

CITY COUNCIL
CITY OF NEW YORK

----- X

TRANSCRIPT OF THE MINUTES

Of the

COMMITTEE ON CRIMINAL JUSTICE

----- X

March 8, 2024
Start: 10:12 A.M.
Recess: 4:49 P.M.

HELD AT: Council Chambers - City Hall

B E F O R E: Sandy Nurse,
Chairperson

COUNCIL MEMBERS:
Public Advocate Jumaane Williams
Shaun Abreu
Diana I. Ayala
Gale A. Brewer
Tiffany L. Cabàn
Shahana K. Hanif
Christopher Marte
Mercedes Narcisse
Lincoln Restler
Althea V. Stevens

A P P E A R A N C E S (CONTINUED)

Lynelle Maginley-Liddie
Department of Correction Commissioner

Juanita Holmes
Commissioner, Department of Probation

Jasmine Georges-Yilla
Executive Director of the New York City Board of
Correction

Sharun Goodwin
Deputy Commissioner, Department of Probation

Matthew Granoff
Deputy Commissioner, Department of Probation

Bridget Hamblin
Department of Probation

Robert Maldonado
Department of Probation

Andrea McGill
Department of Probation

Razwan Mirza
Department of Probation

Melissa Cintron Hernandez
Board of Corrections

Danielle Ortega
Board of Corrections

Katrina Blackman
Board of Corrections

Hannah May-Powers
Office of Brooklyn Borough President

A P P E A R A N C E S (CONTINUED)

Amanda Berman
Center for Justice Innovation

Sebastian Soloman
Vera Institute of Justice

Victor Herrer
Close Rikers Freedom Agenda

Prime Freedmen
Citizens of New York and the American Freedmen

Christopher Jeffries
Bronx Connect

Francis Torres
Department of Correction

James Saunders
NYC Department of Correction

Ronald Day
Fortune Society

Nicole Farrelly
Osborne Association

Kelly Grace Price
Close Rosies

Daniele Gerard
Children's Rights

Tanesha Grant
Parents Supporting Parents NY

Eileen Maher
VOCAL-NY

A P P E A R A N C E S (CONTINUED)

Amanda Granger
CASES

Jennifer J Parish
Urban Justice Center

LuAnne Blaauboer
Good Shepherd Services

Peleya Patterson
Good Shepherd Services

Lauren Stephens-Davidowitz
Legal Aid Society

Sebastian Solomon
Vera Institute of Justice

Darren Mack
Freedom Agenda

Ashley Santiago
Freedom Agenda

Batman Gee
Youth Represent

Nancy Savasta
Department of Correction

Sherrie Rembert
Department of Correction

Mala Srinivasan
Department of Correction

Patrick Benn
Department of Correction

A P P E A R A N C E S (CONTINUED)

Jeremiah Johnson
Department of Correction

Alexandria Maldonado
Department of Correction

Matthew Passarelli
Department of Correction

Sheldon Preston Johnson
Queens Defenders/Freedom Agenda

Joanne Delapaz
Freedom Agenda

David Long
Liberty Fund

Tiffany Sloan
P2PH

Amanda Berman
Center for Justice Innovation

Jay Edidin
Women's Community Justice Association

Dalvanie K Powell
United Probation Officers Association

Barbara Hamilton
Legal Aid Society

Barbara Valceral
Freedom Agenda

Yonah Zeitz
Katal Center for Equity, Health, and Justice

Megan Carr
New York Lawyers for the Public Interest

A P P E A R A N C E S (CONTINUED)

Mollie Beebe
The New York Foundling - Families Rising Program

Jason Alleyne
Exalt

King Downing
American Friends

Jennifer J Parish
Urban Justice Center

Megan French-Marcelin
Legal Action Center

Akiana Smith
Beyond Rosies under Women's Community Justice
Association

Alexander Stein
Self

1
2 SERGEANT AT ARMS: This is a microphone check for
3 the Committee on Criminal Justice. Today's date is
4 March 8, 2024. We're located in the City Hall
5 Chambers and the recording is done by Rocco
6 Mesiti.

7 SERGEANT AT ARMS: Good morning everybody and
8 welcome to the Committee on Criminal Justice. At
9 this time, we ask if you could please place phones on
10 vibrate or silent mode. Thank you Chair, we are
11 ready to begin.

12 CHAIRPERSON NURSE: [GAVEL] Good morning
13 everyone. Welcome to the Fiscal 2025 Preliminary
14 Budget hearing for the Committee on Criminal Justice.
15 Thank you to Criminal Justice Committee Members for
16 being here. I know online we have Council Member
17 Tiffany Cabàn and Deputy Speaker Diana Ayala.
18 Congratulations to Commissioner Lynelle Maginley-
19 Liddie. Welcome to your first Criminal Justice
20 Committee hearing as Commissioner. I'm also excited
21 to be chairing this committee for the first time.
22 Great to see you Commissioner Juanita Holmes, Jasmine
23 Georges-Yilla and additional leadership who have
24 joined us today.

1
2 Today, I'm looking to gain insight into how the
3 Mayor's Budget proposal for these three agencies
4 align with the goals of creating stability on the
5 island, getting people the support they need,
6 ensuring people have a plan to successfully reenter
7 our communities and working towards the legal
8 obligation to close Rikers. In the Fiscal 2025
9 Preliminary Plan, these three agencies have a
10 combined total budget of \$1.15 billion, which
11 supports just under 10,000 budgeted positions. The
12 plan includes minimal changes but today I would like
13 to dig into a few areas of discussion and concern.

14 First, given the daily risk of harm, injury or
15 death at Rikers, we should be doubling down on
16 programs that divert people from the island.
17 Expanding alternatives to incarceration is a
18 commitment in the plan to close Rikers, however, this
19 budget decreases funding to these programs.

20 In the last fiscal year, the Mayor proposed a 13
21 million cut to the Supervised Release Program even
22 though the Administration testified last year that
23 its caseload was growing exponentially. The Admin is
24 proposing to cut \$8 million to reentry programs
25 despite all evidence that they reduce recidivism. In

1
2 addition to these proposed cuts, I think we can all
3 acknowledge that the decision to abruptly cut \$17
4 million in funding to trusted credible organizations
5 that provided ATI and reentry services was a mistake.
6 These programs are proven models that set people up
7 for healing and transformation. This disruption was
8 costly in terms of time lost for individuals on
9 Rikers who were making progress and then were
10 abandoned but also to the organizations who lost
11 talented staff.

12 The DOC's decision to reverse this cut rather
13 quickly affirms that this was a poor choice. We
14 welcome the course correction of restoring \$14
15 million of these funds for programs and the
16 forthcoming RFP for organizations to apply, however,
17 this does not fully restore the PEG.

18 The failure to expand ATI programs leads to my
19 other concern, which is the projected jail population
20 increase to 7,000 people by 2027. Not only is the
21 Administration failing to fully utilize the programs
22 for diverting people from and getting people off
23 Rikers, but it has used this projected increase to
24 justify increasing the number of beds in the borough-
25 based jail plan. The Admin was able to add beds by

1
2 reducing the number of therapeutic housing units even
3 though 53 percent of the jail population is diagnosed
4 with mental illness and 40 percent with addiction
5 struggles. More concerning is the increase in beds
6 for the Planned women's facility. We know many SIS
7 women, self-identifying women and gender expansive
8 individuals often end up in jail for surviving
9 intimate partner violence and gender-based violence.

10 The city is falling short of its commitments to
11 alternative supportive housing where women can safely
12 heal and get the support they need. I also want to
13 dig into DOC staff operations and deployment.

14 Reports from the Federal Monitor and the Board of
15 Correction show the ongoing disregard for protocols
16 when deploying staff. We see protocol not being
17 followed when deescalating and using chemical agents,
18 reports state that routine tours occur less
19 frequently than protocol prescribes.

20 While visiting Rikers, I spoke with many
21 detainees who were not getting to their medical and
22 court appointments on time. Transportation to court
23 is not the only challenge. Once people are at court,
24 there are extensive delays bringing people from the
25

1
2 pen to before a judge with individuals staying in the
3 pens until 7:00-8:00 at night.

4 While we certainly have heard the arguments that
5 DOC vacancies are increasing through attrition and
6 recruitment challenges, Rikers has the highest ratio
7 of officers to detainees in the country. Uniform
8 headcount reductions should be consistent with
9 reducing the jail population, which we are required
10 to do to close Rikers. So, I'm hoping to get an
11 update on how many of the officers reported as
12 chronically absent in 2019 have returned to work or
13 been terminated.

14 Reports also describe that not enough officers
15 are deployed to jail posts. We have many people
16 working at Rikers but not where the highest need is
17 to ensure the safety of other staff and detainees.
18 Failure to properly deploy staff to critical posts
19 and ensure consistent tours has directly resulted in
20 fatalities, such as the case with Erick Tavira and
21 Gilberto Garcia. So, I'd like an update on how DOC
22 incentivizes and trains officers to work in jail
23 housing units.

24 There has been recent reporting that DOC is
25 failing to meet minimum standards of care, such that

1 detainees are reportedly washing their clothes in
2 toilets or showering with their clothes on to clean
3 them. I personally have seen unsanitary conditions
4 in housing units, such as piles of trash and other
5 issues such as lack of air conditioning or heat or
6 issues with the commissary.
7

8 With such conditions in the jails, the Board of
9 Corrections must have the resources required to
10 provide oversight. The budget proposal reduces their
11 staff positions and cuts DOCs budget by nearly 18
12 percent. While Commissioner Jiha testified that this
13 cut is because of vacant positions, it is important
14 to note that these posts are particularly hard to
15 fill and the opportunity to recruit and retain staff
16 for the Board must remain available given the
17 humanitarian crisis on the island.

18 Another concern is that the Administration has
19 failed to comply with the Renewable Rikers Act and
20 transfer land over from DOC to DCAS. And I know that
21 DOC cannot fully speak to this but JATC has been
22 closed for 20 years. AMKC is now closed except for
23 the industrial kitchen. From my tour last summer,
24 vacant land is abundant. There seems to be no
25 rational for why the Admin chooses to be noncompliant

1
2 with the law. We would love to hear about any
3 conversations DOC has participated in regarding this.

4 Lastly, I will not spend much time on this but I
5 would like at some point an update on the litany of
6 taskforce, working groups and commissions that exist
7 by law or executive order. It would be great to get
8 updated rosters, get a list of which ones are
9 incomplete. A breakdown on which of these met and
10 what outcomes there were.

11 I don't normally go this long into remarks but I
12 just outlined all of these concerns because as I step
13 into Chairing this Committee, it really feels like
14 I'm stepping into a big mess and it's really not
15 clear if the Mayor is committed to getting us out of
16 it. And this budget proposal certainly does not
17 reflect a commitment to that goal.

18 At the end of the day, as our Speaker often says,
19 no one should ever come out of city care worse off
20 than when they arrived. We have a legal and moral
21 obligation to close Rikers and that obligation
22 requires this Administration to be laser focused on
23 keeping and getting people off that island and then
24 demolishing those jails.

1
2 With that said, I want to thank the Commissioner
3 for joining today. I also want to thank you both for
4 making time last week where we were able to introduce
5 ourselves. I really enjoyed learning more about the
6 two of you, how you got to this work, your approach
7 and what drives you, and I hope that as we engage
8 this year, we can have productive and forthright
9 conversations. I want to work with you to identify
10 roadblocks and challenges and the resources needed to
11 get people off the island and safely back home.

