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VA PALO ALTO HEALTH CARE SYSTEM – LIVERMORE DIVISION

**Local Advisory Panel Meeting
Building 90 (Nursing Home Dining Room)
September 14, 2005 9:00AM – 4:00PM**

Start Time: 9:00 AM

I. Participants:

- **Local Advisory Panel (LAP) - members present:** Al Perry, Chair, Ellen Shibata, MD, William Ed Schoonover, Beverly Finley, Tom Vargas
- **Local Advisory Panel – Members not present:** Guy Houston
- **Team PwC:** Scott Burns (PricewaterhouseCoopers), Adrienne Setters (PwC), Brett Burt (PwC), Russell Triplett (Perkins + Will)
- **Re-use Contractor:** Tim Eachus (S&S/ACG)
- **Other VA Participants:** Jason Nietupski, CARES Support Data Lead – Facilities Planner and CARES Support Team member Robert Goldman, LVD Admin Site Mgr and CARES Support Team Member Lisa Freeman, Director, Palo Alto Health Care System and CARES Support Team Chair; Larry Janes, VISN Capital Asset Manager and CARES Support Team Member; Kerri Childress, Public Affairs Officer and CARES Support Team Member

II. Opening Remarks: Al Perry

- Welcome
- General statements, this is the second of four LAP meetings
- Introduction of LAP members

III. Pledge of Allegiance:

- Led by Ed Schoonover

IV. Review of Agenda/Public Comments Procedures: Al Perry

- Brief overview of the CARES Process
- Review of the May, 2004 Secretary Principi's decision
- Overview of Secretary's Decision
- Overview of today's Local Advisory Panel meeting process
- Review of Meeting's Agenda
- Process for public comment portion
 - Reference to ground rules packet handed out prior to meeting
 - Only those who have signed the register may speak
 - Each speaker has three minutes to make presentation
 - Public comment period is the only time for audience participation
 - All questions are to be addressed to Local Advisory Panel chair

V. Summary of Administrative Meeting (held on Sept. 13, 2005)

- No closed door decisions were made during administrative meeting
- Reacquainted Local Advisory Panel members with the CARES Process

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- Ethics presentation reviewed as presented by VISN Office of General Counsel
- Preview of today's presentations
- Closure of questions from the first LAP meeting on May 13, 2005

VI. Review of Demand Data and Demographics: Jason Nietupski

- Overview of Presentation
- Breakdown of Livermore Division's Catchment area
- Review of Secretary's CARES Decision
- Veteran Population by County - 4 counties
- Statistics for Alameda County - Overview
- Alameda County's largest veteran populations reside in the Southern and Northern regions
- Statistics for Central Valley Counties—Overview
- The Livermore Division provides outpatient and nursing home care for veterans residing in Central Valley counties
- Livermore Division Nursing Home - Overview
- LVD's extended care bed utilization supports a 120-bed nursing home
- Review of Livermore VA Nursing Home Admissions (FY03)
- Breakdown VISN 21 Nursing Home Bed Distribution

Local Advisory Panel Questions:

- **Question by Al Perry:** Are all types of FY04 admissions combined
- **Answer from Jason Nietupski:** Yes, nursing home and sub-acute are combined

VI. Outline of Study Progress, Stakeholder Feedback and Analyses, and Presentation of Business Plan Options, Scott Burns

- Recap of First Public Meeting May 13, 2005
- Overview of Business Planning Option development process
- Project Overview Timeline
- Review of Secretary's Decision for Livermore
- Review of Capital Planning and Re-use Study
- Purpose of Second LAP Meeting
- Discussion of Livermore Public Input and key concerns
- Livermore Site Overview and Current Site Map
- Current Status and Projections—Livermore
- Option Development--Universe of Considered Options
- Eight Capital Planning Options and four Re-use Options were considered
- Five Business Planning Options passed through the Initial Screening for Access, Quality and Cost
- Review of Livermore Site Map and Parcel Descriptions for Re-use/Redevelopment
- Summary of Business Plan Options—Livermore
 - BPO 1—Baseline
 - BPO 2—New NHCU on site in Parcel 3
 - BPO 3—New NHCU on site in Parcel 1
 - BPO 4—New NHCU collocated with CBOC
 - BPO 5—New NHCU on undeveloped site, off LVD campus
- Review of potential re-use opportunities

