
  - Physical environment inside and outside is just as important as the staff who provide care
  - "Green Space" has an effect on healing and is necessary to keep on campus; believes in the holistic approach for care
  - The land between the baseball field and the driving range can be easily portioned off for other re-use
  - VA manufactures holistic care, so veterans can get on with their lives
- Testimony 5
  - Discussed Parcel 10 and the World War II Blue Star memorial
  - Parcel 10 is hallowed ground and should not be available for re-use as a place of honor and respect
  - [Read phrase from Gettysburg Address]
  - White City has served to treat many veterans
  - Also concerned about traveling 550 miles for specialty care not available at SORCC; travel to Roseburg and usually referred to Portland
  - Unacceptable to travel that far when there is land available on White City's campus
  - Outstanding staff in White City SORCC
- Testimony 6
  - Concern about losing the memorials on site in order to provide land for commercial development and re-use
  - Insult to veterans to develop on the property that currently houses the Blue Star Memorial

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### ➤ Testimony 7

- Discussed the golf course currently on campus
- Patients who receive treatment while working/playing on golf course
- Veterans develop important social skills playing golf
- Golf course plays an important role on White City's campus

### ➤ Testimony 8

- Manager of golf course
- Golf course (Parcel 3) should not be considered as a piece of land to sell for real estate or for others (public) to play golf
- It is a place used to shape the lives of many veterans
- Used in the private sector also as a outlet for therapy
- Golf course excellent place to build a new recreation skill and a supportive network
- Patients need a way to relax themselves in a healthy way
- 100 VA volunteers operate the golf course

### ➤ Testimony 9

- Department Commander State of Oregon
- Resident of Medford
- Local business owner
- Came to the VA Domiciliary (White City SORCC) nine years ago in poor health
- Works in field of drug and alcohol rehabilitation
- Would be detrimental to those with drug and alcohol addictions to share the golf course with public members that are drinking on the course
- Was pleased that strip malls were not near the campus
- Veterans need a place that is peaceful and where they can rehabilitate themselves
- Cannot condone any plan that involves selling off the land to make money for public access
- If it's not broke, don't fix it

### ➤ Testimony 10

- Assistant Manager of golf course
- Jackson County is the fastest growing county in Oregon
- 28,000 rounds of golf are played a year
- \$120,000 of revenue are used to develop other programs in the system
- All programs work hand in hand with a structured environment
- Veterans deserve opportunity they currently have with the golf course

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- No other business venture will serve the VA in the same manner that the golf course currently does
- Worried about the bean counters

### ➤ Testimony 11

- World War II veteran and since returning from War II has become active with the domiciliary
- Keep present conditions and services for veterans at the camp (Camp White was the former name of White City SORCC)
- Give treatments they need and do not make changes
- Main concern is building commercially on the White City campus
- As long as the VA improves services here and look after veterans, speaker does not object
- Does not want to see commercial property for at least 10 years

### ➤ Testimony 12

- Graduate of VA golf turf training program and patient 2000-2001
- Substance abuse issues
- Thanked the people who improved his life
- Hired on a temporary status in 11/02
- Now a full-time employee who works directly with the patients and on the golf course
- Found his peace on the golf course
- Level of friendship/camaraderie on the VA golf course is like no other course around Medford/White City

### ➤ Testimony 13

- Testimony with regard to need for VA campus green space
- Price of freedom cannot be bought or bargained; VA services/campus is paid for by the people who earned it
- Responsibility to educate future generations about the stories of our past and Parcels 4 and 10 do this as memorials
- To use Parcels 4 or 10 for commercial purposes would be a travesty
- Speaker used the facility at White City for service related injuries
- Would like facility to remain as is and for improved services to be provided

### ➤ Testimony 14

- Jackson County Behavioral Health representative
- Community needs acute psych and mental health, and White City SORCC campus is the right place
- Would like these needs/functions included in the CARES plans
- Will send more information through the website in relation to specifics of need



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### ➤ Testimony 15

- Question to AJ Allen on demand/workload presentation: Are the enrollment numbers new?
- Answer – AJ Allen: The enrollment numbers are FY03 based figures. Each year the data will be updated. Recognizes that the number of veterans being treated is greater than what is projected. Measures are in place in order to get a better estimate

### ➤ Testimony 16

- Question to the LAP: Why isn't Josephine County accounted for in the White City SORCC service area (market) projected workload count/totals?
- Answer – LAP Chair: These numbers have been accounted for in other market volumes.