12 I want to thank Speaker Adams for appointing me
13 and trusting me to Chair this Committee. I know that
14 Rikers is a personal issue to her and that closing
15 those jails for good is a top priority. I also want
16 to thank our Committee Staff whom I have had the
17 pleasure of working with for the first time for their
18 hard work. Financial Analyst Casey Lajszky, Counsel
19 Jeremy Whiteman, Legislative Policy Analyst Natalie
20 Meltzer. I am truly humbled by your knowledge and
21 expertise and thank you to my Chief of Staff Samori
22 Tourè and Legislative Director Annel Hernandez. I'd
23 like to also recognize my colleagues who are joining
24 us today Council Member Mercedes Narcisse. I also
25 want to recognize our Public Advocate Jumaane

1
2 Williams and now, I'm going to pass it back to — I'm
3 going to pass it over to the Public Advocate if you
4 want to say any remarks.

5 PUBLIC ADVOCATE WILLIAMS: Thank you very much.
6 Good morning. My name is Jumaane Williams, Public
7 Advocate of the City of New York. I want to thank
8 Chair Nurse and the members of the Committee on
9 Criminal Justice for holding this hearing. First I
10 just wanted to make mention that when we had
11 conversations about the budget, it didn't seem to
12 include funding or a plan to actually close the jail
13 and I heard comments about issues around particularly
14 capital funding, which makes some sense, my concern
15 has been combined with things that I've heard the
16 Administration say before. It just appears that
17 there is no real want or belief that we should close
18 Rikers Island by 2027 and I think we have to at least
19 get on the same page and have a plan to how to do it.
20 Omitting it altogether is not a good move and it
21 wouldn't be the first time that the administration
22 just skips over a law that the Council has passed, so
23 I'm hoping that would be reconsidered as these
24 conversations move forward.

1
2 The existence of Rikers right now does not make
3 anyone, the people incarcerated there, the people who
4 work there, correction officers and residents of New
5 York safer so I have always been very concerned about
6 the violence inside our city jails, both against
7 incarcerated people and corrections officers and
8 staff, however, New York City is not on track to
9 close Rikers by 2027 as I mentioned, and that's
10 something we should at least agree upon. It's one
11 thing to try to execute a plan that doesn't work out.
12 It's another thing to say we're not going to do the
13 plan or present another one. Recidivism is a
14 challenge for correction systems across the country.
15 We should all acknowledge with New York City's high
16 cost of living and competitive job market; it is
17 especially difficult for those who have been justice
18 involved to stay out of jail.

19 Still, Mayor Adams, last year eliminated programs
20 that would help those who were incarcerated get jobs,
21 find housing, receive mental health and substance use
22 treatment and reconnect with their families after
23 their release to save \$17 million. Subsequently,
24 despite a promise from DOC, that program would not be
25 lessened in either quality or frequency after being

1 moved in house during the first four months of Fiscal
2 Year '24. The number of group based programs and
3 offers drop by 29 percent and one on one sessions
4 drop by over 30 percent when compared to the first
5 months of Fiscal Year '23. While I am very
6 heartened to see that Mayor Adams just announced \$14
7 million in funding for DOC to increase programming
8 initiatives for people in custody, including trauma
9 informed programming, transition planning and
10 transportation supplemental education services, I
11 still have some concerns about DOC's ability to
12 deliver that programming themselves.
13

14 Still this is a step in the right direction. I
15 look forward to working with the Administration and
16 the City Council to ensure that the city delivers
17 high quality programming to people in custody and
18 complies with all city laws.

19 The city should also be investing in pretrial
20 non-cost for services and also post-trial services
21 and alternatives to incarceration so fewer people
22 enter Rikers Island in the first place and people
23 have a better ability to assimilate into the siting
24 when they leave. Court backlogs and slow processing
25 of cases also contributes to the rising population.

1
2 Detainees spent an average of 115 days in the jails
3 last year, that is four times the national average.
4 I'm hoping we all work on getting some speedy trail
5 and getting folks out of there. Across the city
6 jails, 86.6 percent of people are just waiting for
7 their cases to conclude and their sentences
8 ultimately may require less jail time than what they
9 served waiting for those cases to resolve. We must
10 ensure that cases and trials are being processed in a
11 timely manner. There is data that also shows the
12 longer someone is on Rikers, the more likely they may
13 be involved in something violent.

14 In 2021, it cost \$1 million for every two people
15 incarcerated at Rikers Island. One of the most
16 expensive jail systems in the country. Yet the
17 conditions in jails remain abysmal. Being
18 incarcerated takes a significant toll on a person's
19 physical and mental health and many people on Rikers
20 Island have complex health needs that require
21 specialized care, particularly mental health.

22 There is a significant shortage of health staff,
23 often with one healthcare professional making rounds
24 in multiple units. Rikers Island is the largest
25 mental health services provider in New York City,

1 probably one of the largest in North America. This
2 week, Mayor Adams announced that the city construct
3 outposted therapeutic housing units at NYC Health and
4 Hospitals at Woodhall and North Central Bronx and
5 that has started construction on a 104-bed unit at
6 NYC Health and Hospitals Bellevue. So, that
7 incarcerated people in need of care do not have to
8 travel back and forth for treatment. These units are
9 for people with medical, mental health and substance
10 use needs and I applaud these investments in care for
11 some of our most vulnerable New Yorkers. My hope is
12 this is a direction that we could begin to go in.
13 Make sure people have the care they need. Getting
14 people, less people in Rikers, getting people what
15 they need in Rikers and having more ability to get
16 them out on the right path. Hopefully we can all
17 work on that together. Thank you for the opportunity
18 to speak.

19
20 CHAIRPERSON NURSE: Thank you Public Advocate. I
21 also want to recognize we've been joined by Council
22 Member Marte and Stevens. And I'm going to turn it
23 over to Committee Counsel.

24 COMMITTEE COUNSEL: Thank you Madam Chair. I
25 will swear in our first panel of the Administration

1 witnesses with us today from the Department of
2 Probation. We have Commissioner Juanita Holmes,
3 Sharun Goodwin, Matthew Granoff, Bridget Hamblin,
4 Robert Maldonado, Andrea McGill, and Razwan Mirza.
5

6 If you could all please raise your right hands.

7 Do you affirm to tell the truth, the whole truth and
8 nothing but the truth before this Committee and
9 respond honestly to Council Member questions? Noting
10 for the record, all witnesses answered affirmatively.
11 You may begin your testimony.

12 JUANITA HOLMES: Can you hear me? Okay, good
13 morning. Good morning Chair Nurse and members of the
14 Council, Public Advocate. I'm Juanita N. Holmes,
15 Commissioner of the New York City Department of
16 Probation. I'm joined here today by the following
17 executive cabinet members: Deputy Commissioner
18 Sharun Goodwin, Matthew Granoff, Bridget Hamblin,
19 Robert Maldonado and Andrea McGill, as well as our
20 Chief Information Officer Razwan Mirza. I would like
21 to thank you for the opportunity to discuss the
22 important work being done by the Department of
23 Probation and our preliminary 2025 fiscal year
24 budget.

25 This is not right, sorry.

1
2 29,000 in fiscal year 2022. More specifically, our
3 intake has increased 25 percent from 8,800 to 11,000
4 individuals from fiscal year 2022 to fiscal year 2023
5 respectively. Furthermore, the Department of
6 Probation provided supervision intake to an
7 additional 4,514 individuals, which is nearly a 15
8 percent increase from the 3,946 in fiscal year 2022.
9 Leading the total number of individuals supervised in
10 Fiscal Year 2023 to 15,101. It is safe to say that
11 the number of individuals the Department of Probation
12 is touching, is growing.

13 Alternatively, for Fiscal Year 2025, the
14 Department of Probation has a Preliminary Budget of
15 \$105.6 million as compared to our Fiscal Year 2024
16 Adopted Budget of \$119 million. This is a 13 percent
17 less inclusive of the \$9.1 million PEG reduction. Of
18 the Preliminary Budget, \$71.9 million is for Personal
19 Services and \$33.7 million is for Other Than Personal
20 Services. \$84.7 million are city tax levy funds,
21 \$14.6 million are state funds and \$6.3 million are
22 intra-city funds.

23 Despite a rise in the cost of services and the
24 decrease in our budget, Department of Probation is
25 committed to ensuring that the best services are

1 provided to justice involved individuals, in the most
2 efficient and effective ways. We are also committed
3 to building stronger and safer communities while
4 working to curb gun-violence and reduce recidivism.
5

6 Our hardworking probation officers are at the
7 heart of DOP's mission to help people change their
8 behavior, remain safely in their community and lead a
9 better life for themselves, their families and our
10 city. DOP's current headcount of Probation Officers
11 and Probation Officer title is 423. This is down 271
12 Probation Officers from our peak Probation Officer
13 headcount of 694 in 2019. To ensure DOP remains
14 staffed to operate safely and successfully, we have
15 been approved to hire another class of Probation
16 Officers off a current active list and we are on
17 schedule to onboard this class within the upcoming
18 months. Additionally, an Administrative Probation
19 Officer exam, which has not been administered in over
20 a decade, is tentatively scheduled for May. We also
21 promoted 26 officers to Supervising Probation
22 Officers last year. Like the 75 percent of union
23 contracts that have already been signed, we
24 anticipate that Probation Officers will follow suit,
25

1 giving our officers a pay increase with the hopes of
2 mitigating attrition.
3

4 While community safety can be achieved in a
5 number of ways, public safety remains the paramount
6 concern in the Administration of Probation. This
7 includes the safety of all our officers. As a
8 result, active shooter training has been implemented
9 at DOP, starting with the boroughs of the Bronx and
10 Manhattan. This is also the reason why wearing
11 uniforms have been reinforced, so our officers are
12 clearly identifiable if met with such circumstances
13 while working with clients or when out in the field.
14 I would like to take the opportunity to clarify that
15 this is not the first-time probation officers have
16 been required to carry firearms on their persons
17 while performing duties. However, a policy has been
18 implemented to ensure that our officers are complying
19 with the requirements that have been in place since
20 2003. DOP wants to remain on the offensive and not
21 the defensive when it comes to the safety and
22 security of our officers who continue to work and
23 support at risk clients.

24 In order for our Probation Officers to provide
25 the best support possible to clients, our officers

1
2 need to grow the knowledge base, improve the job
3 skills and become more efficient in the workplace.
4 This is why DOP is looking to build out in service
5 training for our officers beginning with our
6 supervising probation officers who will soon be
7 sharpening the hard and soft managements – their hard
8 and soft management skills that are essential to
9 performing their duties, such as effective case
10 management, communication, problem-solving and
11 decision making.

12 In addition to the great work done by the women
13 and men of the Department of Probation, we have also
14 established a new Programs and Evaluation team. This
15 team has been created to obtain data beyond program
16 attendance, to ensure the programs being offered to
17 clients are effective and will also lead to
18 successful outcomes. Since I last testified before
19 Council, my team and I have met with our service
20 providers to explain our program expectations and
21 also to assist in capturing the outcomes of their
22 programs. We have begun collecting data from 51
23 contracts including 26 service providers, covering 13
24 different programs. We will be using the data
25 obtained over the next year to assess key performance

1 indicators relating to recidivism, employment
2 opportunities, and educational attainment and will be
3 happy to share our findings with the Council.
4

5 Another way in which DOP is further developing
6 performance and productivity is through technology.
7 The case management program currently being used by
8 DOP is over ten years old. Post evaluation, it was
9 found that it no longer meets the needs of the agency
10 or the city. As a result, DOP has hired a new Chief
11 Information Officer who is working with the
12 department to update all of DOPs technology systems.
13 Not only will this safeguard the department but it
14 will make sure that our officers are able to
15 efficiently track their cases and afford DOP the
16 ability to run accurate data sets relating to our
17 cases with the push of a button, making DOP more
18 efficient and effective.