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- Next Steps—Local Advisory Panel will review the Business Plan Options and recommend:
 - Which BPOs should be further studied
 - Proposing additional BPOs
 - Specific concerns to be addressed
- Website: <http://www.va.gov/cares> or <http://vaww.va.gov/cares> (website available at all times, however, portion to provide input only available through September 28, 2005)

Mail-stop Address:
Livermore Study
VA CARES Studies
PO Box 1427
Washington Grove, MD 20880-1427

Local Advisory Panel Members Questions:

Question by Tom Vargas: For BPO 5, would the stand-alone facility be located close to other medical facilities?

- **Response from Scott Burns:** Considering a stand alone facility within the Livermore Area, BPO 5 may allow collocation with an existing non VA facility, and still be consistent with the Secretary's decision. A stand alone nursing home facility would accommodate the full spectrum of patient care services for these nursing home patients. For all BPOs, corresponding with the Secretary's decision (May 2004) referral agreements would be established to accommodate acute care needs of veterans.

Question by Ed Schoonover: In BPO 3, placing Nursing Home on the lower campus, would a canteen or coffee shop be located in this area? It would be difficult for someone in a wheel chair to make it up the hill.

- **Response from Russ Triplet:** Other support elements needed would be adjacent within or adjacent to the structure on the same land parcel.

Question by Beverly Finley: There is a transportation component needed for selecting locations for facilities, I hope this will be considered during the decision process?

- **Response from Scott Burns:** Access is a key component during this decision making process and BPO development process.

Question by Dr. Shibata: Could you define the terms of 're-use', 'destination hospitality', and 'institutional' for the audience?

- **Response from Scott Burns:** Re-use is defined as utilizing available land, above and beyond what is being used for VA functions, for other non-VA business. Destination Hospitality uses may include things like a conference center or spa. More of a retreat type setting. Institutional Use could be some sort of educational facility, or use that is sensitive and complimentary to the types of functions that take place on the VA campus.

Question by Al Perry: Are there any cost estimates at this time for each of the BPOs

- **Response from Scott Burns:** Preliminary high level analysis has been performed to compare BPOs to the baseline, but this financial analysis will be analyzed in depth during Stage II after the Secretary narrows down the BPOs.

Statement by Al Perry: The VA demand presentation will be available on the VA CARES website for public viewing

- **15 minute Refreshment Break: 10:38 AM - 11:00 AM**

VII. Review the Process for the Public Comment Portion of Today's Meeting: Al Perry

- The Palo Alto Livermore Health Care Division is rich in history and recognize that many people disagree with the Secretary's decision
- Certain items are off the table, such as moving the outpatient care to the Central Valley or East Bay
- Nursing Home Options and Re-use options are on the table
- Participants are asked to review ground rules that were handed out at the beginning of the meeting
- The Chair can end the meeting or ask people to be removed if a problem arises
- Participants need to state what organization or congressional office they are representing when called upon to provide testimony
- Written and oral comments carry equal weight and will be part of formal record
- Time may not be yielded to other speakers.
- VA employees are free to speak, but are only allowed to represent their own views, and not the views of the VA or of their co-workers
- No one other than the chair may respond to the speakers
- Both electronic and print media members are present and have the right to record any comments for publication

VIII. Open Testimony & Deliberations

- **Testimony 1:** Congressman Richard Pombo (R-Stockton) via teleconference on Capital Hill
 - Providing quality healthcare in a efficient manner if of highest importance for the veterans
 - Past four years funding for Veterans healthcare rose by 46%
 - Livermore Division provides much needed services for East Bay and Central Valley
 - Constituents have expressed concerns regarding the fate of the Livermore nursing home division
 - All five proposals have their own merits, but the most important thing is to continue to improve the quality and access to care for Veterans
 - Most important aspect of this process is to listen to the Veterans
- **Testimony 2:** Representing Congressman Cardoza
 - Fully supportive of bringing facility to the Valley, because the Valley has not received the full amount of tax dollar support for Veterans.
 - Position is to get something in the Central Valley
- **Testimony 3:** Representing Stanislaus Board of Directors

