

JHL at the Crossroads – A New Direction
An Open Letter to its Board of Trustees

This letter is intended as a plea to the Board of Trustees to reclaim JHL's focus on providing exceptional care of its residents as its primary goal. For many past years, JHL enjoyed a reputation as a respected nursing home largely because its mission and programming prioritized the care of its residents above all else. In recent years, however, it appears that JHL has become a more typical corporation, now seen as focusing on its own growth and bottom line. This letter will show how its highly successful corporate agenda unintentionally overwhelmed its historic humanistic mission, increasingly distorting JHL's regard and treatment of its own residents and plans for their future and turning away from the community around it.

This corporate slippery slope not only caused degradation in the day to day care offered to its residents but it propelled a conspicuous focus on the proposed building of an anachronistic high-rise institution on West 97th Street that is deleterious for its own clients, nursing home residents and their families, as well as for thousands of community residents including school children as young as three years old.

We understand that JHL's President and CEO, who has committed JHL to this unfortunate course, will be stepping down as of December 31, 2017. We write this letter now to urge the Board of Trustees to seize this unique opportunity to reassess its direction and re-evaluate how JHL will fulfill its sacred mission. At the crossroads, JHL can be true to its reputation and hire a seasoned, courageous and open-minded CEO who will re-orient JHL's compass toward a successful future that is achieved neither on the backs of frail older persons nor at the peril of the residents and school children of the West 97th Street neighborhood of Park West Village. In so doing, JHL can demonstrate its soul as a true national leader, modeling an exciting, humane and enlightened vision that encompasses both nursing home and community residents, in stark contrast to the current campaign that endangers both.

This paper will document how JHL has changed for the worse in recent years as well as how its project for West 97th Street is ill-advised and characterized by anachronistic ageist assumptions. And, this letter will conclude with an exciting alternative that the Board should pursue – a new direction that would promote the well-being of its own clients, offer the community both safety as well as benefits, and would protect JHL's reputation and that of its trustees, donors, and city and state *elected* officials and municipal departments.

JHL's Recent History

According to Medicare.gov Nursing Homes Compare, its nursing home on W. 106th St had by its own figures, a lower staffing in nursing than NY State or national averages. While admitting elderly people with highest care needs in order to capture highest reimbursement, it staffed far lower than other nursing homes. Unlike California, NY State does not require a minimum staffing level in nursing. JHL took advantage of this financial *disincentive* to provide good care that the reimbursement formula crafted during the Reagan administration affords unprincipled operators.

As a cost saving measure, in addition to cutting back RNs and other essential direct care staff at W 106th Street, a number of sources reported JHL also reduced the availability and quality of basic supplies like towels, washcloths, and skin ointment, leaving their frailest and most vulnerable *clients* at risk for poor care while frustrating the markedly shorthanded and hard pressed direct care staff. In addition to the heartbreaking complaints of neighborhood residents and their families about their poor care at JHL on 106th St., one reads with dismay the online reviews of other families as reported on Yelp. If you admit the most ill people in order to garner highest reimbursement, but have lower than state or national averages in nursing, the result is predictable. An over-extended staff, with inadequate supplies, and lacking both RN leadership and the quality in-service education that had been JHL's hallmark inevitably produces the decline in clinical competence that is sadly and tragically evident.

And yet, JHL's 2014 tax returns, the most recent publicly available, state that Audrey Weiner was paid \$3, 531,926 for that year. We look forward to studying JHL's tax filings for 2015 and 2016 when these become available, particularly regarding how much top echelon staff was paid.

In her highly acclaimed book published in April, 2017, [American Sickness: How Healthcare Became Big Business and How You Can Take It Back](#), Elisabeth Rosenthal, MD offers a parallel view of the consequences of the excess corporatization of the nation's hospitals. She particularly references non-profit hospitals and cites the degree to which Goldman Sachs has overtaken Mother Therese.

