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**VA PALO ALTO HEALTH CARE SYSTEM – LIVERMORE DIVISION**

**Local Advisory Panel Meeting  
Building 90 (Nursing Home Dining Room)  
September 8, 2005 9:00AM – 3:00PM**

**Start Time: 9:00 AM**

**I. Participants:**

- **Local Advisory Panel (LAP):** Al Perry, Chair; Ellen Shibata, MD; William Ed Schoonover; Beverly Finley; Tom Vargas
- **Local Advisory Panel:** Members not present: Guy Houston
- **PricewaterhouseCoopers (PwC) Consultants:** Scott Burns, Melissa Glynn, Kristin Eberhard, Michael Bobbin
- **Perkins+Will:** Russell Triplett
- **Re-use Contractor (Jones Lang LaSalle):** Kim Burke, Kenyatta Robinson
- **VA Central Office:** Jay Halpern, Allen Berkowitz
- **Other VA Participants:** Jason Nietupski, CARES Support Data Lead-Facilities Planner and CARES Support Team member; Robert Geldman, Livermore Division Admin Site Mgr. and CARES Support Team Member; Lisa Freeman, Director, VA Palo Alto Health Care System and CARES Support Team Chair; Larry Janes, VISN 21 Capital Asset Manager and CARES Support Team Member; Kerri Childress, VISN 21 Public Affairs Officer and CARES Support Team Member; Del Ng, Chief Engineer VA Palo Alto Health Care System
- **Members of the Public:** 50 - 60

**II. Opening Comments:** Al Perry, Chair, Local Advisory Panel

- Welcome
- Pledge of Allegiance led by Ed Schoonover
- Background of CARES process
- Objectives for today's meeting
- Roles and responsibilities of LAP and introduction of LAP Members, Livermore Division site leadership and Contractors
- Review of agenda

**III. Report of Administrative Meeting and Standard Operating Procedures for Commenting on Selected Options:** Al Perry, Chair, Local Advisory Panel

- Summary of LAP 3 administrative meeting (held on Sept. 7, 2006)
- Public comments procedures

**IV. Review of Stage 1 Summary Report:** Scott Burns, PricewaterhouseCoopers

- Introduction of Team PwC and Jones Lang LaSalle
- Presentation of background CARES study process and results of Stage I study
- **Al Perry** - Open the floor for questions from LAP.
  - No questions on Stage I from LAP

**V. Review of Secretary's Decision and Approved Business Planning Options (BPOs) for Further Study:** Jay Halpern - Special Assistant to the Secretary

- Presentation of Secretary's Decision for Stage II study options.

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- **AI Perry** - Open floor for questions from the LAP
- **Tom Vargas** - For Options 1 and 1a, how is the [VA] Secretary considering the provision of medical care in those options?
  - **Jay Halpern** - Part of the study is analyzing how to maintain the level of quality currently provided. Across the country many VA nursing homes currently stand alone [independent of other VA clinical services]. The study will consider quality criteria that will address that issue.
  - **Tom Vargas** - Is there a possibility of contracting with another medical facility for specialty care if VA has problems getting residents to another site or if we wind up with a stand alone NHCU on campus?
  - **Jay Halpern** - It is possible for VA to look at contracting with a local provider.
- **Ellen Shibata** - Will Mr. Halpern be available for comment later on?
  - **AI Perry** - Yes
- **AI Perry** - Originally the Secretary was considering the East Bay and Central Valley areas, and now he has made the decision to exclude East Bay as a consideration. Please elaborate.
  - **Jay Halpern** - Information became available later in the study that the primary growth in the region would occur in the Central Valley, and the decision was refined accordingly.

### **VI. Presentation of Options/ Review of Stage II Methodology:** Scott Burns, PricewaterhouseCoopers

- Presentation of methodology for Stage II study.
- **AI Perry** - Open floor to LAP for re-use questions
  - **Tom Vargas** - It would be interesting to understand the other re-uses for the site that we have not yet considered
  - **Scott Burns** - When considering re-uses, the Contractors are considering possibilities that are compatible with the VA NHCU. These include senior housing and institutional (educational) possibilities. Also being considered are recreational and hospitality uses. Re-use possibilities must comply with VA easement, security and parking requirements.
- **AI Perry** - One of the benefits of the current campus layout is the scenic view; will the VA have control over height of new buildings and will they be responsible modifications to accommodate increased traffic patterns on Arroyo Road?
  - **Kim Burke** – Generally, the developer is responsible for necessary improvements in traffic and infrastructure. If there is a retained VA presence on site, compatible re-uses will be studied extensively such as senior housing, a nursing school, or educational uses. With an Enhanced Use Lease (EUL) agreement, the VA will have the ability to restrict lease terms to control height requirements, etc. There will be a process to obtain community input for all re-use possibilities.

