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Closures could hurt communities

Panel hears testimony, weighs shutting health facilities

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Getting medical care in the North Country can be a challenge in the winter when roads are impassable.

Torrie DeMar, a registered nurse from Watertown, fears it will get even harder if a state commission starts closing hospitals and nursing homes in her area.

"We are already struggling to cope with ever increasing caseloads. . . . Patients wait in the emergency departments because there are no beds in the units," DeMar said Friday at a public hearing in Syracuse. "We want assurances . . . that these conditions, which are already bad, won't become worse."

DeMar was one of 24 people who testified at the hearing at Le Moyne College conducted by the state Commission on Health Care Facilities in the 21st Century. The governor and the state Legislature created the commission to identify hospitals and nursing homes that are saddled with empty beds and are candidates for closure, consolidation or conversion. By shrinking the system, the state hopes to rein in health-care costs.

The commission will make its recommendations by Dec. 1. Those recommendations will become law unless the Legislature rejects them.

The commission has identified Oswego and Cayuga as two counties with too many nursing home beds. It views both counties as having high potential for nursing home closures.

DeMar said before the state closes nursing homes, it must make sure there are enough assisted living facilities, home care agencies and other services available to displaced elderly people.

"Years ago, the state closed many of its mental health institutions, assuring the public that outpatient facilities would be available for the care of patients in the community," she said. "These resources did not materialize and, tragically, many of these patients became homeless and abandoned."

Some speakers said the commission is paying too much attention to hospital occupancy rates and not enough to hospital admission rates.

Ron Lagoe of the Hospital Executive Council, a Syracuse hospital planning agency said the way to save money is to reduce excess hospital admissions. Hospital admission rates in the New York City area are nearly 10 percent higher than they are in Onondaga County, he said. If Syracuse hospitals took in patients at the same rate as New York City hospitals, 7,200 people would be hospitalized unnecessarily here every year, according to Lagoe.

Syracuse hospitals have worked cooperatively to improve efficiency. As a result, patient hospital stays are shorter in Syracuse than in any other metro area in the state, according to Lagoe.

Gerald Richmond, deputy director of the Central New York Health Systems Agency, said "rightsizing" should not be viewed as the most critical issue in the commission's assessment of the nursing home system.

"The general decline in occupancy is due, in part, to management problems at certain facilities and to modest over expansion, which is likely to disappear as baby boomers and their parents age," he said.

Lower nursing home occupancy rates aren't all bad, he said. When more nursing home beds are available, patients are less likely to be backed up in hospitals, he said.

Brendan McGrath, administrator of Auburn Memorial Hospital, urged the commission to carefully consider the economic effect its decisions may have on communities. He said his hospital has a \$28 million payroll.

Mark Rappaport, chief executive officer of Lewis County Hospital, in Lowville, agreed.

His hospital employs more than 450 people, making it the largest employer in the county.

"Any changes to our services will have a disastrous impact," he said.