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- Member of Modesto City Council and a veteran of the Korean conflict as flight engineer
- Understands how important it is to partner with other organizations and proposes moving services to Stanislaus County, which is located in the geographic center of the Central Valley counties
- Stanislaus is geographically located in the center of the four counties
- The property identified for potential VA relocation is located near the county human services center, near Modesto and Ceres
- Over 35,000 veterans in Stanislaus county
- City council is prepared to offer property to the VA for development of the NHCU

- **Testimony 4:** County Veteran Service Officer San Joaquin County
 - Summary of letter provided to LAP members and the contractor
 - 2000 census - 48.3% of veterans in catchment area are from San Joaquin county
 - Commute to Livermore is a hardship on those in the Central Valley
 - Indicates that nursing home statistics of show that during the years 2002-2004 50.1% of patients were from San Joaquin Valley
 - In 2005 62% of the patients in the Livermore nursing home are from the San Joaquin Valley, and several Veteran's organizations support having a new facility placed in the Central Valley
 - Written proposal given to the Local Advisory Panel

- **Testimony 5:** Representative Ellen Tauscher (Democrat-Livermore)
 - Care and service currently provided at Livermore Division is of the highest quality
 - Promise to veterans from our county to maintain services to area veterans
 - None of the other BPOs offer cost benefits
 - Has not seen cost projections for these changes
 - No agreement that Congress will provide funds
 - President does not have any plans in the budget to increase CARES funding
 - VA must produce plans outlining costs and contributions
 - Closure of Livermore campus will affect veterans in surrounding areas
 - Moving care to Central Valley will force veterans to travel further than they should
 - Public transit would take five hours from East Bay to Central Valley
 - LVD area veterans speak up and have stories heard
 - The suggestion of moving the facilities to a new location is a waste of time, badly planned and there is no money in the budget
 - Support people in the room so they get what the county promised them

- **Testimony 6:** Chairman of San Joaquin Board of Supervisors
 - Difficult situation and advocating what the veterans need
 - San Joaquin board of advisors welcome veterans and their needs
 - Team effort to serve the veterans the very best that they can
 - Whatever decision is made the Chairman of San Joaquin Board of Supervisors would like everyone to know that in San Joaquin county the Chairman wants what is best for the veterans
 - Hopes the same passion is offered and the best care is offered wherever that may be

- **Testimony 7:** Director of Healthcare Services for San Joaquin County
 - Agree with the criteria and the apparent conclusions of PwC's BPOs

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- The most accessible BPO is the relocation of services to the Central Valley
- Relocating the Nursing Home to San Joaquin County at French Camp is the best BPO
 - Property is accessible and visible from the highway
 - Opportunity of wide VA sharing on the campus
 - San Joaquin/Stockton offers the most cost effective piece of land
 - Costs of collocating with public hospital are very high
- **Testimony 8:** Past State Commander in the American Legion
 - American Legion stands against the closure of any VA facility
 - Congress can not look at the budget
 - This current Nursing Home facility is 23 years old, no comment on cost to improve this facility
 - Why are there veterans that have to drive past this facility to get there healthcare services in Palo Alto?
 - If we are going to close the Nursing Home we need something in the Central Valley
 - This facility needs to remain open
- **Testimony 9:** Patient in LVD Nursing Home
 - Best place he has ever been
 - Feels comfortable and does not want to move
 - Enjoys watching the deer on the LVD campus
- **Testimony 10:** Member of the Public
 - Funding isn't required for the veterans
 - Funding should be mandated or guaranteed, he does not see this happening
 - Talk of closing Livermore and San Jose, and talk of closing Walla Walla
 - Wonders how a nation can send people to war and then turn their back on them
- **Testimony 11:** Representative with the Stanislaus Chief Executive's office
 - Board working to determine the best possible area for the nursing home
 - Submitted a proposal that identifies why this Stanislaus County site is a viable place for the new facility
 - The proposed site is ready to develop
 - Accessible by city and county public transportation services
- **Testimony 12:** Spokeswoman for Central Valley veterans support team
 - Mariposa and Modesto county
 - All veterans will use the facility in the 15 acres of land in Modesto if the Nursing Home is moved from Livermore
 - Veterans would like to ask for a drug and alcohol center with rehab inpatient beds
 - Alzheimer's unit is very important to veterans
 - Veterans have given much to the country and need additional support in Stanislaus County
- **Testimony 13:** Commander of Post 235 in the Stockton American Legion
 - Speaking on behalf of veterans in the San Joaquin Valley
 - BPO to have somewhere to receive care
 - Other BPO is to consider San Joaquin for the place for the new Nursing Home site
 - Can offer central location and freeway access
 - Have second largest veterans in the catchment area