JHL's top executive staff and board members may have avoided the eyes of residents suffering from painful bed sores and the searing shame of distraught family members - powerless to protect loved ones from unnecessary suffering in their final months. In recent years, JHL exchanged the cost of experienced and competent RNs and others for a bloated entourage of lawyers, lobbyists and consultants who were hired, not to enhance services to seniors, but to advance a high-rise nursing home on West 97th St.

This pursuit also added to the suffering of older persons in JHL's larger nursing home in the Bronx. To contain costs, that nursing home not only cut back on seasoned staff, for a time they even cut back on food for frail elderly residents.

In July, 2013, in an unprecedented show of courage, nursing home residents at the Bronx campus slowly filed and wheeled into the packed auditorium to petition the administrator. They complained that food was reduced, that they were hungry, that staff on all three shifts in one unit were precipitously replaced without cause or warning, and that some staff throughout the facility were rude and harsh.

Instead of going to the front of the auditorium to respectfully receive and acknowledge the frail older persons' complaints and their extraordinary courage in bringing these forward, incredibly, the acting administrator, Rita Morgan, and Michael Luskin, then chair of JHL's Bronx board and now chair of JHL's powerful systems board stood in the rear of the auditorium, smirking at the seniors' entreaties. When asked afterwards how he felt listening to nursing home residents complain they were hungry, Luskin replied that it's not so bad if their grievance was hunger.

Although JHL restored the food that had been reduced, the nursing home proved that they didn't devalue older persons after all. In fact, they regarded them as a highly lucrative commodity. In 2016 at summer's end, JHL sold their Bronx nursing home and in effect the 750 individuals living there for \$95 million at a profit to JHL of an estimated \$127,000 per person. Betraying elders and their families who assumed that they were living under the protection of a Federation agency, JHL now sold them to a large for-profit chain as if they were mere commodities, as if they didn't matter as individuals.

Why is the Twenty-Story Tower Proposed for W 97th St. Bad for Nursing Home Residents?

The "Green House model," which JHL chose to adopt as the nursing home of the future, was originally designed as a one-story ranch-style suburban home for 10 people with easy access to the outdoors. At one story on street level, older persons enjoyed being able to observe the rampant normalcy of street life in the neighborhood and being able to easily get outside accompanied if needed on nice days.

In the Penfield Green House in a Rochester suburb, for example, residents enjoyed going to the annual Lilac Festival, to the local Wegman's supermarket, to their houses of worship, to visit family at home, and to easily get outside to the deck and garden area. They were safe in the event of fire because there were two readily accessible egresses for those ten individuals to be accompanied outdoors at street level in an emergency – either via the front door or the side door leading to the deck and sidewalk. The street had few cars, no congestion whatsoever that would limit ambulances or fire trucks. That was an early model that drew national acclaim. But that is not the Green House model that JHL plans for its Manhattan Project.

Early on, JHL submitted plans for a Green House type nursing home on their 106th St. property, which the NY State DOH approved in 2008. But when JHL was approached by Joseph Chetrit to engage in a land swap, they jumped at it. In that deal, what has been publicly disclosed is that JHL would give Chetrit their extensive and highly valuable acreage on W.106th St. in exchange first for a small lot on W. 100th St, plus \$35 million. JHL backed out of that deal but pursued Chetrit's next land swap offer of 1/3 acre on a lot on West 97th St.

This too small parcel, formerly an outdoor parking lot, is highly toxic with lead, barium, arsenic, asbestos, mercury, and other poisons, and it borders on PS 163 and surrounding Park West Village residential buildings. West 97th St is a dangerously congested thoroughfare where ambulances and fire engines are already routinely delayed, sometimes for as long as three traffic light rotations to travel that one block. If a stroke patient, for example, were to arrive at the hospital too late, lifelong tragedy can result for that individual and family. Decency demands that existing traffic congestion not be exacerbated.

Since the lot is not only toxic but equally problematic because it is too small to humanely accommodate such a large number of frail older persons, JHL was obliged to design a 20-story tower, which would make it the tallest nursing home in the world. Its inordinate height makes it both unsafe and undesirable as a residence for long-stay vulnerable and mobility-challenged individuals. Unlike the prototypical one-story Green House, this high-rise model has neither the possibility nor plan of evacuation in the event of fire or other emergency.