19 DOP is also focused on building and expanding our
20 collaborative efforts with our sister agencies
21 including with the New York City Public Schools and
22 New York City Police Department to better deliver
23 timely services and resources to at risk individuals.
24 DOP has collaborated with New York City Public
25 Schools to identify students within the school system

1 who are currently on probation and under credited. A
2 list of 461 students have been compiled and our
3 agency will work together to ensure that each of
4 these students is in the right school setting to meet
5 their needs. Probation Officers will conduct follow-
6 ups with schools to ensure each of these students is
7 attending classes and receiving the proper education
8 services.
9

10 This initiatives is in the beginning stages.
11 There is more work to be done, though we look forward
12 to witnessing its achievements. Department of
13 Probation has also partnered with the NYPD to include
14 justice involved youth in the Girl Talk and Blue
15 Chips mentorship programs. These programs are
16 designed for young women and men who are brought
17 together in a judgment free zone to talk through
18 problems, learn skills and walk away with role models
19 and a strong support system. This collaboration
20 allowed DOP to leverage existing opportunities and
21 make them available to our clients.

22 One of our primary goals, one of my primary goals
23 as Commissioner is to curb gun violence and reduce
24 recidivism. Using a combination of prevention and
25 intervention, our probation officers work to restore

1
2 an individual's connection with their community and
3 peers and help them change their behavior, creating a
4 pathway out of the criminal justice system. In
5 accordance with these goals, we are focusing our
6 resources on the people and communities where they
7 need it the most. This philosophy is in compass
8 through the Neighborhood Opportunity Network NeON , a
9 unique and trusted place-based approach that provides
10 a range of services to high concentrations of people
11 on probation and other community members in the seven
12 New York City neighborhoods historically impacted by
13 the justice system, the South Bronx, Harlem, Jamaica,
14 Bed-Stuy, Brownsville, East New York and Northern
15 Staten Island. Over 30 percent of our clients come
16 from these seven neighborhoods alone. Since its
17 inception, the NeON model has had a tremendous
18 success in terms of impactful engagement and
19 providing services to local community.

20 In partnership with the New York City Gun
21 Violence Prevention Taskforce, and the New York City
22 Human Resource Administration, Department of
23 Probation is launching NeON expansion and initiative
24 to increase access to governmental benefits and
25 provide more effective support. In addition, NeON

1 expansion will focus on creating employment
2 opportunities as well.

3
4 Our juvenile alternative to placement programs,
5 ECHOES and AIM actively monitor youth through regular
6 home visits and wellness checks with parents and
7 guardians. They diligently work one on one with
8 youth to underscore the detrimental effects of gun
9 violence on persons, families and communities. This
10 is in addition to the many other programs that hold
11 violence prevention groups and discussions for our
12 city's youth.

13 Internally, the DOP has also initiated a
14 specialized gun branch with the Department of
15 Probation Adult Operations to combat gun violence.
16 This branch is made up of 58 probation officers and
17 10 supervising probation officers who specifically
18 supervise individuals sentenced to probation with a
19 gun charge. This process will allow our officers to
20 create strong engagement through dialogue and trust
21 and identify the needs of these particular
22 individuals which in turn will reduce further gun
23 violence and help shift their path toward a law-
24 abiding future.

1
2 We are also relying heavily on the work of our
3 intelligence division to get guns off our streets and
4 out of our communities. Over the past year, Intel
5 conducted 10,918 field visits and 2,089 enforcement
6 actions. This has been a 30 percent increase from
7 the 7,955 field visits and 1,463 enforcement actions
8 in calendar year 2022. These enforcement actions
9 including gang related investigations, failure to
10 report home visits and bench warrant enforcement
11 actions and transporting prisoners to and from other
12 jurisdictions.

13 Our Intelligence Division does great work and we
14 discovered over the last year that over 20,000
15 individuals have an active warrant for a violation of
16 probation. In effort to locate these individuals,
17 our Intelligence division partnered with the NYPD and
18 their ability to use their Domain Awareness Computer
19 System to conduct warrant enforcement and to return
20 these individuals to court. Moreover, enforcement
21 actions often result in the recovery of numerous
22 firearms, drugs and other contraband.

23 In Calendar Year 2023, Intel recovered 24
24 firearms while conducting field visits, also an
25

1
2 increase from Calendar Year 2022, where they
3 recovered 20 firearms.

4 Some of the most common reasons for recidivism
5 include a lack of employment or economic opportunity.
6 This is why DOP is offering new programs for
7 individuals to attain their commercial driver's
8 license, within our NeON locations. This program
9 offers an opportunity for clients in their community
10 to obtain a license in order to seek permanent
11 employment. We are also looking into introducing
12 entrepreneurial programs such as beautician and
13 barber certifications in the near future. These
14 programs will benefit all of our clients, especially
15 our undocumented clients who are unable to
16 participate in some of the current employment
17 programs. In an effort to assist clients in finding
18 employment, we have also partnered with the
19 Department of Transportation to hire justice involved
20 individuals to work at DOT sites to assist in
21 managing vehicular bicycle or pedestrian traffic.
22 While appreciative of the assistance third parties
23 offer to engage our clients in employment, DOP is
24 becoming more proactive in establishing economic
25 opportunities for individuals before the completion

1 of their probation sentence. In the same spirit, DOP
2 will be requiring clients to participate in an exit
3 interview a few months prior to leaving probation
4 supervision to ensure each individual has established
5 their basic fundamental needs, such as employment,
6 housing, education, proof of identification, the
7 ability to obtain food, access to formal banking and
8 access to proper clothing and furniture needs.
9

10 Lastly, I would like to touch on one of the most
11 vulnerable populations within our city, individuals
12 who are homeless. Our Probation Officers are
13 dedicated to working with individuals to overcome
14 barriers and seek permanent housing. However, we
15 recognize a gap in services and have engaged in
16 constructive conversations with organizations and
17 agencies such as DHS, Covenant House and DYCD to
18 explore options available to individuals who are
19 homeless or living in shelters. We look forward to
20 sharing more information about additional programs
21 and benefits for our unhoused population with Council
22 once they are more established.

23 The work that this Department engages in is not
24 only impactful, it is also lifesaving. This is
25 attributed to the unwavering commitment of our

1
2 Probation Officers to meet the needs of our clients
3 and their families. Our work, however, is far from
4 done and there is more that each member of this
5 agency can do to assist some of our fellow New
6 Yorkers and improve the quality of the services
7 provided. We look forward to working with Council on
8 our path towards increasing the effectiveness and
9 efficiency of probation and in turn improving public
10 safety and reducing recidivism. Thank you for the
11 opportunity to testify this morning and I will be
12 happy to answer any questions that you may have.

13 CHAIRPERSON NURSE: Thank you Commissioner. I
14 also want to recognize Council Member Shahana Hanif
15 and Shaun Abreu have joined us. Thank you.

16 Okay, so I want to start questions with the
17 Arches program and the re-estimation. This plan
18 reflects a savings of \$600,000 in FY24 and FY25 due
19 to the re-estimation of the Arches program. The DOP
20 stated that these cuts were made due to
21 underutilization of some of these services. Can you
22 please state which services were underutilized and
23 how many participants attended the Arches program in
24 the last year?

25

1
2 JUANITA HOLMES: So, I'll speak about Arches
3 overall. You know when I took office and came in,
4 Arches was a program that originally was five days a
5 week. I was briefed about the Arches program being
6 scaled down to three days a week when I went to do
7 some visits at the NeON center and that was a result
8 of not necessarily referrals but lack of
9 participation, which led me to say, okay what is
10 being offered there? We need to take a look at it or
11 who is delivering the particular mentorship. Let's
12 take a look at it.

13 So, I will defer to the Deputy Commissioner of
14 Adult Operations in order to get the number of
15 individuals that are in attendance or I'm sorry,
16 Deputy Commissioner Robert Maldonado.

17 ROBERT MALDONADO: Hi, thank you for the
18 question.

19 CHAIRPERSON NURSE: You got to turn it on.

20 ROBERT MALDONADO: Thank you for the question.
21 In calendar year 2023, we had a total of 381
22 participants. New enrollees meaning that we're in
23 the actual calendar year, not brought over from 2022
24 was 275.

1
2 CHAIRPERSON NURSE: And what was some of the
3 reasons you found when you started looking into the
4 program that there was an underutilization from your
5 point of view?

6 JUANITA HOLMES: Right, so nationally we have
7 credible messengers, not necessarily credible
8 messengers that were previously incarcerated but are
9 key stakeholders in the community. So, as a result
10 of such, Deputy Commissioner Sharun uhm, good win for
11 probation. She oversees our adult operations which
12 the NeON falls under, have been conducting interviews
13 to make sure that the message is standardized, that
14 they are engaging. We are currently down seven
15 credible messengers, so those positions have been
16 posted. Naturally we were at a point where we were
17 met with a hiring freeze. Neither here nor there.
18 We still had individuals to provide the services that
19 were needed when individuals were attending.

20 What I did see though is a lack of compliance,
21 which naturally I spoke about earlier by our clients
22 in attending these particular programs. So, as a
23 result of such, we had met with a vendor that I like
24 called Street Smarts, it's used in the New York City
25 Police Department, it's a program called Options. We

1 know young people love virtual reality. So, we're in
2 the process of purchasing three of these mechanisms
3 that would be more engaging. It is customizable, so
4 we can create scenarios and that's how we reach our
5 young people. So, we really had to step up our game
6 with what would entice them to come in and want to
7 participate in the program. Long gone are the days
8 to sit here and just listen to what I have to say you
9 know and sometimes they look at it like we're parents
10 just talking. So, I think this program, putting this
11 in place, I think it's going to be very intriguing
12 and not just young people but even adults are going
13 to love to participate in this and especially the
14 mere fact that it's customizable because we can give
15 them options and options is simply that we create a
16 scenario they might have been involved in and the
17 outcome of two options. And so, now we say what made
18 you make this decision? It's very engaging, it's
19 thought provoking. So, I think that's going to be
20 phenomenal. We're currently meeting Deputy
21 Commissioner Maldonado is currently meeting with them
22 and we're in the process and we do have the funds to
23 purchase a 3D system.
24
25

1
2 CHAIRPERSON NURSE: And when do you expect that
3 to come online?

4 JUANITA HOLMES: I'm hoping in the next month.

5 ROBERT MALDONADO: We're actually meeting with
6 them on March 18th. We're trying to figure out next
7 steps as far as procurement. It may be within the
8 next 30 to 60 days.

9 CHAIRPERSON NURSE: Okay. So, the credible
10 messengers that you were down a certain number, I
11 think it's at 7 that you were down. Is that going to
12 continue forward or you're completely transitioning
13 to this other -

14 JUANITA HOLMES: No, no, no because the credible
15 messengers are going to be trained in the usage to do
16 this.

17 CHAIRPERSON NURSE: Okay.

18 JUANITA HOLMES: Yes, they're going to be a big
19 part of it as well.

20 CHAIRPERSON NURSE: Okay and my understand is
21 these programs are often mandated as a condition of
22 probation, so I'm a little bit unclear about how it's
23 possible to have low utilization if they're mandated.