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- Would like to see VA clinic in Stockton expanded where current construction could be modified
- Business Plan Option 3 mentions moving the nursing home to the location on campus that may be contaminated, and expresses concerns about whether this has been explored
- **Testimony 14:** Director VAVS state of California
 - Against the closure of the Livermore facility
 - Gratified to know that Livermore site was considered for the nursing home
 - Need the hospital in Livermore with full acute care services
 - Veterans in the Central Valley have no where else to go but Livermore
- **Testimony 15:** Past VFW Commander from Modesto
 - Disappointed with lack of keeping promises to veterans
 - Doesn't believe that this hospital should be closed
 - Main purpose is to express disappointment
 - Not enough beds for the young people coming home from Iraq
 - Veterans deserve what is given to the veterans
- **Testimony 16**
 - Expressed that Livermore is a beautiful site
 - Does not want the site broken up and given to developers
 - Needs the hospital in Livermore and is in favor of keeping the nursing home on the Livermore site
 - Emphasized the property should not be given to developers
- **Testimony 17:** Economic Development Director for the City of Tracy
 - Hope that Tracy will have an option to submit a proposal for consideration of Nursing Home site
 - Referenced the slide from Jason Nietupski's (VA Palo Alto Health Care Services) demand presentation as to where Tracy is located, and indicated Tracy is in a central location
 - Gateway Project will be presenting a proposal to the panel for further consideration
- **Testimony 18:** Developers for the Tracy Gateway Project
 - The majority of population growth over the next 10 years will be in the Central Valley
 - Described the environment in which the new development would take place
 - Thinks the site is worthy of being a veteran's facility
 - Hopes the panel will look further into city of Tracey's proposal
- **Testimony 19:** Veteran
 - Proud to be an American veteran
 - Passed on an article from American Legion Magazine from June 2005
 - A new generation is coming home from the war
 - Please spare the Livermore Hospital for veterans
- **Testimony 20:** Past District Commander from Post 74 in Modesto
 - Should keep what we have
 - Livermore used to be one of the finest hospitals, but it is now downgraded
 - Get hospital back into shape retrofitted, bring in more doctors

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- Have a war going on and must service people that are and will be coming back from the war
- Need clinics in surrounding counties
- Veterans need to have access to facilities that are close to their homes and near their families
- **Testimony 21:** President of the Modesto/ Central Valley Blue Star Mothers & Families
 - Not sure why there is talk of closing the Livermore facility
 - Need a place in Modesto where veterans can access care
 - Statistics do not account for the number of veterans in the area
- **Testimony 22:** Department Service Officer for Disabled American Veterans
 - Speaking as a disabled American veteran
 - Realize the closing of Livermore is a given
 - If the nursing home is subject to be moved she believe San Joaquin County is the right place to move the nursing home and that there would be good support from the community hospital in San Joaquin/Stockton
- **Testimony 23:** Veteran with 32 years of active duty
 - 100% disabled veteran
 - Received weekly outpatient care at Livermore
 - Decided to move to Livermore after retirement
 - East Bay has worst traffic in the United States
 - When traveling to Palo Alto it takes him over two hours
 - Time of travel should be considered when moving facilities
 - Please consider the possibility of having outpatient facilities in both the East Bay, and the Central Valley
- **Testimony 24:** Finance officer for 11th District of American Legion
 - Two issues to discuss: In BPO 4, the numbers show that a Central Valley facility is a likely scenario
 - Vehicle access is a major criteria when making a decision on the BPOs
 - If facility is in Stanislaus County then the only freeway access is Highway 99
- **Testimony 25:** Veteran from Post Center 7265
 - Indicates that if there were to be a major disaster in the San Francisco Bay Area, this location would be the best area to support such a catastrophe
 - Grandson will be coming home from Iraq
 - Young kids need a place to come home to for their care, and Livermore is the best place
- **Testimony 26:** Former member of the city of Modesto Community and City Council Advisory Committee
 - Serves on civil grand jury
 - Vietnam era veteran
 - Fully aware of the injuries that veterans suffer
 - Need more medical facilities, not less
 - Encourages everyone to look carefully at the proposal the Stanislaus County members have prepared
- **Testimony 27**

