2026 UU Talk by Beverly Hammons

Good morning!! It is a pleasure to be with you today. My name is Beverly Hammons, and I have been a member of this Society since 1986. I know some but not all of you, but I believe I share with all of you the common principles and values of Unitarian-Universalism.

This morning, I would like to tell you about some of the work of the Tompkins County Comprehensive Health Planning Council during the years I worked with it from 1977-1981 and again from 2004 to 2010. I will describe four accomplishments of the Council. One, the successful support of the Groton Nursing Home application to the NYS Department of Health. Two, the promotion of car seats for infants and children. Three, the development of Hospicare. And four, the Sharing Your Wishes campaign which is a program to institute Advance Care Planning. All this will be supplemented by copies of documents related to this work. Along the way, I will pay honor to many good people who saw a humanitarian need and worked to fulfill it.

First, some background about me. In 1977 I had just completed a master's degree at Cornell. Prior to that I had been on a joint team of Ecuadorians and Peace Corps Volunteer women who trained Ecuadorian women and girls to be midwives and paramedics as well as health and nutrition educators in their small remote communities in the Amazon rainforest and the Andes Mountains, where I worked for three years.

In November of 1977 I was fortunate to be hired to work with the Tompkins County Comprehensive Health Planning Council as planner and director.

However, before I could get too comfortable in my new job, a letter from the NYS Health Department arrived in the office. It stated that the Groton application to build a nursing home had been rejected due to a surplus of nursing home beds in Tompkins County.

This was a great surprise to me and an obvious error because the State's bed count for Tompkins County included those at the Odd Fellows and Rebekah Home and the extended care beds in the Tompkins County Hospital.

I knew that the Odd Fellows and Rebekah Home had been closed for several years. I phoned Tompkins County Hospital administrator Bonnie Howell who confirmed my understanding that the hospital no longer provided extended care beds to patients and had not for several years.

I then called the State Health Department administrator who had signed the letter denying the Groton application and told him why the Department's decision was based on faulty numbers. He paused and then quietly replied that obviously a mistake had been made. The ball was back in our court.

So I phoned the Council president to say that I would be calling the chair of our Review Committee to initiate a request for the State to reconsider based on our accurate numbers of nursing home beds in the County. He emphatically told me that there would be no response from the Council and that the State's decision would stand. Needless to say, I was shocked by this reaction. But I was not speechless!

I responded that the Council was obligated to respond to the State's incorrect conclusion. He argued that would not

happen and told me not to take any action. Then he hung up on me!

As I have said, I was not speechless. Without hesitation, I immediately called him back and said, “Sir, you do not hang up on me. I am calling Norma Wasmuth, who was the Review Committee chair, to convene the committee and respond to the State Health Department.”

As a result, the Health Planning Council and the Central NY Health Systems Agency corrected the State’s out-of-date numbers and reaffirmed support and justification for a nursing home in Groton. The Groton Nursing Home was approved by the State and has served its community for decades. I was learning that the squeaky wheel does indeed get the grease.

Now, about car seats. Recognizing the need for babies and children to be protected by car seats, in 1978 the Child Health Committee chose to promote car seat use as its focus. Today, most drivers use car seats willingly to protect the babies and children who ride with them. To those of us living in the 21st century, it may be a surprise that this innovation was not popular nearly fifty years ago. The common reaction to the car seat campaign was “Car seats are too expensive and who would spend that much money on something that will be outgrown in a short time?” Or more bluntly, “What a stupid idea!” Well, not to us. Here’s the story on that.

The Child Health Committee met in the office of the Day Care Council, which at that time was in our UU Parish House since our congregation had rented the Parish House to the Day Care Council. June Rogers was Director of the Day Care Council and a member of the Health Planning Council.

Lin Runyon, a former elementary school teacher and mother of two small children, was also a Health Planning Council member and chair of the Child Health Committee as well as an early adopter of car seats for her children.

The committee devoted much time to creating a campaign that would convince the public that car seats were necessary and worth the money. At one meeting, Lin presented her latest idea.

It began by asking this question, “Would you buy a cut glass vase and lay it in the back seat of your car while you drove around town?” “Of course not!” was the obvious answer. This question became the “hook” for the Child Health Committee’s campaign introducing the importance of car seats for infants and children. The committee also worked with the Day Care Council to create a car seat loan program and have local law enforcement officers teach drivers how to safely use car seats. In 1982, car seats became mandatory in New York State. As we know, our UU congregation’s Babies’ First program provides free car seats to all who ask.

Just a few weeks in the job, I realized that Tompkins County was the kind of community that could create and sustain a hospice. It was obvious to me that hospices were needed in the U.S. My experience in community development and education had taught me that for an idea to become reality, it had to come from the community. Based on this belief and the level of civic involvement in the county, I was confident that a grass-roots effort to establish and sustain a hospice in Tompkins County would succeed. I would have to bide my time as I anticipated that some Council members would broach the idea.

Finally, in early 1978, three Health Planning Council members asked me for my opinion of the possibility of establishing a hospice in Tompkins County.