24 JUANITA HOLMES: Right. So, that was my question
25 when I came in as well and naturally we don't want to

1
2 hit young people with technical violations for not
3 attending. But you know that's why folks are also on
4 the educational component. You still have to be
5 going to school and you still have to make your
6 visits with your Probation Officer.

7 Yes, it is mandated. That was my perplexity but
8 also I know it has to be something that they're
9 interested in. So, moving forward, hopefully this
10 will reduce some of that noncompliance.

11 CHAIRPERSON NURSE: Thank you.

12 JUANITA HOLMES: You're welcome.

13 CHAIRPERSON NURSE: Regarding the impact program
14 cancelation, can you breakdown a little bit of the
15 reasoning behind canceling the program and which
16 specific service types will be effected?

17 JUANITA HOLMES: Right, so coming in, the program
18 that was counseled when we tabled it, it was never
19 used. As a matter of fact, Deputy Commissioner of
20 Adult Operations wasn't aware of it. The Deputy
21 Commissioner of Juvenile Operations wasn't aware of
22 it. That was supposed to be designed and built out.
23 I think the Touch the Youth part, they didn't have
24 any clients. They did have staffing that they put in
25 place but they were, it never got off the ground up

1
2 and running. So, therefore that particular vendor, I
3 think we're in the process of paying them for
4 administrative fees, \$300,000 because they did kind
5 of put some staffing in place, but however, they
6 didn't have clients for the program, so it never got
7 up and running.

8 So, that's what was brought to my attention but
9 in addition, we, the same vendor has an impact
10 program currently that we use both for young people
11 and adult, and Mat Granoff you want to speak to that?

12 CHAIRPERSON NURSE: So, you're saying the program
13 had staffing but who, can you just kind of name who
14 was delaying it? Was the Administration delaying it
15 or was it the provider?

16 JUANITA HOLMES: I think, I really don't know
17 because when I came in, it wasn't up and running.
18 Was it DOP? The provider, oh the provider, the
19 provider.

20 CHAIRPERSON NURSE: So, you're saying the
21 provider was delaying -

22 JUANITA HOLMES: Yeah, but they're still part of
23 us because we have the mobile; what is it called?

24 MATTHEW GRANOFF: Adolescent Therapy.
25

1
2 JUANITA HOLMES: Adolescent Therapy. That
3 addresses juveniles and adult. This was some sort of
4 expansion of what they proposed expansion of what was
5 in place. And we can revisit it because I don't have
6 a problem revisiting it but at the time, they said
7 that the provider was delaying it. So, I didn't
8 understand why it was that it was just -

9 CHAIRPERSON NURSE: We've heard the opposite.
10 So, how many people does MAT serve versus what the
11 impact program was scheduled to serve?

12 JUANITA HOLMES: Does what serve?

13 CHAIRPERSON NURSE: The MAT.

14 JUANITA HOLMES: The Mobile uh?

15 CHAIRPERSON NURSE: The mobile adolescent, I'm
16 sorry, I don't know all the acronyms. Mobile
17 Adolescent Portable Therapy Program. How many
18 individuals does that program serve versus what
19 impact was scheduled to serve?

20 MATTHEW GRANOFF: I don't know about the impact
21 number.

22 JUANITA HOLMES: So, there was - I don't think, I
23 don't know if that program had a number scheduled to
24 serve the impact. I didn't see one.

1
2 CHAIRPERSON NURSE: So, I believe in prior
3 testimony, impact was scheduled to serve 175 youth
4 and the MAT program is scheduling -is serving 36
5 youth is what was testified before.

6 JUANITA HOLMES: Alright so 175 but I know that
7 the Mobile Adolescent serve several adult population
8 and young people. So, wherever the calls is provided
9 with the service but that particular program that I
10 was briefed on when I came in, the impact, I was told
11 that the provider was delaying it and that it never
12 got up and running. That's what I was told.

13 CHAIRPERSON NURSE: Well, I guess in the follow
14 up, it would be great to get the numbers and more
15 clarity on what exactly were the reasons for the
16 delays if you know, because we were under the
17 impression that this was your decision to delay the
18 program.

19 JUANITA HOLMES: No.

20 CHAIRPERSON NURSE: So, if you're saying it's
21 not, it would be great to hear what exactly
22 transpired because it seems like they were scheduled
23 to really serve quite more people than the MAT
24 program.

25 JUANITA HOLMES: Okay.

1
2 CHAIRPERSON NURSE: Uhm, and then one last
3 question on impact. What kinds of analysis did the
4 department conduct to determine whether programs with
5 overlapping services are redundant and is there a
6 cost benefit analysis involved?

7 JUANITA HOLMES: Right, so no cost benefit
8 analysis involved. I know originally when we looked
9 at a program Next Steps, that I had canceled, looking
10 at that program, the reason it was cancelled, it
11 wasn't funding. It was the fact that there were no
12 real key performance indicators. Even though it was
13 scheduled to be cancelled and it was cancelled, I
14 extended it. I met with all the vendors. I spoke
15 with them. I asked for the evaluations, the support.
16 Even some of them personally stated that they didn't
17 put anyone in place that should have been place.
18 That they, you know to evaluate the program. Moving
19 forward, the majority of those vendors with the
20 exception of one is still part of Department of
21 Probation programs. So, what I did was, I made sure
22 that with the changes that were put in, we met with
23 all the providers. We spoke about what key
24 performance indicators looked like, successful
25 outcomes, not just having 16 people attend, 20 people

1 attend. It was a total I think of about 210 clients
2 that they had. 40 something have went back to
3 school. The remaining clients, some actually are
4 part of programs that some of the vendors had in
5 place, so they're part of that and the remainders
6 went to the Arches because it was underutilized. I
7 didn't want to lose any funding for it looking you
8 know as though it's not used. So, we ended up
9 plugging them into our Arches program.
10

11 CHAIRPERSON NURSE: So, when these folks are
12 contracted in their RFPs, there's no description of
13 indicators of what the success of their programs
14 would be?

15 JUANITA HOLMES: That's right.

16 CHAIRPERSON NURSE: Okay.

17 JUANITA HOLMES: So that's what we're doing
18 differently.

19 CHAIRPERSON NURSE: Okay.

20 JUANITA HOLMES: That's what's being done
21 differently.

22 CHAIRPERSON NURSE: Yeah, I guess I would say
23 that that doesn't seem like - if I was ever to reply
24 to an RFP, I'm pretty sure it would ask how will you
25 determine if your program is successful. So, I would

1
2 love to see those RFPs and if those providers in fact
3 provided like their metrics of success because I
4 can't imagine that folks who are uhm, you know have
5 organizations to work with justice impacted
6 individuals aren't you know, assessing their programs
7 and aren't being able to articulate. This is why our
8 program works. This is why we should continue.

9 JUANITA HOLMES: And I agree. I agree
10 wholeheartedly. Even when I met with them, they
11 said, you know we're keeping people out of jail. I
12 know in my previous profession; I kept a lot of kids
13 out of jail. But my point is with that particular
14 program when we looked at our RFP's because I'm going
15 to dig through my due diligence. I want to see your
16 RFP. What does it state? It really had attendance.
17 And so, naturally on our receiving end and this is
18 Deputy Commissioner Maldonado. New position created
19 for programs and evaluation. On our receiving end, I
20 believe it was inputted into DOP Connect. That's
21 what you would see and then you see us, the previous
22 administration saying, get your numbers up. Maybe I
23 got a different lens. I'm not saying anything is
24 done wrong. I want to see young people successful.
25 I don't want to see them again. I want to see them

1
2 employed, the under credited individuals, should have
3 been identified to go to school, get them up to
4 grade, remedial courses, tutoring.

5 CHAIRPERSON NURSE: Yeah, I understand. I agree.
6 I know you know we've had the conversation before
7 this hearing, I know what you're intentions are but I
8 think it would be, I personally would love in the
9 follow up if we could look at those contracts and
10 really make a determination whether or not in fact
11 there were additional metrics of success beyond just
12 attendance. I personally find that very hard to
13 believe.

14 I want to move on, I just have a few more
15 questions and then I'm going to turn it over to the
16 Committee. I want to recognize Council Member
17 Restler had joined us. Uhm, so one of the things
18 stepping into this role, when we talk to a lot of
19 providers, there was a real concern about probation
20 officer firearm possession.

21 JUANITA HOLMES: Right.

22 CHAIRPERSON NURSE: And we've heard reports that
23 all - in your testimony that DOP employees in the
24 probation officers, civil service, title series, are
25 now required to carry firearms. What improvements

1
2 have you seen in the Department specifically since
3 implementing this policy?

4 JUANITA HOLMES: Right, so I didn't implement the
5 policy. In 2003, the former Commissioner mandated
6 firearms. It is part of the notice of examination
7 for the probation officers position. There is a
8 five-day training, firearm course that's part of
9 their training in order to qualify. To get the job,
10 you have to pass the firearm qualification. I didn't
11 implement that. What I saw was probation officers
12 doing visits, home visits in adult services
13 operations, not having their firearms on them when it
14 was mandated. So, I reinforced that, especially when
15 arrests are being made sometimes off these visits for
16 firearms. So, it was really out of safety, being
17 proactive, being on the offense that this policy was
18 put in place 20 something years before I took office,
19 so I don't know how it was presented as though I
20 mandated firearms.

21 CHAIRPERSON NURSE: I understand. Can you share
22 any number of injuries or fatalities that have
23 happened during these kinds of inspections over the
24 last few years? I mean, you said this was mandated
25 20 years ago. It really hasn't been enforced, so it

1
2 would be great to hear some data to back up the need
3 to re- kind of reenforce that mandate.

4 JUANITA HOLMES: Right, so I thought the same
5 thing. The first thing I said was, how many
6 probation officers have been injured? But the second
7 thing I said, that's a good thing because I don't
8 think there's ever been a line or duty with a
9 probation officer and me reenforcing the carrying of
10 firearms coming into office. I believe that Haun had
11 it in place for 20 some odd years. In addition to
12 that, it might have been loosely, maybe not enforced
13 with the previous Commissioner but no, I don't -
14 Probation Officers, we do have some injuries, not
15 life threatening I should say.

16 CHAIRPERSON NURSE: Okay, it will be great in the
17 follow up specific, you know like an injury report.
18 What has been sustained injuries during these
19 inspections over the last let's say three to five
20 years.

21 JUANITA HOLMES: Five years.

22 CHAIRPERSON NURSE: Yeah, five years would be
23 great to get an understanding. Uhm, and then are
24 they required to carry firearms on all of their
25 duties?

1
2 JUANITA HOLMES: They're required to carry
3 firearms. The decision -

4 CHAIRPERSON NURSE: Like, are there times where
5 it's not required? I understand that they have
6 inspections but if they're sitting with someone in a
7 community center, checking in, how are things going,
8 how are things going at home?

9 JUANITA HOLMES: They can cover their firearm.
10 They have lockboxes to secure their firearm. If they
11 want to make a more comfortable setting, they have
12 the liberty to do that. If that's the question.

13 CHAIRPERSON NURSE: Okay, I know that uhm you
14 know providers are in organizations within the NeON
15 network.

16 JUANITA HOLMES: Right.

17 CHAIRPERSON NURSE: Have asked that officers not
18 you know wear uniform or carry firearms. And
19 wondering if you all are considering that ask?