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- World War II Veteran
- Patient at Livermore and World War II era nurse
- Livermore is a wonderful peaceful place
- Quiet place to recover and recuperate

- **Testimony 28:** Alameda County Veterans Service Officer
 - No one community deserves the facility more than another
 - Supports BPO 4
 - Alameda County would be an exceptional place for accessibility

- **Testimony 29:** Post VFW representative
 - Noticed in the paper that everything is going to decline for veterans
 - Told story about friend of the family with dementia
 - Two groups of people, alzheimer and dementia patients each need different types of treatment. Indicates he had dementia, and that it's important that dementia patients have a place to get out and walk around

- **Testimony 30:** Former patient at Livermore facility for 2.5 years
 - US Marine Corps retiree
 - Has no complaints about the VA healthcare; received great care at Livermore
 - Long term care is the largest growing demand for veterans
 - Shuttle system works great, but not enough people use it
 - Spoke highly about the surroundings on the Livermore campus

- **Testimony 31:** Speaks as a native Livermore resident
 - Part of the hospital since 5th grade
 - Several family members received care at Livermore
 - Thinks the Secretary should change his mind about the decision on Livermore
 - Build a new nursing home on the Livermore site
 - Veterans do not want the facility to shut down in Livermore

- **Testimony 32:** Post Unit 74 – Modesto, California
 - Volunteer at Livermore for 19 years
 - Several family members are veterans
 - The facility and the community shows great support for veterans

- **Testimony 33:** Member of Veterans Affairs Commission
 - Past District Commander
 - Patient at Livermore
 - Indicates the difficulty driving to Palo Alto for care from Livermore area

- **Testimony 34:** Patient at Livermore campus
 - Agree with fellow patients who have previously spoken
 - Care is very good at Livermore
 - Livermore has quality volunteers
 - Expressed gratitude to staff and volunteers at Livermore

- **Testimony 35:** Patient at Livermore campus for four years
 - Received Physical Therapy at Livermore facilities after falling and breaking hip, and is now able to walk
 - The atmosphere at Livermore helped during her recovery

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- Has no complaints about care at Livermore
- Expressed gratitude to veterans
- **Testimony 36**
 - If BPO 4 is chosen, request consideration of distance that veterans will have to travel to new site
- **Testimony 37:** Director of Department of Aging in Modesto
 - BPO 4 is preferred
 - Why not split the nursing home facilities in half and offer one facility in the Central Valley and one in East Bay
- **Testimony 38:** Past American Legion Commander
 - Would like to see a nursing home in Stockton, but also need the one in Livermore
 - Need to get facilities ready for returning veterans
 - Obligation of the panel to make the right decisions so that veterans get the proper care
- **Testimony 39**
 - Sounds like an economic battle between counties
 - Would like to see an overall plan
 - Where is this undeveloped site that we hear the facilities could be moved to?
- **Testimony 40:** Representative from Scott Haggerty's office (Alameda County Board of Supervisors)
 - Supervisor Haggerty would like to see this facility stay open at Livermore
 - If it is not possible to keep nursing home open in Livermore then keep it in Alameda County

IX. Local Advisory Panel Deliberations

- **Review of BPOs and Template Completion**
- **Business Plan Option 1—Baseline Option**
 - **Panel Comments:**
 - Beverly Finley**
 - **Beverly Finley:** Curious about discussion on nursing home services and the care of Alzheimer patients
 - **Response from Scott Burns:** This is part of the nursing home workload and would be carried forward in all BPOs.
 - **Question by Beverly Finley:** Are there flexibility plans built in for changing demand based on the current conflicts we are engaged in?
 - **Response from Scott Burns:** Yes, master planning exercise under any circumstance there will be separate contracts that have flexibility and a sensitivity analysis in regard to overall demand will be taken into consideration
 - Pros and Cons:
 - **Pros:** Idyllic setting

- **Cons:** The older buildings on site that will continue to have problems and does not address the goal to bring services closer to the veteran population.