The ADA stipulates that young people with disabilities may no longer be confined in a high-rise from which they could not be evacuated in an emergency. All residents of nursing homes are people who cannot manage activities of daily living on their own. They, too, are people with disabilities. But lingering ageist prejudice pretends that it is acceptable to confine frail elderly people for the rest of their lives with neither the possibility nor plan for their evacuation in the event of fire or other catastrophe.

This issue attracted government scrutiny in the past. When he was Manhattan Borough President, Scott Stringer issued a sober warning about the lack of adequate emergency preparedness in New York City nursing homes. Stringer's report, entitled *No Way Out*, continues to alert people of conscience to the hazards to human life in NYC nursing homes of which JHL's proposal for West 97th Street is the quintessential example.

According to the National Fire Protection Association's (NFPA's) Landmark Study in September, 2008 by Jennifer Flynn, *US Structure Fires in Nursing Homes*, in 2002-2005, an estimated 2,810 structure fires in US nursing homes were reported to municipal fire departments annually. "The kitchen was the leading area of origin for nursing home structure fires," the report said. The following percentages were given in the report as the leading causes of structure fires in nursing homes: "cooking equipment fires – 54%; clothes washer or dryer – 12%" and lesser causes."

In JHL's proposed 20-story nursing home for West 97th Street, each long-stay floor would have two stoves, two dishwashers, two clothes washers, two dryers, and two electric fireplaces – none of these ten large heat generating appliances which the NFPA cited as the major causes of structure fires would be encased behind a concrete wall to separate them from proximity to residents.

Since this high-rise adaptation of the Green House model did not meet the former federal fire safety code for nursing homes that would have determined frail residents to be in Immediate Jeopardy, great effort was expended nationally to reduce the federal fire safety code governing all nursing homes in order to accommodate this model and its national replication. In March, 2012, the federal regulatory and oversight agency, Centers for Medicaid and Medicare Services (CMS) reduced and revised the federal fire safety code so this model could be built, according to *paper compliance* while not possibly assuring the actual safety of frail older persons confined at twenty stories in the event of fire or other catastrophe.

James Merrill, the CMS official in charge of fire safety told me in a phone conversation that included Alice Bonner, at the time Director of CMS' Nursing Home Division, that in the event of fire, each older person would be escorted to his/her room and left alone in the room door closed to await fire fighters. They responded with silence to my question of what the fire fighters would do when they reached terrified elderly people trapped in their rooms at twenty stories – at risk of being overwhelmed by smoke. What if the elevators were compromised? What if there were a power failure? How long would it take to bring over 400 vulnerable, mobility-compromised people from twenty stories to safety? Would fire fighters also be at risk? Have they ever been on

a nursing home floor during a fire drill at night when the interminable piercing fire alarm terrified residents alone in their rooms, some screaming out: “Help me! Save me, please!”

In January, 2013, Alice Bonner spoke of CMS’ favorable view of replicating high-rise Green Houses in cities across the US. Then on February 8, 2013, in a press briefing in the DC Capitol Visitors’ Center, Alice Bonner, in her capacity as regulatory and oversight head of US nursing homes endorsed the Green House Project. Soon thereafter, Alice Bonner was honored at a prestigious luncheon that JHL convened while its application was under evaluation by the NY State DOH, over which CMS has oversight and regulatory responsibility.

Five authentic nursing home reform advocates, those who aren’t paid to take sides, wrote to NY State DOH against this plan on two grounds: 1) it’s an unsafe building for frail individuals who cannot be evacuated in the event of fire or other catastrophe and 2) the inordinate height for a nursing home would result in their excessive confinement for the rest of their lives. Many frail ill people seek nursing homes because at home they were too isolated. This overly restrictive environment would confine them even further.