20 JUANITA HOLMES: Well, the ask is well, they can
21 actually cover their firearm. A young person or an
22 adult wouldn't even know that they have a firearm on.
23 The uniform shirts are in place, always have been in
24 place. I think it's important especially when we
25 think about the number of individuals we're

1
2 supervising with gun charges. The guns that are
3 being removed on home visits. But more importantly
4 they are the authority. It's not even for the reason
5 to scare a kid. You're the authority. An individual
6 should know who the authority is and that should be
7 easily discerning and God forbid, if it is something
8 where an active shooter or something goes awry,
9 people responding should know whose who. I think it
10 makes it a lot easier and it's not a full uniform.
11 They're wearing shirts, soft shirts.

12 CHAIRPERSON NURSE: Okay. Yeah, it's not like, I
13 mean I think a teenager would understand who's in
14 charge there, with or without the polo shirt with the
15 Signiant but I understand what you're saying. I can
16 understand what you're saying.

17 JUANITA HOLMES: Okay.

18 CHAIRPERSON NURSE: I have a question. Why
19 hasn't NeON launched? It's our understanding that it
20 had funding. Has an RFP been issued or will one be
21 issued?

22 JUANITA HOLMES: You're talking about the
23 expansion?

24 CHAIRPERSON NURSE: Yes. NeON Plus.

25

1
2 JUANITA HOLMES: You want to speak to that? NeON
3 Plus.

4 ROBERT MALDONADO: We put out the RFP. We
5 unfortunately did not get any responses back. We are
6 now targeting vendors that we think would be able to
7 provide the service that we're trying - the benefits
8 and service that we're looking for but we haven't
9 gotten any, you know we're still working through the
10 process of getting it out to those vendors and
11 getting responses back.

12 CHAIRPERSON NURSE: So, it's live right now? The
13 RFP is live?

14 ROBERT MALDONADO: The RFP is out, yeah.

15 JUANITA HOLMES: Yeah, it's been a - it's that
16 the HRA that we're talking about?

17 ROBERT MALDONADO: Yes.

18 JUANITA HOLMES: Okay, I'm going to open up to
19 Council Members that have questions for probation.
20 Council Member Narcisse.

21 COUNCIL MEMBER NARCISSE: Thank you Chair. I'm
22 happy that you're here but most of my questions are
23 not for you but one quick question I have I think,
24 how many New Yorkers who are on probation are
25 securely housed? How many are homeless? What

1
2 services does the Department offer to get these folks
3 properly housed?

4 JUANITA HOLMES: So, we have about – what's that
5 number? 300?

6 COUNCIL MEMBER NARCISSE: How many?

7 JUANITA HOLMES: 300 that are currently homeless
8 or living in a shelter. 55 that have been identified
9 as being homeless. Currently, we have been working
10 with DHS and some other third-party facilities that
11 offer housing as well. One in particular is Doe
12 Fund. We've had several meetings with them. I like
13 them because they do have housing and they also when
14 you're part of their housing, you can be part of
15 their programs and they have some real what I like,
16 significant programs such as welding that they have
17 some cohorts going on with that.

18 So, the 55 individuals we're actually looking at,
19 where are they now and even if they're in a shelter,
20 we can transfer them to Doe Fund. Or if they show up
21 at the address, if they show up at 33B for DHS, Doe
22 Fund will actually come down, meet them and have them
23 transition. And they do have the availability in
24 what's called Porter House I believe in Harlem they
25 stated. But more importantly, DHS is right in the

1 building downstairs. We're working with them. So,
2 those 55 names we have and we're meeting with the
3 Deputy Commissioner of DHS regarding those
4 individuals as well.

5
6 COUNCIL MEMBER NARCISSE: Okay, thank you. Uhm,
7 Governor Hochul has proposed closing five state
8 correctional facilities in the next fiscal year. A
9 plan that she says would save the state \$77 million.
10 Do you see any potential impact that the closing of
11 this facility will have on the Department of the
12 population at Rikers or the population at Rikers?
13 Has the DOC been coordinating with the Department of
14 Correction? - Oh no, that's not yours sorry.

15 So, this one I want you to answer. Do you see
16 any potential impact?

17 JUANITA HOLMES: Yes, so I do and even with the
18 commission that's being formed down and I think
19 hopefully we'll have the confirmation of the last two
20 individuals to that's going to be part of the
21 Conditional Release Commission. So, even that we're
22 planning for, so I'm going to need more people. So,
23 I stated this. I actually put in for PARs to hire
24 bigger classes because yes, I feel as a result of
25 that, more people may be under community supervision.

1
2 So, we're forecasting for that. In addition to that,
3 we're looking at real programs such as I spoke about
4 the CDL, overwhelming attendance with that particular
5 program. Naturally, they need a license. There's
6 some fees. So, we're trying to mitigate and work
7 around some of those circumstances. Welding is
8 another vendor that we're looking at that I think it
9 would be huge. You don't need a high school diploma;
10 you only need to know how to operate the machine.
11 So, hiring of more people will be needed for the
12 Department of Probation but we are definitely
13 forecasting in the right direction that we're going
14 to have some, a lot more people under community
15 supervision.

16 COUNCIL MEMBER NARCISSE: According to the
17 preliminary budget, the average compensation for a
18 nonsupervisory probation officer is approximately
19 \$50,000. Do you believe that the salary makes it
20 difficult to retain and hire probation officers?
21 Why? And why not?

22 JUANITA HOLMES: So, I think the salary plays a
23 big part on keeping them, maintaining our staffing
24 numbers. The hiring, we do see people taking the
25 exam and they are eager. We just brought another

1 class in and they are currently being vetted for the
2 position and they were equally excited because the
3 onboarding process has been made smaller, a lot
4 smoother but keeping them, the salary definitely has
5 an effect on it. But I do believe and I know this
6 was stated, quoted by the Mayor's communication
7 person, that like the other 75 percent of unions that
8 have contracts have been signed, that probation
9 officers will see an increase in pay.

11 COUNCIL MEMBER NARCISSE: I hope so. What is the
12 Department of Probations rule in addressing the
13 city's rise in gun violence? How is your department
14 working with other agencies to address gun violence?
15 Did the preliminary plan include any additional
16 resources for addressing gun violence?

17 JUANITA HOLMES: So, what we did in Department of
18 Probation, Department of Probation Adult Services,
19 they're broken down by what they call branches.
20 Intense engagement, and various other different
21 components. There was a total of six. What we did
22 was parce out anyone that's involved in gun violence.
23 They had their own branch. They need a different
24 type of supervision. We want to reduce their gang
25 attendance naturally. Even with raise the age, we

1
2 have an increase in our population. We have, what
3 was it 2,000 I think was the number for the gun, the
4 gun cases? Yes, 2,000. I believe approximately
5 2,100 of the 9,000 individuals under supervision are
6 on for a gun charge. So, as a result of such we took
7 58 probation officers, 10 supervising officers, and
8 we want to focus on the basic fundamental needs. If
9 they need a high school diploma. If they have
10 family. If they have children. You know you want
11 some type of leverage you want to speak with them
12 about and with the hopes of keeping them on a right
13 path but more importantly, 84 percent of the adult
14 population are over the age of 24 and are men. And I
15 always say this, I know women need money. We need
16 money too but men need money. It defines, it
17 character defines who they are. They need
18 employment.

19 So as a result of some of them that are under
20 credited or don't have a high school diploma, We want
21 to work with them to get them if they have no
22 interest, and people they don't have an interest in
23 education but you need to read a 7th grade level or
24 be able to do math to even have a bank account. So,
25 we are definitely working with them, with these

1 remedial courses, but more importantly, plugging them
2 into these vocational programs. So, they can have
3 some real significant employment.
4

5 COUNCIL MEMBER NARCISSE: As a former nurse
6 working with people on program, a reentry program,
7 one of the things I heard my colleagues just mention
8 is how people are not objective to the decision.
9 When it comes to schools, they don't give them
10 flexibility. I used to have people complain all the
11 time. They cannot go to school because by the time
12 their curfew, they get in. I know it become
13 individual things but I would like for you to look
14 into it because when folks, young folks trying to do
15 the best, we don't want people to use their authority
16 to abuse their authority over people that are looking
17 for opportunities.

18 JUANITA HOLMES: Right, absolutely yeah, not
19 here. That's not the case. And we even have a high
20 school equivalency that we plugged into one of our
21 NeONS as well as tutoring services. So, absolutely.

22 COUNCIL MEMBER NARCISSE: Thank you. Thank you
23 Chair.

24 CHAIRPERSON NURSE: Thank you Council Member
25 Narcisse. Public Advocate.

1 PUBLIC ADVOCATE WILLIAMS: Thank you Madam Chair
2 and thank you Commissioner. I had a few questions.
3 One, I wanted to go back to the guns conversation and
4 there was and I hope you agree with me, there was an
5 exception I wanted to push back to the framing. I
6 think you said we have to know who the authority
7 figure is and so I was concerned about assigning that
8 with a gun because I think that's a different message
9 than what we're trying to tell our young people and
10 can be misconstrued. Whoever has the bigger gun is
11 what shows who the authority figure is.
12

13 JUANITA HOLMES: No, that was regarding the
14 uniform shirt, the soft shirt. Not the gun.

15 PUBLIC ADVOCATE WILLIAMS: Oh.

16 JUANITA HOLMES: Yeah, that's just the uniform,
17 not the firearm. Absolutely not, not the firearm.

18 PUBLIC ADVOCATE WILLIAMS: Okay uhm, but in that
19 and so, this is I don't want to get into the
20 conversation of who should have a firearm and who
21 shouldn't. But I think something unique happened
22 here and so, this was put in 2003 and for whatever
23 reason, it wasn't enforced. So, we have two decades
24 of data of what it's like to carry out this job
25 without the firearm. And so, have we looked at that

1 data to see if we're able to do without a firearm
2 before we make a decision to reenforce it?

3
4 JUANITA HOLMES: Right, so I want to clarify,
5 everyone had a firearm. I didn't give them one.
6 They - it's part of their job. So, what was
7 happening was, exactly like I said, if they're in a
8 NeON and they feel they want to secure their firearm,
9 it was my job to make sure they had a space to secure
10 their firearms while dealing with their clients.
11 They have that space. It's been provided. I put in
12 cameras over the space. There's an access card to
13 get in, so even clients coming into the facility
14 won't be able to compromise it. It's their
15 discretion to when they're intact and when they're
16 compliant. When they're going out and responding to
17 someone's home, that's a whole different story and I
18 don't think something should have to happen before we
19 say, "oh well, maybe if they were carrying." You
20 know so -

21 PUBLIC ADVOCATE WILLIAMS: I think that is a fair
22 point. I'm just saying that we had a unique
23 opportunity to have a discussion about something that
24 we otherwise might not have. I think the assumption
25 would be that we need to take a firearm on some of

1
2 these visits but we have two decades of there that
3 might not have been happening. So, that might have
4 been an interesting way to look at whether it is
5 necessary on all of these visits. And so, my
6 question is did we digest any conversation of data to
7 see if that was something that we needed to
8 reenforce.