## 10 minute break

### ➤ Local Advisory Panel Deliberations, Review of Options, and Template Completion

- **Baseline Option – LAP Comments:**
  - No components of re-use
  - Question – LAP Member: What is the re-use plan for Option 1
  - Answer – Team PwC: Same as it is today.
  - No comments were made from the public on BPO 1
  - LAP Chair: This option does not meet the Secretary's intent for the campus Master Plan
  - LAP Chair: Baseline does not address improving ambulatory care, finds difficulty in recommending this option
  - LAP Member: Baseline preserves Parcels 1-7 and the golf course, which is the only positive. If it takes BPO 1 to preserve the grounds, then it is good.
  - LAP Member: Does not address need for care and does not meet Secretary's Decision.
  - The baseline is the easiest option.
  - LAP Member: This option does not include Parcel 10, which is a positive.
  - Does not address the needs for ambulatory care
  - Motion to eliminate the baseline option
  - All members were in favor of not recommending option
  - LAP views the Baseline as an unacceptable option
  - Understands the option should move forward only as a benchmark standard for other options

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- **BPO 2 – LAP Comments:**
  - Has less opportunity
  - A desire to preserve certain parcels from re-use
  - Public comments regarding BPO 2 revolved around negative effects or releasing programs
  - Comments included expanding specialty care
  - Negative comments about re-use
    - Concern about re-use of Parcels 3, 4, 6, 10
    - Concern about re-use of Parcels 8 and 9
  - Suggestion to eliminate demolishing the boiler plant and warehouse which are serviceable buildings not in need of replacement
  - Team PwC discussed the need for demolishing or consolidating in order to accommodate needs for the planning horizon, which is 20 years. Can look at it as more of consolidation.
  - Concerns that these buildings are viable well until 2023 and do not feel the need to spend the money
  - Concern that consolidation of campus will take away all the parking and that there should be space available for parking
  - Suggest using Parcels 1, 2, 5, 7 for development
  - Want to see enhanced care at the facility, so do not want to give too much land away at this point
  - Parcels 5 and 7 as key enhanced use lease opportunities
  - Concern with Parcel 6 and the impact on access, i.e. parking or growth in the Valley. Expect that parking would be provided in this parcel for ambulatory care expansion.
  - LAP does not recommend BPO 2. Panel feels that BPO 2 is not a viable option because of the release of all parcels for re-use, and recommends a new option that encompasses the renovation and rebuilding Parcels 1, 2, 5, and 7 (BPOs 4 & 5) and support facilities 8 and 9 would be replaced or renovated based on the two options
  - Recommend that the option not be considered, substitute with new option, BPO 2 without Parcels 3, 4, 6, and 10 and also with an option to either renovate or rebuild boiler plant, warehouse, and facilities buildings in Parcels 8 and 9
  - Greenbelt area accommodates the POW ceremony, Veterans Day, dog shows, and Pow-Wows on Parcel 10; this parcel should be retained for VA use.
  - Motion: BPO 4 – BPO 2 with only Parcels 1, 2, 5, 7 available for re-use and retain Parcels 3, 4, 6, 8, 9, 10 support facilities in 8 and 9 to be renovated
  - BPO 4A – Same as above except replace facilities included in current Parcels 8 and 9
  - Recommend to discard BPO 2 and replace with new BPOs 4 and 4A
- **BPO 3 – LAP Comments:**
  - Public Comments conveyed negative concerns regarding the re-use of parcels

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- Positives: Strong statement for rebuilding new domiciliary buildings is positive, veterans deserve new buildings, good option in terms of developing services (e.g. new ambulatory care)
- Negative: Involves all parcels for re-use
- Created BPOs 5 and 5A
  - Recommend to not move BPO 3 forward
  - BPO 5 – Same as BPO 3 with all same caveats to replace 8 and 9
  - BPO 5A – Same as BPO 3 with same caveats to renovate 8 and 9

### **Additional Comments:**

- Unmet needs for specialty clinics for ambulatory care and inpatient mental healthcare are not addressed in any options
- Address the education and research in part of the renovating
- LAP prioritized the options at the request of Team PwC

Rank preference of all BPOs

1. BPO 5 (new)
2. BPO 5a (new)
3. BPO 4 (new)
4. BPO 4a (new)
5. BPO 1 (Baseline)
6. BPO 3
7. BPO 2

LAP Chairman closed with request that all public questions should be referred to Anna Diehl, Public Affairs Officer, White City SORCC.

**Meeting Adjourned 4:10 PM**