The fact of this plan’s being poor public policy was even corroborated by Dr. Bill Thomas himself, the geriatrician who based his “Green House” concept on an earlier, more flexible small house model. In my discussion with him at his summer cottage on Lake Cayuga on Saturday, April 21, 2012 Bill Thomas acknowledged that “Jewish Home’s plan isn’t right.” He pledged they would “Do it right after Jewish Home but we (they) would go forward with Jewish Home.”

Other equally serious drawbacks are the consequences of too tall a nursing home. With elevators calibrated at slow speeds for safety reasons, confinement on such high floors would result in frail individuals being disconnected from neighborhood life – coming and going with such delay and difficulty as to preclude it for most mobility-compromised people. No one at any age wants to be stored away. The inordinate height of what’s proposed induces resignation instead of resilience; passivity over active engagement; custodial attitudes over mutual relational ones or I-it instead of I-Thou.

In addition to the evident obstacles to effective emergency preparedness, it is anachronistic to confine frail older persons in a high-rise from which they cannot get outside to enjoy the possibility of going somewhere and the spontaneity of diverse neighborhood activity. Nursing home residents are not a separate species. They are still real people like you and me. It is against the ADA to warehouse younger people with disabilities in such a building, yet the ageism reflected in JHL’s plans, to say nothing of the commoditization of elders would subject their *clients* to this confinement for the crime of growing old.

Nursing homes’ built environments, like their human environments, have a profound effect on the safety, well-being, satisfaction and happiness of the people who live there. Rather than confining older persons, nursing home walls need to become more permeable so people maintain and form meaningful and new relationships, have new experiences and enjoy as much of life as possible. Stacking Green Houses to twenty stories is the antithesis of what made its original model promising in its emancipation of residents from institutional warehousing. It’s a terrible idea to use the wonderful initiative of private rooms and baths to justify returning to high-rises

that inhumanely maroon people on islands of misery for the rest of their lives. Sartre's *No Exit* comes to mind.

Nursing home residents have long life histories and common human needs which don't diminish with advanced years. In life's final chapters, the need to engage, to love and be loved, to live purposefully, to participate as fully as possible, to quest for meaning intensifies. The pilot light burns brighter still.

A New Direction: The Better Choice

Contrary to the fiction that Mayor de Blasio and others have been hoodwinked to believe – that densely populated urban centers require high-rise nursing homes – nothing is farther from the truth. In cities in the Netherlands, for example, nursing home residents are *always* housed on lowest floors, above which mixed-use housing is built.

On May 19, 2014 I met with Judith Nicholson, then administrator of Jewish Home's nursing home on West 106th Street. We knew each other's past work in transforming nursing homes. I encouraged JHL to consider a model created by a town in Belgium that had the wisdom to design its new nursing home to be the cultural hub of the town. In their plan, every cultural event in the town would take place in their new nursing home. On the first floor, they constructed a performing arts center so that nursing home residents who wished to and were able could enjoy concerts, plays, films, lectures, choral recitals, etc. with their families, friends and neighbors. On nice days, nursing home residents could be seen waiting eagerly outside to spot their visitors so they could enter the concert hall together.

During our meeting, I also described a nursing home in northern Maine that achieved a remarkable transformation when its administrator was inspired to create a produce farm from its spacious land behind the home. While it may seem outlandish to urban residents, the administrator had the courage to attempt something that hadn't been done before. His nursing home was located in the middle of an agricultural region, and it had extensive flat property behind it. Like his family, the nursing home residents and staff were all from farming families. Excitement quickly spread throughout the nursing home and surrounding area. The elderly residents couldn't directly farm but discussed which crops would excel in what sun exposure and soil composition and they were outside surveying the progress and kibitzing. Families and staff were free to farm on their own time and were invited to take the harvest. And those who lived in the home enjoyed dining on produce from their own farm.

This visionary administrator transformed a merely adequate, uninspired and dull nursing home into an abundant resource, teeming with life, relationships and repartee that honored the experience, talents, spirits and culture of those who lived and worked there. And he added that it also transformed him from a dutiful but burdened and uninspired administrator into a person who loved coming to work every day, who was exhilarated by what this community of people were now empowered to create together every day.