### **Break 10:10 - 10:30**

### **VII. LAP Comment on BPOs**

- Overview of LAP comment process
- **BPO 1:**
  - **Ellen Shibata** - Commenting on Options 1, 2 and 8. These options are similar that they leave the NHCU on campus, and propose using other parcels for re-use. For the current NHCU, 40% of admissions are from the area, but 60% of patients travel from central valley. The beautiful setting is also an advantage.

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Personally favors re-use options that would involve something close to the VA's mission, such as a nursing school, senior housing, or an educational facility, that is more compatible than recreation functions on campus.

- **Ellen Shibata** - Commenting on Option 4. Ambulatory care function would move off campus for all options and would be relocated along the Interstate 880 corridor, meaning Fremont-Hayward. This is a very large concern. Access for veterans would be a huge problem. Secondary services are currently provided on the Livermore campus, but there has been no discussion of moving these to the Central Valley prior to now. Only three specific services were discussed to be moved; optometry, audiology and podiatry. Very opposed to moving secondary services away from veterans in this area.
- **Beverly Finley** - Has experience with working in renovated facilities and has never seen a successful renovation of an old building existing on waivers. There will still be inefficiencies.
  - **Jay Halpern commenting on Ellen's comments** - If the decision is to move to Central Valley the implementation plan would show how we would move the specialized services. We would be expected to provide the same level and type of services during the move.
  - **Jay Halpern** - A final implementation plan will be developed, and if a decision was to move to Central Valley, an implementation plan would show how we would provide services while maintaining access. The three options that have the NHCU remain on campus are variations of the same theme, and it is not the volume of these options that is significant, but only the different variations. The main question is whether NHCU should exist on or off the current Livermore Division campus.
    - **Ellen Shibata** - There will be significant access issues for outpatients in the Central Valley. The source of the patients in the NHCU is not from home, it is from the hospital environment. Most are coming from the [VA] Palo Alto [Health Services] Medical Center. When follow up is required from Palo Alto physicians, they will not complete follow up visits in Stockton. Favor any option that does not disrupt the continuity of care for veterans
    - **Jay Halpern** - Continuity would be addressed in the implementation plan
- **Al Perry** - Option 1 is the most "comforting" option. Negatives about BPO 1 from a hospital management standpoint are that we will not gain anything. There does not seem to be great benefit in renovating facilities versus building new. A generic concern for all options that keep the NHCU on campus is you would end up with an isolated area for the Palo Alto Health Care System to manage. Usually NHCUs are co-located with another facility. PwC needs to consider the relative additional expense of a stand-alone NHCU.
- **BPO 1a:**
  - **Al Perry** - Is this option, Option 1a, the same as Option 1 but it takes re-use into consideration?
    - **Scott Burns** - Correct
  - **Ellen Shibata** - There can be problems with the freestanding NHCU versus co-locating clinical care and the NHCU. Prefer co-locating [community-based outpatient clinical and nursing home] services. Collocating is more convenient and efficient.