9 JUANITA HOLMES: So, yes, that data was my life.
10 I did look at data. I don't want it to be where
11 people think for two decades they weren't carrying
12 firearms. Several members were and some weren't.
13 That's what it was but yes, the data -

14 PUBLIC ADVOCATE WILLIAMS: So, that's even
15 better, we had a control.

16 JUANITA HOLMES: Well, I don't think it was a
17 control because God forbid something happened and I'm
18 using you as a shield because you got the firearm.
19 So, but my thing is, what happens is that when we
20 took a look at the data, no line of duty does. I
21 don't know if that was attributed to not caring or
22 caring or just them, just God is good. But with that
23 being said, I know that probation officers have
24 suffered some injuries but nothing you know that I've
25 seen when we looked at the data and I have members

1 that's been here 30 years. We probably got over 100
2 and something years of experience here. And so, we
3 haven't seen that which is great.

4 PUBLIC ADVOCATE WILLIAMS: Were officers who
5 weren't carrying it all the visits complaining?

6 JUANITA HOLMES: They were, you can speak to
7 that, okay.

8 ANDREA MCGILL: Okay, I just want to make some
9 clarifications. It was mandatory back in 2003 where
10 everyone carried a firearm.

11 PUBLIC ADVOCATE WILLIAMS: Understood.

12 ANDREA MCGILL: Then with a switch of a
13 Commissioner, it was people who are in supervision
14 carries a firearm. All other people who are not in
15 the field, they could, it was optional for them. It
16 was optional for them. However, what the
17 Commissioner was talking about is that we have
18 officers who either got injured or for whatever
19 reason, their weapon was taken but they were still in
20 the supervision and they were still going in the
21 field with someone who had a gun and they didn't have
22 a gun.

23 PUBLIC ADVOCATE WILLIAMS: So, there was already
24 a gun present?
25

1
2 ANDREA MCGILL: Yeah, one but somebody else
3 didn't have one and that became an issue for the
4 offices.

5 JUANITA HOLMES: So, the clarity is, if they're
6 inside and they're dealing with NeONs, it's optional.
7 When they go out and they're conducting field visits,
8 the supervision operations, they all should be
9 carrying a firearm. Does that make sense?

10 PUBLIC ADVOCATE WILLIAMS: No, but my time is on,
11 so I just want to say I think we're trying to find a
12 world where we can communicate without guns. If you
13 had asked me in 2003, whether they should or should
14 not, I probably would say they might need it and what
15 I'm saying is now, for whatever reason, we have a
16 lot. Two decades of where it wasn't mandated and it
17 seemed to have been, whatever was put in place,
18 whether it was supervisors who had it, not everybody,
19 it seemed to be working. I'd rather, I don't want to
20 belabor here, so maybe there's a conversation to have
21 after. I'm just saying if it was working, why at
22 this moment would we have to change it? Perhaps
23 having less of a firearm, calm the situation to make
24 it go a certain way. I don't know the answer but I
25

1
2 just want to know if there was you know conversations
3 that have occurred before we made that decision.

4 JUANITA HOLMES: Right, so it was conversations
5 but I think it's confusion. If the majority of
6 people in operations had their firearms, some members
7 may have had their fire removed for a domestic
8 incident, you know personal violations or whatever
9 that, you know against the agencies policy. Those
10 are the individuals that are in operations going out.
11 I think it's about 33 people now. So, those were the
12 individuals that we wanted to make sure had their
13 firearms along with the rest of the supervision.
14 Because that supervision was always mandated and
15 always had firearms for the last 21 years. That's
16 what she's saying.

17 PUBLIC ADVOCATE WILLIAMS: Yes and some people
18 didn't. My time is up so I look forward to having
19 those conversations. I was going to ask a question
20 and we can ask later, so maybe I'll just make it a
21 point. I think young people don't like adults and
22 they don't like law enforcements and we're usually
23 the one's making the program, so I was just wondering
24 if you are using other people to help design the
25 programs and implement it and Commissioner Maginley I

1
2 won't be here for my questions because I have to head
3 out but I'm looking forward to have a conversation
4 with you about Rikers. So, thank you for being here
5 as well. Thank you everybody.

6 JUANITA HOLMES: Thank you.

7 CHAIRPERSON NURSE: Thank you Public Advocate and
8 as I mentioned, I think you know just having an
9 understanding of our people being injured and do the
10 type of scenarios that they might be injured merit a
11 firearm? And even with a response with a firearm be
12 necessary? I don't want to belabor it because we
13 spent enough time on it but I have Council Member
14 Stevens followed by Hanif followed by Restler
15 followed by Brewer.

16 COUNCIL MEMBER STEVENS: Hello, good morning. I
17 just have a couple of questions and I guess it's
18 interesting because just to just piggyback where
19 Public Advocate left off. I do want to hear more
20 about how you are incorporating young people into the
21 program model. Because I know you mentioned that
22 you're having a new virtual program and those types
23 of things and I'm a program person and too often
24 adults are sitting in a room saying like, this is
25 going to be a great idea and we know nothing. And

1
2 so, I want to know what that process looks like?
3 What young people you spoke to? Do you have an
4 advisory board? How are you getting young peoples
5 input and feedback on the program that you're
6 providing? Because I know you were very excited
7 about the virtual program but how do we know kids are
8 going to like it?

9 JUANITA HOLMES: Because that's what we do. We
10 get surveys, right and we have -

11 COUNCIL MEMBER STEVENS: So, you have surveys?

12 JUANITA HOLMES: And we surveys that we created
13 and we've had these conversations even for adults,
14 not just young people. It's their decision. Like we
15 do good at saying even when I looked at the programs
16 we had in place, who made the decision to have these
17 programs in place? Some of those programs were not
18 offsetting recidivism. So, you are absolutely right.
19 So, that's what we do, not just with the young, but
20 even adults. What type of employment are you
21 interested in? What do you think would help you?

22 So, yes, so that's -

23 COUNCIL MEMBER STEVENS: I hear you. We're on
24 the same page. I'm a program person and honestly,
25

1
2 I'm only asking about young people. I'm the Chair of
3 Children Youth Services.

4 JUANITA HOLMES: Okay, yes.

5 COUNCIL MEMBER STEVENS: So, that's where I'm
6 going to stay. I'm going to stay in my pocket.

7 JUANITA HOLMES: Yes, okay.

8 COUNCIL MEMBER STEVENS: So, uhm, other than the
9 survey, what does that look like because what young
10 people are filling out these surveys? How does it
11 look and how are they being implemented? Where are
12 you getting these young people from? I would love to
13 hear what that looks like.

14 JUANITA HOLMES: So, they're part of the
15 juveniles that we have, right and then we also have
16 young people that are stakeholders and our NeONs that
17 just live in the community. So, even for them -

18 COUNCIL MEMBER STEVENS: How many surveys did you
19 get filled out?

20 JUANITA HOLMES: Uhm, I don't know how many
21 surveys she has. I'll get the numbers for you. We
22 don't have them but I'll get it.

23 COUNCIL MEMBER STEVENS: Yes, please.

24 JUANITA HOLMES: But also what we're doing now is
25 we have what's being built out, that's why I have a

1
2 new Chief Information Officer, right? We know
3 technology is the way to communicate with people.
4 So, he's building out something called Mobile DOP,
5 where not only just where they can conduct surveys,
6 like how are we doing? I want something to say, how
7 are we doing? Because you're absolutely right, we
8 think we're doing the right thing for them. So, for
9 adults and for children. But in addition to that,
10 reminding them, this is your court date. Reminding
11 them, you know you're due to come in and see you know
12 your counselor, you know your probation officer or
13 either. We're coming to conduct a home visit today.
14 Don't forget curfew is this time. We're trying to
15 offset a lot of these nonsense violations but more so
16 arrests, right? Because we're seeing the recidivism
17 and it's, I'm not going to say it's an increase it's
18 just always been here. It's just been not really
19 looked at in that particular lens. And you want to
20 reduce recidivism. You want them to have a
21 productive life. So, how do we keep them occupied,
22 right? But we also need their buy in as to what they
23 particularly like.

24 COUNCIL MEMBER STEVENS: No, I agree. Like I
25 said, I've been in the program. I was in the program

1
2 for 12 years and I often coming into this role,
3 there's always a room full of adults making decisions
4 and I'm just - I am the person who's always like,
5 well, where are the young people?

6 JUANITA HOLMES: That's right.

7 COUNCIL MEMBER STEVENS: And so, I would love to
8 get that information on like who was surveyed? What
9 that data looks like because I think those things are
10 important and making sure that that is happening not
11 just here but across the board. I'm always asking
12 these questions and so I'm very -

13 JUANITA HOLMES: Yes, and we also you know like I
14 said we partner with NYPD. Two mentorship programs
15 that I created from way back when and girl talk and
16 we just had a big event at police headquarters with
17 young ladies from all over. DOE you know Department
18 of Education was a part of it. Probations was a part
19 of it but what I like about that is that they say
20 kids don't like law enforcement. That program there,
21 they feel so empowered just being in the room.
22 They've gotten awards.

23 COUNCIL MEMBER STEVENS: Well, I want to say
24 that, because I think you're saying, you said that
25 kids don't want law enforcement and I think that's a

1 misconception because it's not that they don't like
2 them. It's often that they have been terrorized and
3 we have not done the work to improve those
4 relationships in those communities. And so, I think
5 you know we shouldn't say that they don't like them.
6 If I've only seen abuse in my communities and I have
7 not seen you come in and actually try to help me,
8 then I'm going to be standoff-ish about it. And so I
9 do think that we need to fix the work and often we're
10 not doing that. We'd rather play basketball than
11 take pictures and everything looks nice but that's
12 you know that a whole other thing.

14 And I had another question, even around the steps
15 program, I know you said that there was like no
16 evaluations and like the RFP. That sounds strange to
17 me because like I said, I was in the program for
18 years. I've never seen an RFP and like has had any
19 indicators of success. Like there's no way that RFP
20 was put out. That's just not even how RFPs work.

21 JUANITA HOLMES: I'm going to tell you something.
22 I said the same thing. I've been in city government
23 for 30 something years, doing programs myself right.
24 You want successful outcomes. I walked into this
25 seat and I'm telling you what I saw was metrics of

1
2 attendance. And I have a program person, my guidance
3 over the contracts, they are here. Everybody at this
4 table looked at the programs. He did a deep dive in
5 it. I have no reason to tell you -

6 COUNCIL MEMBER STEVENS: No, I'm not saying that
7 but even a metric of attendance is a metric.

8 JUANITA HOLMES: Right.

9 COUNCIL MEMBER STEVENS: So, to say that there
10 isn't any, that is a metric and especially for that
11 program specifically. I think what happens in
12 programming right, we often say like you have to have
13 all these things and we have all these things.
14 Sometimes you do need programs that have lower
15 hanging fruits to engage these young people. And so,
16 attendance is the prime purpose right. And so, that
17 program was a mentorship program that was in
18 developments that were engaging young people who
19 typically aren't engaged and it was really hard. And
20 so, getting them there was a challenge and so, to
21 give someone who is really hard, that doesn't come to
22 any other programs is probably not coming to the
23 community, that's probably not going to school, and
24 is engaged in other illegal activity, it's really
25 hard to get them there.

1
2 So, that is why that bar was so low because
3 engaging them took so much work. And so, I think we
4 have to also look at the differences. There's
5 different programs for different things and saying
6 that attendance isn't enough for that program, it
7 made sense because it was so difficult to get those
8 kids there. So, maybe you want it a little bit more
9 but maybe it's like we could have layered it and
10 said, okay, attendance is the first step. Something
11 is the second step and instead of saying let's
12 eliminate it, I think sometimes we don't take the
13 time to say lets stop and evaluate a program and then
14 address it and change it because it doesn't make
15 sense. It was working and lets say even if it was
16 only 200 kids in the program. We just lost those 200
17 kids because now we have reengage them. Even if it's
18 a new program, it's still reengaging them in a
19 different way. So, I'll leave it there and if
20 there's a second round, we'll ask some more
21 questions.