Nursing homes should not be built like sterile institutions with a numbing sameness that is interchangeable in any part of the country. Instead, nursing homes need to reflect the culture of

their residents and of the home's specific location so that it serves as a fertile resource for the imagination and for engagement in life. Manhattan is the cultural capital of the nation and West 106th St lies within blocks of noted music schools, museums, small theater groups and a range of classical, jazz, klezmer, folk, salsa, and pop groups, off-Broadway shows, choral groups and lectures.

Manhattan nursing home residents should have as much access as possible to what inspired and pleased them throughout their lives. Why would we remove these or make them less accessible at such a challenging and important time in life? If JHL were to design a true state of the art nursing home that exists in other countries but not yet in the US – a cultural hub for both long-stay and short-stay rehab patients and their visitors – they would make history. JHL can bring in resources valued the world over, enabling performing artists to offer their talents to a population that's hungry to engage. In doing so, JHL would become known *once again as a good neighbor*, becoming the role model that other non-profits would aspire to fulfill.

On June 23, 2014 I brought an internationally renowned architect to present to JHL how on their present large *rectangular* property on W 106th St., now tripled in value to when they first met with Chetrit, it *could build two eight-story interconnected wings of a nursing home with the performing arts center, a multi-purpose auditorium on the first floor*. His presentation was enthusiastically received by Judith Nicholson, who was then the Administrator at 106th St. Ms. Nicholson and her late mother, an anthropologist, were respected years ago for offering a pioneer vision of how to transform nursing homes. Her discernment of the possibilities was therefore particularly meaningful and noteworthy.

This plan would have long-stay, frailer people on the lower floors so they could more easily get to the outdoor garden and to the performing arts center, rehab facilities, etc. And short-stay rehab patients would occupy the upper floors of the eight-story building. His design featured patios, a garden, etc. unlike the 97th Street design whose garden would be underneath the cantilevered building on noisy, congested 97th Street. Ms. Nicholson retired shortly after this plan was apparently rejected although no connection between the two events has ever been publicly acknowledged.

The alternative I recommend is also influenced by what I heard from two different very reliable sources about *Ledor Vador* (From Generation to Generation), a premier nursing home in Buenos Aires that is supported by the Joint Distribution Committee, the Jeanette Weinberg Foundation and by other primarily Jewish organizations. Its architect, Perkins Eastman, is also JHL's architect. Ledor Vador far surpasses in the quality of its engagement with older persons and in its attitude toward those who live there much of what is seen throughout the US. This is the kind of nursing home and its attitudes towards older persons from which all nursing homes in the US could learn much. As one example, newly arrived residents don't have to choose from a stale menu of activities. These are instead designed with each resident's interests and life stories in mind and are readily adapted to better serve each person.

Like the built environment, the human environment also has a profound effect on nursing home residents' well-being. No matter how modern or handsome the building, a custodial culture adversely affects the spirit of those who live there if they are essentially confined, too far

removed from the spontaneity and normalcy of neighborhood life and if the sterility of what's offered discourages imagination, initiative and expression.

While the greatly softened institutional look of nursing homes and private rooms and baths are laudable features of Green House, its national replicable rigidity is its Achilles heel. Other small house models offer flexibility to accommodate varying challenges and a larger household census which provides far more choices for the facility, for the residents themselves and for staffing.

A somewhat larger census per household provides higher reimbursement to more adequately staff in order to provide both clinical excellence as well as leadership of group discussions, singing, and the range of meaningful activities that encourage self expression, engagement and relationships among residents and staff, and promote creativity and pleasure in living more fully. The calendar drives the activities so people have seasonal events to help plan and then to enjoy together in ways most meaningful to them.

And the flexibility of other models including a somewhat larger census, allows for income to include an easy side-entrance bathtub so older persons with painful arthritis and other physical challenges, can soak in a soothing tub to relieve aching and sore bodies. In the 97th Street plan, only one token bathtub is planned for over 400 frail elderly persons.