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- **Tom Vargas** - Commenting on Option 1a, 2, and 8 - Each of these options talk about re-use of the site in some way. We need to consider continuum of housing opportunities such as independent, assisted living, and skilled nursing. There is a huge need for veterans and these services.
- **Al Perry** - There are the same disadvantages of an isolated VA entity. There are more advantages in co-locating with a VA medical center or clinic. A further disadvantage is the unknown factor of the re-use possibilities for the rest of the campus.
  - **Scott Burns** - Senior housing is being considered by Jones Lang LaSalle
  - **Al Perry** - Assisted living varies greatly in service and cost. A further question is the type and cost of the assisted living arrangement.
- **BPO 2:**
  - **Ellen Shibata** - What would the community response be to redevelopment?
    - **Tom Vargas** - Re-use of this site will be closely watched by community and the county/city. The county/city has restrictions for development in this area.
  - **Beverly Finley** - Timing would be very difficult because the Secretary will not make a decision until 2007 and the alternate uses would not be known for some time after that. It is very difficult to retain specialty services when you have a small population, and therefore an isolated facility may pose problems regarding continuity of care.
  - **Al Perry** - Concerned about isolation, but if the NHCU is to stay on campus, favors a new and state of the art NHCU facility. Option 2 is the preferred "stay-on [Livermore Division campus]" option.
- **BPO 4:**
  - **Ellen Shibata** - There is the advantage of co-location. However, because of the location there would be logistical issues if we continue to assume that the source of the patients would be from Palo Alto which is not conveniently located in the Central Valley. Favors Option 4 over Options 1, 2 and 8. However, of the "isolated" Options, Option 2 is preferred.
  - **Beverly Finley** - Likes the co-location [of clinical services] with the NHCU. Provides more direct access on a frequent basis, although there is an access issue when patients are admitted.
  - **Al Perry** - There are clear revenue benefits in co-locating [clinical and NHCU] services. This brings unrestricted re-use value for VA if the entire [Livermore Division] campus is available for re-use. Disadvantage of this option is in losing the scenic campus.
- **BPO 8:**
  - **Tom Vargas** - It seems that this option was added because it makes sense from a physical and economic perspective.
  - **Al Perry** - Would not like to be a patient during the renovation of the existing nursing home. Do not see any real advantages to this option.
  - **Ed Schoonover** - We just finished remodeling [the NHCU]. Why renovate again?
    - **Al Perry** - There is a constant battle to continue to renovate and keep facilities up to standard to best suit veterans.
    - **Scott Burns** - Under this scenario, there is a plan to consolidate functions currently provided in other campus buildings into this facility, plus bring it up to a higher [construction] standard than what is discussed under the Baseline option. Significant remodeling would be required under this option, doubling the footprint of the facility.

- **Al Perry** - It seems like this will be many years of construction.
- **Beverly Finley** - It is a privilege to look at enhancing veterans care. That is why we are here.
- **Scott Burns** – PwC is honored to move into Stage II, work with the Livermore Panel members, VA site teams from Livermore and Palo Alto, and be able to continue to serve the veterans.

#### **VIII. Congressional Comment Period**

- **Al Perry:** Introduction of Congressional Representatives
- Representative for Congresswoman Ellen Tauscher
  - Read prepared statement
  - BPO 2 would best meet the commitment to enhancing services for veterans. Concerned about the transition of services to any new or renovated facility; implementation plan should maintain continuity of care.
- Representative for Congressman Richard Pombo
  - Read prepared statement
  - Veterans must have access to quality healthcare. Supports increased funding for veterans.

#### **VIII. Public Comment Period**

- **Al Perry** - Overview of public comment purpose
- **Testimony 1:**
  - Veterans service organization member
  - Make sure developers do not get the campus. This decision is about the veterans. Assisted care facility for veterans and families is optimal for this campus. Do not move veterans [in this NHCU] to the Central Valley.
  - **Al Perry** - Confirm that no location for co-location of clinical services for this site has been decided on.
  - **Scott Burns** – Team PwC’s final report will not name a specific location but will list a range of locations for analysis.
- **Testimony 2:**
  - Veteran
  - An East Bay clinic along I-880 is too far a distance to travel. Does not support Option 8. There is massive population growth in Tri-Valley Area [region immediately surrounding the current Livermore Division campus]
- **Testimony 3:**
  - Veterans service organization member
  - Beautiful campus. Like to see [the existing] campus stay as is and be renovated. Are there any American Indian burial grounds on the campus? Suggest putting a separate clinic in the Central Valley for the veterans who live there.
- **Representative for Assemblyman Allan Nakanishi 10th district:**
  - Read prepared statement
  - Support of a centrally location clinic in San Joaquin County on the campus of San Joaquin County General Hospital, French Camp.
- **Testimony 4:**
  - Supports Option 2 and supports assisted living facility for veterans. Offer of 15 acres adjacent to the Agriculture Center in Stanislaus County that could accommodate a new NHCU.
- **Testimony 5:**
  - Veterans service organization member

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- NHCU should be located in the Central Valley where the veterans reside; specifically in French Camp (adjacent to the San Joaquin County General Hospital). Travel for veterans residing in the Central Valley to Livermore is difficult.
- **Testimony 6:**
  - Supports the proposal to locate the hospital on the site of the San Joaquin County General Hospital, French Camp.
- **Testimony 7:**
  - Veterans service organization member
  - Favors Livermore campus staying as-is and a new clinic built in French Camp, San Joaquin County
- **Testimony 8:**
  - VA medical center representative
  - Should use the existing campus and build a new facility on [current campus] site.
- **Testimony 9:**
  - Local resident
  - Been visiting the Livermore campus for 20 years. Keep the veterans in Livermore in a new NHCU on the existing campus.
- **Testimony 10:**
  - Supports co-locating the NHCU with a clinic in San Joaquin County. Supports the County's [Board of Supervisors'] proposal for a facility in French Camp providing better access for veterans.