Nina Miller, chair of the council's Mental Health Committee, asked for my thoughts after a committee meeting. Two board members, Mike Apa, administrator of the Reconstruction Home (now Beechtree) and chair of the Long Term Care Committee, and Margaret Harding, director of the county Office for the Aging, and I were talking about their joint work to create the Tompkins County Long Term Care Coordinating Service (now New York Connects) when the conversation turned to their opinion that the county needed a hospice.

Looking back, just last week, I realized that they asked me about hospice only four months after I had begun the job. In 1978, that did seem to me like a long time. Today, not so much!
These three Council members requested that I present the question to Ruth Pettengill, the newly elected president of the Council. I was very happy to do so!

In the 1978-79 program year, the newly formed Hospice Ad hoc Committee successfully documented the need, and from 1979 to 1980, the second Ad hoc Hospice Committee wrote a plan, which it passed to the advisory committee created to act on the new plan. Several people on the two ad hoc committees volunteered to serve on the advisory committee including Reverend Dave Evans, Mike Apa, and I, though my commitment was no longer as an employee for the Council but as a volunteer, like the rest of the committee.

From the beginning, I knew it would require the concerted efforts of a small group to fully develop a hospice and a

much larger number of committed people to financially maintain it. In the earliest years, most hospices were not-for-profits.

Today, I am sad to say that most hospices in the US but not in NYS are for-profits due to that being the quickest way to make fraudulent claims against Medicare, Medicaid and other insurance companies for nonexistent patients or patients who are recorded to have received services they did not need or needed and did not get. To be profitable, it is necessary to provide less service. A number of lawsuits have resulted because of this fraud, otherwise known as theft from the public coffers. I have spoken with the relatives of patients in for-profit hospices in Florida who realized that their relatives were not receiving adequate care and made great efforts to move their relatives to a not-for-profit. For this reason, I know that Hospicare, founded as not-for-profit, must remain financially independent in order to be true to its purposes, its patients and its supporters.

While I have always believed that Hospicare would come to be loved and thus successful, I have also always known that Hospicare cannot live on love alone. I am fortunate enough to be able to provide a $25,000 matching fund for Hospicare to which those who agree that independence is necessary can contribute to double their contribution. Please contact Emily Hopkins, daughter-in-law of our own Carl and Kathy Hopkins, for details on how to contribute. Emily is Hospicare's Director of Development and Community Relations. Her email address is ehopkins@hospicare.org. Or see me.

In 1981, the new Reagan administration greatly reduced federal funding for health care planning, disrupting county and regional organizations throughout New York State. I had

requested a maternity leave from the Central New York Health Systems Agency before this financial disaster. The Agency had no maternity leave policy and administrators delayed responding to my request. With the defunding, those of us working at the county level were fired. But because Tompkins County continued to make a financial contribution to the regional agency, it negotiated with the Health Systems Agency to have the position filled with a new employee by summer's end.

In 1984, I was again hired to work for the Health Planning Council (HPC). Betty Falcao, director of the Council, anticipated funding for Advance Care Planning from the Community Health Foundation of Western and Central New York.

The Council's Long Term Care Committee, (a successful coalition of organizations and individuals committed to improving long term care) and HPC staff initiated the project in Tompkins County. The three-year grant was awarded in 1985 to six counties: Tompkins, Alleghany, Cayuga, Erie, Genessee & Niagara. The challenge was to create systems change in Advance Care Planning.

Here I have to say that I was somewhat incredulous that systems change could occur in three years or even six years.

In Tompkins County, the Long Term Care Committee studied Advance Care Planning materials that other professionals had written and asked local organizations how they worked with patients and clients to complete documents. The foundation staff and the six county coalitions met regularly in Rochester to share this kind of

information and experiences and receive new information from other professionals working on the topic.

The six county coalitions concluded that the materials that were available just did not influence most residents of any of our counties to consider Advance Care Planning. We decided to write our own. Continuing to meet regularly, the coalitions and the foundation staff wrote new Advance Care Planning materials. We voted to call this approach, “Sharing Your Wishes.” These new materials were very well received and adopted by coalitions in seven more counties.

In Tompkins County, we also sent a written questionnaire to professional staff including nurses, social workers, administrators, and other providers of health care asking what they needed to more effectively influence and help their clients and patients use Advance Care Planning (ACP). The overwhelming response to the survey showed a strong desire for training on how to approach the subject with patients, how to talk with them about the importance of Advance Care Planning, and how to work with them to successfully complete the process. This response caused us to write a rather weighty but very comprehensive training manual complete with CDs. Here it is. It has not only been used in Tompkins County, but also by the other twelve counties using “Sharing Your Wishes.”

Having enjoyed searching online for developments in ACP, I have found materials that we wrote for Sharing Your Wishes have been adopted by programs in other parts of our country.

Before I take questions, I want to say that I am grateful that working with the Health Planning Council allowed me to collaborate with others to fulfill one of my lifetime goals: To

do work that is truly beneficial and improves quality of life for all of us.

These days, it may seem that things in our country are getting worse. But I try to remind myself that beyond the scary and discouraging headlines, good people come together every day to improve the lives of ordinary people. That is more often the rule than the exception. The good people I have spoken of today are always among us. And here, in this congregation of kindness and caring, I imagine you know more than a few of them. Thank you.

Questions