The somewhat larger census, with accompanying added reimbursement also allows for exercise equipment in each expanded household. In St. Joseph's Residence, an extraordinary nursing home operated by and for nuns on the campus of Providence Mt. St. Vincent nursing home in Seattle, the residents voted to convert a bedroom into a small gym. I saw a frail nun on a treadmill calibrated on a very slow speed with her portable oxygen tank placed on the outer rim. She was full of smiles as she told me that with the addition of the treadmill, she was now able to walk holding onto the sides. She was exhilarated as she described how depressed and defeated she had felt before the gym was added. The modest gym was an upbeat addition to the nursing home and served as a social room as other nuns sat around talking with each other as they waited their turn to use the equipment. Exercise as we all know is a healthy, non pharmacological anti-depressant and anti-anxiety resource that strengthens body and spirit, not only for the young and agile. I have also introduced recumbent bikes to several people coping with severe cognitive loss who find the safe, repetitive motions enjoyable, strengthening and reassuring.

It is worrisome that the national preoccupation with dominant corporate agendas and corporate partnerships has compromised and narrowed what nursing homes should offer and has eroded our respect for nursing home residents' individual personhoods and dignity which no longer appear on the radar screen and are not really part of future planning. And it has sent the wrong message to staff who are especially appalled and heartsick at the contrast if their culture of origin, like the Ashanti from Ghana, showed profound respect for elders.

By way of introduction, I have been a social worker since 1961, in earliest years engaging with severely abused children. I worked in a range of social agencies and health care facilities in clinical, supervisory, administrative, teaching, and consultative positions. I was a field instructor for social work students from the Columbia School of Social Work, NYU, Hunter, Fordham, Wurzweiler, and Adelphi. After extensive psychotherapy training, in 1976 I also began a private

practice in psychotherapy which I continue. Given my family's aging and now my own, the importance of nursing home reform has become central. I demonstrated in nursing homes upstate, downstate, and in several other states how to transform nursing homes from dismal institutions into warm, vibrant communities in which those who live and work there can thrive. Until illness interfered, I was a sought after public speaker across the nation promoting these approaches and was designated Scholar-in-Residence in Aging. If the twenty story plan that Jewish Home proposes for West 97th Street were good for its residents and acceptable for national replication, I could not, I would not oppose it.

In Conclusion

The contrasts are profound between West 97th Street's proposed site vs. JHL's far more spacious property on West 106th St. The too small parcel on West 97th St is highly toxic and, given its proximity to PS 163 with children as young as 3 years old in outdoor trailers and to the residential buildings that hover over the site, disturbing that dangerous soil would place thousands of people in jeopardy.

Existing traffic congestion already delays ambulances from reaching endangered patients in a timely manner. If the nursing home were built on West 97th Street, ambulances would be dangerously delayed from reaching nursing home residents as well as community residents and young students. And the height of the proposed building would place all nursing home residents in immediate jeopardy in the event of fire or other emergency and would store them away unnecessarily for the rest of their days - isolated from the normalcy of neighborhood life.

Our society has long repudiated confining frail, vulnerable older persons in a built environment deleterious to their safety and well-being. Instead of the state of the art nursing home JHL envisions, in reality it would establish warehousing older persons in an overly restrictive environment as the norm for cities to be replicated nationally - a grievous mistake that no one should endorse.

JHL's spacious West 106th St property has no lead or other toxins to threaten the health of nearby students and residents and no traffic congestion to delay first responders. And equally compelling, it would enable JHL to build an exciting, true state of the art nursing home that exists in other countries but not yet in the US. JHL has an opening on 106th St to make our city, state and nation proud.

JHL's board has a rare opportunity to be courageous, to change course so that the well-being of older persons assumes its rightful place in mission. Justice, morality and conscience wouldn't encumber the corporate agenda but would strengthen it. Success is glorious when attained without causing suffering to vulnerable people. I believe that the humane and enlightened alternative I recommend would advance urban nursing home possibilities nationally and that JHL would rightfully become that national leader. And it would be a source of relief and pride for nursing home and community residents, for elected officials who support it, and for JHL itself, and with it, a return to its former esteemed reputation.

Sincerely,

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