22 CHAIRPERSON NURSE: Thank you Council Member
23 Stevens. I wanted to kind of touch on it, on a piece
24 while Council Member Hanif is out. There was some
25 reporting where it was reported that you had directed

1
2 staff to issue probation violations to people who
3 aren't attending school or working and this is for
4 youth ages 12 to 17 which drove data up 44 percent
5 for technical violations. But earlier you had
6 mentioned you're really not trying to do that and
7 based on what Council Member Stevens is saying is
8 like, we're cutting these programs where okay, we
9 lost 200 youth or 35 youth. We still lost them. It
10 seems like we're not focused on keeping them engaged
11 and looking at the root cause of why they're not
12 showing up to school or why they're not showing up to
13 work.

14 I understand that some of this has to do with
15 like well, maybe the type of programming isn't what
16 they wanted and you're looking to bring in different
17 types of programs from what they've said that they
18 would be interested to but it seems like these things
19 aren't necessarily in alignment.

20 JUANITA HOLMES: I can assure you, listen the
21 paper is going to do what they want. I came from PD,
22 so they want to try and say, oh, she's law
23 enforcement. They have no idea what I did in PD for
24 young people and mentorship. So, my thing is, that's
25 not the case. Even if you look at our violations,

1
2 the highest violation numbers are arrests. That's it
3 and if there's an increase than there's an increase
4 in arrests and if there's an increase in arrests that
5 tells me, we got to do something different as far as
6 programming when it comes to our young people. The
7 next highest thing for violations and we took a look
8 at and had the data, failure to appear, which will
9 result in if we don't see you for a year or six
10 months, that can result in a warrant. So, I took a
11 look at their data. There is no technical files.
12 I'd rather put a solution in place for school. If
13 you're not attending school then there's remedial
14 programs. Then there's tutoring. Maybe we can get
15 you up to 7th grade, reading and math level and you
16 pass the GED. I'm never going to violate a child but
17 papers or sensationalizing -

18 CHAIRPERSON NURSE: You didn't direct people.

19 JUANITA HOLMES: Absolutely not.

20 CHAIRPERSON NURSE: Okay.

21 JUANITA HOLMES: Absolutely not.

22 CHAIRPERSON NURSE: Council Member Restler.

23 COUNCIL MEMBER RESTLER: Great, thank you for
24 being here today. Commissioner and DOP team would
25 just like to remind you that you're under oath and

1
2 the integrity of what is said at these hearings is of
3 upmost importance to the members of this Committee
4 and to the public at large. I've been concerned
5 about some of the inconsistencies in the things that
6 I've heard today.

7 I'd like to just start with the reality that the
8 number of kids in jail has doubled under Mayor Adams
9 tenure. Doubled and DOP has a central role to play
10 in sending these kids to jail, so after a young
11 person is arrested, they go to DOP for an interview
12 and then the decision is made to refer the case to
13 the Law Department for prosecution in Family Court.
14 DOP is not required to send every case to the Law
15 Department for prosecution. Uhm, why have so many
16 cases - how many cases have been referred to the Law
17 Department so far in FY24?

18 JUANITA HOLMES: Do you have your number Matt?

19 MATTHEW GRANOFF: So, I don't have that number
20 but it sounds like your indicating every case is
21 being referred.

22 COUNCIL MEMBER RESTLER: No, of course not.

23 MATTHEW GRANOFF: That's clearly, that's clearly
24 not the case right?

25 COUNCIL MEMBER RESTLER: But a lot more are.

1
2 MATTHEW GRANOFF: A lot more are. We're also
3 seeing a lot more violent felony arrests than
4 felonies.

5 COUNCIL MEMBER RESTLER: There's a choice on
6 that. I mean there's a 44 percent increase in felony
7 arrests that was celebrated in your all's PMMR but
8 only an 8 percent in gun arrests for those same kids.
9 So, you're choosing the Department of Probation, the
10 Law Department, is choosing to send more kids to
11 jail. That is why these numbers have skyrocketed.

12 MATTHEW GRANOFF: So, two responses right? The
13 first one is there's eligibility and suit ability.
14 Some cases are not eligible. But the second thing
15 is, the fact that we refer a case to the presented
16 agency doesn't mean they're going to jail. They're
17 going to juvenile detention.

18 COUNCIL MEMBER RESTLER: Of course not but we are
19 seeing more and more kids get sent to jail to
20 juvenile detention, to secure detention. So, since
21 you've come into office and brought in a new
22 leadership team at the Department of Probation and I
23 just have to say, I had a great working relationship
24 with multiple commissioners over multiple
25 administrations and the senior leadership team at DOP

1 was reform oriented and thoughtful. I'm very
2 concerned about the change and trajectory that we're
3 seeing under your leadership at the Department of
4 Probation. We've seen cuts of \$700,000 to the Impact
5 Program. \$2.6 million to Next Steps. \$1.6 million
6 to Arches. Nearly \$5 million in cuts to Alternative
7 to Incarceration programs under your tenure. Is that
8 correct?
9

10 JUANITA HOLMES: It sounds about right.

11 COUNCIL MEMBER RESTLER: Do you know how much
12 we're spending on increased incarceration of kids in
13 jail in our youth detention, secure detention
14 facilities?

15 JUANITA HOLMES: No.

16 COUNCIL MEMBER RESTLER: Its increased by \$20
17 million. A 50 percent increase from FY19 to the
18 present. So, over these years, we've seen spending
19 increase by 50 percent in our jails by \$20 million
20 while we've cut by \$5 million, the programs that
21 serve to keep people out of jail that are effective
22 alternative to incarceration programs. You said
23 there's no data for the Next Steps program.

24 JUANITA HOLMES: Not next steps. Next steps was

1
2 COUNCIL MEMBER RESTLER: You said there was no
3 data, is that right?

4 JUANITA HOLMES: Next steps, Next Steps program
5 was community oriented. Impact program was never off
6 the ground and running and it wasn't for youth.
7 You're mentioning juveniles, right? The increase?
8 That program was not for young people.

9 COUNCIL MEMBER RESTLER: It would have served 175
10 young people.

11 JUANITA HOLMES: That wasn't for young people.

12 COUNCIL MEMBER RESTLER: The Impact program would
13 have served 175 young people. Are you saying that's
14 not accurate?

15 JUANITA HOLMES: Was it for young people?

16 COUNCIL MEMBER RESTLER: Yes, of course it's for
17 young people. It's for young people. Please, could
18 somebody clarify. It's for young people. We all
19 know this. Come on, sorry, I get too upset.

20 JUANITA HOLMES: Well, you're saying, with all
21 due respect Council, you're saying 175 young people.
22 The program was not running and what was stated to me
23 right coming in the door, I meant what your throwing
24 at me right? What was stated to me by, I believe,
25 the former Deputy Commissioner of Administration was

1
2 that the providers was delaying the start of the
3 program.

4 COUNCIL MEMBER RESTLER: I've spoken with Cases.
5 Cases was selected as the provider through your RFP
6 process, is that correct?

7 JUANITA HOLMES: I don't know, I was in -

8 COUNCIL MEMBER RESTLER: Could somebody testify?
9 Yes -

10 JUANITA HOLMES: It was Cases.

11 COUNCIL MEMBER RESTLER: Cases was selected.
12 They were selected to provide a contract for 175 at
13 risk young people that were in family court. Is that
14 correct? Just yes or no please. This is the most
15 basic staffer that you all cut. You should know
16 better.

17 JUANITA HOLMES: It was correct.

18 COUNCIL MEMBER RESTLER: Okay, so I'll take a yes
19 on that one. Cases was ready to provide the
20 services. They have shared that with my office, with
21 Council Member Stevens office, I'm sure with Council
22 Member Nurses, with Chair Nurses office. Why was the
23 program cut? A program that was when youth
24 incarceration rates are skyrocketing. Why would we
25

1
2 eliminate one of the most effective diversion
3 programs in the City of New York?

4 JUANITA HOLMES: The program was cut because we
5 were informed that they already had an existing
6 impact program and that one didn't get up and
7 running. And that existing -

8 COUNCIL MEMBER RESTLER: There is no alternative
9 to the Impact program. There is nothing like Impact
10 that operates in the City of New York.

11 JUANITA HOLMES: I disagree.

12 COUNCIL MEMBER RESTLER: Well, you said there's
13 an alternative, so let's hear from your Deputy
14 Commissioners, was there an alternative? What other
15 services are being provided to these young people?
16 Because all you are doing is sending them to jail.

17 JUANITA HOLMES: No.

18 COUNCIL MEMBER RESTLER: That is the only policy
19 that we are seeing. That is the outcome we are
20 seeing. The services are being cut and you're
21 sending more kids to jail. That is what - tell me.
22 Give me the alternatives that are being provided.

23 JUANITA HOLMES: I beg to differ Council. I beg
24 to differ.

1
2 COUNCIL MEMBER RESTLER: You said that the
3 alternative to Next Steps was Arches. You got \$2.6
4 million and you testified to that an hour ago. That
5 you cut -

6 JUANITA HOLMES: Are you listening?

7 COUNCIL MEMBER RESTLER: I'm listening and I'm
8 listening to your testimony -

9 JUANITA HOLMES: Here's what I testified.

10 CHAIRPERSON NURSE: Please let her speak.

11 JUANITA HOLMES: Here's what I testified to.

12 When I walked in the door, I was told Arches was five
13 days scaled down to three days. I said, why?
14 Because young people weren't compliant with
15 attendance. I said, why? I have to come up with
16 something that's going to bring them in the door. Do
17 you think I'm intentionally cutting programs while
18 still creating programs? While still being
19 concerned? I walked in the door knowing if I had a
20 meeting with DOE about kids coming to us under
21 credited, no education. Not going to school. Not
22 listening to their parents. I put that in place.

23 COUNCIL MEMBER RESTLER: I'd like to focus on the
24 questions.

1
2 JUANITA HOLMES: A program is important. School
3 is ten times more important but we are definitely
4 putting programs, more programs, the right programs
5 in place.

6 COUNCIL MEMBER RESTLER: Okay.

7 JUANITA HOLMES: That's what we want for young
8 people.

9 COUNCIL MEMBER RESTLER: You testified that you
10 were cutting Next Steps because it didn't have data.
11 Former DOP staff reached out to my office -

12 JUANITA HOLMES: I testified that they didn't
13 have successful outcomes. There was no successful
14 outcomes other than metrics. Other than 16 people
15 attending.

16 COUNCIL MEMBER RESTLER: Okay, if it would be
17 helpful, former DOP staff have sent us -

18 JUANITA HOLMES: And those 16 people weren't the
19 16 people. So, when I say 16 people attending, that
20 means 16 names touched it. The names might have
21 changed.

22 COUNCIL MEMBER RESTLER: I have witnessed this
23 program up close. I have met with these providers.
24 This is a highly effective program serving at risk
25 NYCHA youth. Former DOP staff have sent us metrics

1
2 and outcomes that are, but you cut \$2.6 million in
3 funding that were serving these at-risk youth in our
4 NYCHA developments. And then you testified today,
5 that that program was folded, that you were serving
6 them through Arches. But you cut Arches by another
7 \$1.6-

8 JUANITA HOLMES: I didn't cut Arches. Arches was
9 not being utilized-

10 COUNCIL MEMBER RESTLER: Was there not a PEG to
11 the budget for \$1.6 million cut to Arches, yes or no?

12 JUANITA HOLMES: No.

13 COUNCIL MEMBER RESTLER: Yes or no, was there PEG
14 for \$1.6? Yes, thank you very much. So, you, I just
15 got to remind you Commissioner, you are under oath.