### Lunch 12:00 - 1:00

- **Testimony 11:**
  - Veteran
  - Supports proposal for the replacement French Camp NHCU facility
- **Testimony 12:**
  - Supports the proposal for replacement French Camp NHCU facility. French Camp is the ideal location for accessibility of most veterans.
- **Testimony 13:**
  - Veteran
  - Appreciates the French Camp proposal and advocates it, but believes the Livermore campus should stay where it is. The location makes sense. There is no need to change it. In a survey there was 90% patient satisfaction. A decision about Livermore should not be delayed. Do not forget about the 300 employees at Livermore.
- **Testimony 14:**
  - Local government representative
  - There is no better location than French Camp in San Joaquin County for the replacement VA NHCU.
- **Testimony 15:**
  - San Joaquin County has already agreed to lease the 8-10 acre site to VA for \$1 a year. Emphasizes the County's proposal for San Joaquin. All preparations for the facility are complete. Planning and design for the replacement NHCU in French Camp can start immediately.
- **Testimony 16:**
  - Educational affiliate

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- Population is growing in the area and Delta College has a large Nursing program, students of which would benefit from an affiliation with the VA clinical programs. Supports proposal for San Joaquin County location of the replacement NHCU.
- **Testimony 17:**
  - Veteran
  - Wants to use VA services at Livermore. VA Livermore Division staff provides excellent service to their patients.
- **Testimony 18:**
  - Veterans service organization representative
  - Concern about Vietnam veterans and new veterans. Supports French Camp location.
- **Testimony 19:**
  - Veteran
  - Quality of care is excellent at Livermore Division. Supports [NHCU] facility to stay open. Appreciates all the volunteers that visit Livermore
- **Testimony 20:**
  - Veteran
  - Livermore is a great facility with great people. Keep [NHCU] facility in Livermore on the existing campus.
- **Testimony 21:**
  - Local resident
  - Grew up around this facility. Both facilities are needed in French Camp and Livermore for different but important reasons. Suggest VA [Central Office] recognize this and support funding for both facilities.
- **Testimony 22:**
  - Veteran
  - Supports option for relocating NHCU to French Camp. Not trying to move Livermore facility but when a new Central Valley facility is needed; it should be in French Camp.
- **Testimony 23:**
  - Local health care representative
  - Supports proposal for 120-bed San Joaquin [NHCU] facility in French Camp. It is a superior proposal with co-located outpatient clinical services onto one campus. Quality and access will be enhanced most veterans.
- **Testimony 24:**
  - Local government representative
  - Replacing the NHCU in San Joaquin County is a superb option. Great access and quality and cost will be addressed under this proposal. Locating in San Joaquin County will save millions of dollars for site acquisition costs. The San Joaquin location can be completed in half the time of any other location, based on recent, comparable project developments.
- **Testimony 25:**
  - Veteran
  - Travel time from Livermore to Palo Alto can be difficult. VA can accommodate both Bay Area and Central Valley veterans with a Central Valley-based NHCU. Supports French Camp facility.
- **Testimony 26:**
  - Veteran
  - Question: What is the size of the French Camp facility? Answer: Approximately eight acres. Response from Testimony 26: That is not a lot of land. Need to

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think about the size of the facility. Livermore Division campus provides enough land and we should develop here before thinking about moving to French Camp.

- **Testimony 27:**
  - Veteran
  - Keep things the way they are [with renovated/replacement NHCU on the Livermore Division campus]

### **IX. Summary**

- **Al Perry** - How long is public comment period open?
- **Scott Burns** - The contractor will gather and analyze comments through September 22, although the VA CARES web site and mail-stop address will be available to all who choose to provide comments throughout Stage II.

**Meeting Adjourned 1:48 PM**