Tom Vargas:

- **Question by Tom Vargas:** Was there any consideration given to Parcel 1?
- **Response from Scott Burns:** Did not consider re-use of the facility on Parcel 1 however the panel could suggest a BPO that addresses this option.
- Pros and Cons:
 - **Pros:** The unique setting, wonderful location, and the fact that it is still close to a large population of veterans. If Livermore closed it will create longer drive times for many veterans.
 - **Cons:** Ability to maintain facility and the expense of the infrastructure and site

Ed Schoonover:

- Need to take into consideration the travel times for the veterans population
- **Question:** Where would it be if moved to the East Bay?
- **Answer:** Depending upon BPO 4 or 5, this is yet to be determined
- **Cons:** Travel time for those living in Bay Area is long

Dr. Shibata:

- **Pros and Cons:**
- **Pros:** Presence in beautiful setting,
- **Cons:** View is provided as a clinician: disadvantages are that the nursing home is extended care, which also covers the sub-acute beds, part of a large spectrum of care, this BPO disconnects from the large spectrum of care, makes it difficult for the veteran who is in the nursing home in Livermore and has to travel to Palo Alto for additional services.

Al Perry:

- **Pros and Cons:**
- **Pros:** Easy to implement
- **Cons:** Continually having to upgrade facilities can be very disruptive for patients. Have to remember that building will be 30 years old in 2012. This BPO also limits the re-use potential

Audience summary:

- One person spoke in favor of BPO 1
- Many speakers are in favor of keeping things the way they currently are

Vote for BPO 1 to move forward: Not recommended for further study in Stage II

- **5 No**
 - **0 Yes**

 - **Business Plan Option - 2**
 - **Panel Comments:**

 - **Dr. Shibata:**
 - **Pros:** Advantages are that the nursing home remains on site.
 - **Cons:** Disadvantages are the facility is freestanding

 - **Ed Schoonover:**
 - No comment.

 - **Tom Vargas:**
 - The LAP may need to consider an addition/change to BPO 2
 - **Pros and Cons:** Agree with Dr. Shibata

 - **Beverly Finley:**
 - Agree with Dr. Shibata. Has a problem with the transportation time and the fact that veterans will be further from support system.

 - **Al Perry:**
 - **Pros:** State of the art facility, serene atmosphere, would be in a location that people are aware of
 - **Cons:** Isolated from referral services, and East Bay and the Central Valley will be without nursing home care
- Audience:** Three votes for BPO 2

Vote for BPO 2 to move forward: Not recommended for further study in Stage II

- **1 yes**
- **4 No**

- **Business Plan Option - 3**
- **Panel Comments**

- **Beverly Finley:** BPO 3 is similar to BPO 2, in terms of distance, this has benefit for being on lower campus but is minimal.

- **Tom Vargas:** Concurs with Beverly Finley's comments

- **Ed Schoonover:** Agrees with comment about having a state of the art nursing home

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- **Dr. Shibata:**
 - **Pro:** Ideal setting, but prefers BPO 2 over 3
- **Al Perry:**
 - **Question by Al Perry:** Can you clarify what the previous uses of Parcel 1 were? There is some concern that the old hospital was bulldozed.
 - **Response from Scott Burns:** May be some concerns with regard to soil, potential for containments during re-use,
 - **Question by Al Perry:** Would we know by LAP meeting 3 the nature of the soil?
 - **Response from Scott Burns:** probably will not know by LAP meeting 3, but meeting 4 will have more specifics on each BPO which may include more information (if available by the VA) with regard to soil conditions of Parcel 1.

Pros and Cons: The lower campus has worse views and is close to road

Audience: Three people spoke in favor of the lower campus for development of the new Nursing Home

Vote for Business Plan Option 3 to move forward: Not recommended for further study in Stage II

- **0 Yes**
- **5 No**
- **Business Plan Option - 4**
 - **Panel Comments**
 - **Dr. Shibata:**
 - **Pros:** Keeps the relationship between the secondary level of care in close proximity to where the Nursing Home is advantage of having both facilities as state of the art facilities, and creating more capacity in terms of location.
 - **Cons:** More costly to obtain a site to do this somewhere else. Would need to depend on re-use options, which may or may not be advantageous
 - **Ed Schoonover:**
 - **Pros:** The free land that some of the speakers spoke of, sounds like a good idea worth investigating
 - **Comment:** East Bay expansion would be a bad idea
 - **Tom Vargas:**
 - **Pros:** Collocation of services is good, an objective of the VA, is evident in this BPO.
 - **Beverly Finley:**
 - **Pros:** There would be a good opportunity to collaborate with other healthcare organizations.
 - **Al Perry:**

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- **Pros:** State of the art facility and collocation opportunities with outpatient services. Facility would be located in an area of higher veteran density.
- **Cons:** May be more expensive options in terms of acquiring the land and construction

Audience: Nineteen spoke in favor of this BPO

Vote for Business Plan Option 4 to move forward: Recommended for further study in Stage II

- **5 Yes**
- **0 No**

- **Business Plan Option - 5**
 - **Panel Comments**
 - **Beverly Finley:**
 - **Pros:** collocation—deserves further study, but prefer BPO 4.
 - **Tom Vargas:** Agree, that BPO deserves further study, may meet needs.
 - **Ed Schnoover:** Concur with Beverly Finley and her comments on this BPO.
 - **Dr. Shibata:**
 - **Con**—Stand alone facility and not collocated with other services. Also, transportation issues—have to ask who is going to travel. Most important to make travel for the patient easier.
 - **Al Perry**
 - **Pro:** state of the art Nursing Home
 - **Con:** don't have tie in with other VA services or the economies of shared staff or transportation services, expensive BPO from a taxpayer standpoint

Audience: Ten in favor of stand alone facility

Vote for Business Plan Option 5 to move forward: Recommend BPO for further study in Stage II.

- **4 Yes**
- **1 No**

Panel Members Recommending Additional Options:

Beverly Finley: Build two Nursing Homes in Central Valley and East Bay, collocated with outpatient facility

Not sure on the exact proportion breakout or allocation of the projected 120 Nursing Home beds, suggest 'determine what number of beds from a patient care standpoint'

Tom Vargas:

- **Pros:** Accommodates needs for population
- **Cons:** May lose cost efficiencies if you have two smaller facilities rather than one large facility

Ed Schoonover: Agrees with new, added BPO and should be considered in Stage II.

Dr. Shibata:

- **Pros:** Agrees with placing in heavily populated area
- **Cons:** Resources are not always available and may have greater economic costs

Al Perry:

- **Pros:** New Nursing Homes are (both) closer to population
- **Cons:** Multiply costs for two facilities instead of one, planned Nursing Home

Vote to Move Business Plan Option forward: Recommend for further study in Stage II

- **5 Yes**
- **0 No**

Additional Option:

Dr. Shibata: Additional BPO: Could be a variation of BPO 4, or a new BPO—when we look at East Bay collocation, we should consider building the Nursing Home and the proposed East Bay Clinic (from Secretary's Decision of May 2004) both on the Livermore campus.

Pros: Services offered on Livermore campus, maintains services on beautiful campus improved access for veterans cons—more distance from their home of record, but improved travel, does not preclude re-use options, re-use, potentials for compatible re-use services, i.e. educational purposes or assisted living and re-use would provide additional money necessary for many of the options

- BPO to build new Nursing Home on Livermore Campus along with "East Bay" outpatient clinic on an appropriately sized Parcel to be determined

Local Advisory Panel comments:

Beverly Finley:

Cons: Travel time for Central Valley and Mountain Counties

Tom Vargas: Supports this BPO

Ed Schnoover: Concurs with Dr. Shibata and recommendation for this added, new BPO.

Al Perry: Significant population in East Bay, so disadvantage for East Bay residents accessing facilities on the Livermore site

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Vote to move Business Plan Option forward: Recommend that this BPO be studied further in Stage II.

- 3 Yes
- 2 No

➤ **Additional Comments:**

○ **Next Steps**

- PwC will report to Secretary of all BPOs proposed
- Secretary will select between 3-6 BPOs
- PwC will do further detailed analysis of those BPOs the Secretary has agreed upon
- Those BPOs will be presented at the 3rd Local Advisory Panel meeting
- The final BPO will be presented to at the 4th Local Advisory Panel meeting
- Public has 10 days to enter comments into the system for consideration, or through late September.

Meeting Adjourned 3:56 PM