16 JUANITA HOLMES: I am under oath.

17 COUNCIL MEMBER RESTLER: So, when you deny the
18 things, the facts that are real, it undermines our
19 faith and confidence in you, in this agency, and in
20 this Administration.

21 JUANITA HOLMES: Well, I'm telling you -

22 COUNCIL MEMBER RESTLER: I am deeply concerned
23 about your policies and the driving up of mass
24 incarceration of our young people in New York City
25 and I am deeply concerned by your testimony today. I

1
2 will be asking the Office of General Counsel to
3 review its accuracy. Thank you.

4 JUANITA HOLMES: You're welcome.

5 CHAIRPERSON NURSE: Alright you all, do the hand
6 thing. You know the deal. Thank you Council Member
7 Restler. Just for clarifications, Next Steps was
8 terminated?

9 JUANITA HOLMES: Next steps was, yes. They
10 weren't renewed, the contract was renewed.

11 CHAIRPERSON NURSE: And impact is fully
12 cancelled, never having launched?

13 JUANITA HOLMES: Right, hmm, hmm.

14 CHAIRPERSON NURSE: And what programs are
15 replacing this?

16 JUANITA HOLMES: So, what we're looking at, a
17 real - programs to replace that. So, currently we do
18 have cases that are still part of the impact that's
19 serving, it says 35 people. You know I guess that's
20 bear minimum, these RFPs with the numbers but they
21 serve way more than that and they serve adult as
22 well. So, there is an alternative to impact and it's
23 the same vendor cases.

24

25

1
2 CHAIRPERSON NURSE: Well, I understand it was
3 that impact was going to offer more service than what
4 the MVP was.

5 JUANITA HOLMES: No, we, well, they didn't, my
6 staff members here at the executive cabinet, they
7 didn't even know about impact when we brought it up.
8 It's only because I was doing a deep dive into the
9 contracts of Department of Probation that that serve
10 to me -

11 CHAIRPERSON NURSE: To me, that would seem like
12 there's an issue with the transition plan and some
13 other -

14 JUANITA HOLMES: No, no, no, these are -

15 CHAIRPERSON NURSE: You should be able to find
16 where you've had contracts before.

17 JUANITA HOLMES: They've been here for 30 some
18 odd years.

19 CHAIRPERSON NURSE: But in 30 years you didn't
20 know that the program was there?

21 JUANITA HOLMES: You want to speak to -

22 CHAIRPERSON NURSE: I'm sorry, in the last few
23 years, you did not know about the program?

24 ANDREA MCGILL: I did not know about impact.
25 What we're saying is, what I've learned since the

1
2 Commissioner came onboard is that we had this program
3 impact. My understanding and my learning was that it
4 never really launched, so I think they got the people
5 in place but it never went to the next level and I
6 think the time it ended, right before knowing should
7 we renew the contract or not?

8 JUANITA HOLMES: What happened was, it never
9 started.

10 CHAIRPERSON NURSE: I understand.

11 JUANITA HOLMES: The members, the cabinet members
12 that proceeded me for decades didn't even know that
13 this was in place. It only surfaced because I hired
14 him to do a deep dive into all the existing programs.
15 As a result of such, we brought up our contract
16 person who's here and they said, "oh by the way, this
17 is a contract also."

18 CHAIRPERSON NURSE: I understand and because
19 we're now coming back again, I think the take away
20 from this exchange is that this program had a lot of
21 potential. There were people in place. There was
22 money ready to go. It would have served more people
23 and had more expansive services than some of what was
24 already in place and this might be an option, an
25 opportunity to reconsider -

1
2 JUANITA HOLMES: I'll take a look at it. I'll go
3 back and take a look at it uhm you know because maybe
4 it was presented in a different way with the
5 individuals that was here before. I'll definitely
6 take a look at it.

7 CHAIRPERSON NURSE: Okay, okay, we're going to
8 move forward. Council Member Brewer.

9 COUNCIL MEMBER BREWER: Thank you. I listened
10 earlier even though I wasn't here. So, I just had a
11 couple questions. What's your program percentage
12 just generally in terms of your agency? Like, what's
13 the percentage of budget that goes towards program?

14 JUANITA HOLMES: What is it \$21 million for
15 programs?

16 ANDREA MCGILL: For FY25 it's approximately \$18.5
17 million for FY25. For FY24 it was \$21.4 million.

18 COUNCIL MEMBER BREWER: \$21 in 2024 and \$18 in
19 2025?

20 ANDREA MCGILL: \$21.4 in FY24 and \$18.5 for FY25.

21 COUNCIL MEMBER BREWER: Why is it going down?

22 ANDREA MCGILL: That's due to the PEG.

23 COUNCIL MEMBER BREWER: Due to the PEG?

24 JUANITA HOLMES: Right but it's technically we
25 still have funding. I have intra-city funding that

1 we - \$6.3 million that I plug right back into that.
2 So, we're not losing any money, any funding for
3 programs. I'm not allowing that to happen. There's
4 money there. The state funding as well.
5

6 COUNCIL MEMBER BREWER: Okay. Number two,
7 recidivism. What is your recidivism rate? Maybe you
8 did that earlier, I'm sorry.

9 JUANITA HOLMES: Right, no we didn't because you
10 know I walked in the door of probation and there was
11 no true source of data. Now we have one. So, the
12 recidivism rate for -

13 COUNCIL MEMBER BREWER: Maybe for young and for
14 adult -

15 JUANITA HOLMES: 27 percent and I believe adults
16 are 30 percent.

17 ANDREA MCGILL: 29.

18 JUANITA HOLMES: 29 percent and 30 percent.

19 COUNCIL MEMBER BREWER: And for adults? Okay and
20 uhm, my question is, two other questions. One, I am
21 a big supporter of the residents of NYCHA and I feel
22 like NYCHA does not provide programs that would
23 enable people not to end up in your system or anybody
24 else's system. So, my question is, what is the
25

1
2 percentage if you know of your caseload that is a
3 resident of NYCHA. Do you have that number?

4 JUANITA HOLMES: I thought you had that, NYCHA
5 residents? I'll get it. I'll make sure I get it
6 back to you because we have looked at that because I
7 wanted to look at it. I know a lot of the map
8 locations have some programs that are going on and I
9 believe it used to be -

10 COUNCIL MEMBER BREWER: I know map very well.

11 JUANITA HOLMES: Right, so it used to be about 16
12 maps. What is it 30 something now I think.

13 COUNCIL MEMBER BREWER: Map has its challenges,
14 however. Okay, I mean I know map very well. The
15 issue for me is NYCHA needs support. They need their
16 community centers to be open more often. They need,
17 if it's not map, something else etc.. But I guess my
18 question is, I don't know what your percentage is. I
19 was just wondering what it is for NYCHA because if
20 it's fairly high, which I assume it is. I don't know
21 that then why are we not doing more at NYCHA, not so
22 they don't end up in your system. That's my
23 question. Do you work with NYCHA to say NYCHA; I
24 scream and yell about this all the time.

1
2 JUANITA HOLMES: A lot of our NeON centers are
3 right there in those locations. So, we have the 7
4 NeON locations open to the community. That's why
5 when Next Steps was cancelled, we plug most of the
6 children right into the Arches, which was not being
7 you know, it didn't have enough clients attending it.
8 So, there was plenty of space in Arches which is
9 right there but also about seven NeON centers are in
10 those specific areas.

11 COUNCIL MEMBER BREWER: Okay, so I guess maybe
12 not now but I'd like to get a breakdown.

13 ROBERT MALDONADO: We do have a program right now
14 where our clients are run through a service provider
15 that then provides workforce -

16 COUNCIL MEMBER BREWER: At NYCHA.

17 ROBERT MALDONADO: At NYCHA.

18 COUNCIL MEMBER BREWER: Okay, but that's one. We
19 got about 400,000 residents or 600,000, depending
20 whose counting. What I'm saying is, are you working
21 with NYCHA to see if there are other places where you
22 can provide programs, they can programs? I can't get
23 the city administration to say more support for
24 NYCHA.

1
2 JUANITA HOLMES: We will, I will definitely
3 Council Member, absolutely look into it and get back
4 to you and if we're not, we will but absolutely.

5 COUNCIL MEMBER BREWER: I'm sure you're not.
6 That's what I'm sure of.

7 JUANITA HOLMES: We'll make sure of it.

8 COUNCIL MEMBER BREWER: Okay and finally, uhm,
9 new needs. What are your new needs?

10 JUANITA HOLMES: People.

11 COUNCIL MEMBER BREWER: No, I mean, OMB never
12 wants to hear anybody's new needs.

13 JUANITA HOLMES: So, my new needs, so my new
14 needs. If you look at staffing, and naturally I
15 think we're at 423 probation officers. Our peak year
16 was 694 officers for total and that was in 2019. So,
17 we're down to 423. 175 SBO's. We do currently have
18 a class going in the next couple of months. I just
19 submitted to OMB two PARs. One I believe is for 65
20 hirings and another for 50 and I'll be submitting
21 more. We need more people. The caseload has
22 increased. You're managing anywhere from 40 plus
23 cases per probation officer. I don't want it to
24 become where it's check the box for referral. Check
25 the box. We want real management. You need people,

1
2 so I definitely need people in order to be effective
3 in that and more programs. We're looking, we have a
4 lot of programs that we kind of farm out.

5 COUNCIL MEMBER BREWER: What would you like to
6 get the recidivism down to? Obviously zero.

7 JUANITA HOLMES: Yes.

8 COUNCIL MEMBER BREWER: I know but what -

9 JUANITA HOLMES: And we finally, I had that put
10 on the PMMR so we could have some real goals to
11 reduce recidivism. You know, like you said, I would
12 love to have it at zero. I just want to be
13 realistic. Hopefully we can do a 50 percent
14 recidivism but you know naturally that's identifying
15 the client needs. There's a lot of restructuring
16 going on like I said with the surveys. They get real
17 data and Councilwoman Stevens; I'll get back to you
18 but these are things we just implemented. We had to
19 have a different think tank and come to the table.
20 How are we going to keep people out of the criminal
21 system?

22 COUNCIL MEMBER BREWER: Well, we all want that
23 but we need more support for in terms of programming
24 in addition to officers.

25 JUANITA HOLMES: We do.

1
2 COUNCIL MEMBER BREWER: Thank you Chair. I could
3 keep going but thank you.

4 CHAIRPERSON NURSE: Thank you Council Member
5 Brewer. Okay so we have one more question. Okay
6 there was a question from Council Member Abreu on
7 what is the cost of the Next Steps program?

8 JUANITA HOLMES: \$2.5 million.

9 CHAIRPERSON NURSE: \$2.5 million. Okay, uhm, I'm
10 going to let Council Member Stevens go for one other
11 question and then I think we're going to take a break
12 and transition.

13 COUNCIL MEMBER STEVENS: Uhm, I just had a
14 question just around uhm I know you kind of like
15 highlighted your partnership and work that you've
16 been doing with like DOE, NYPD but what about other
17 agencies?

18 JUANITA HOLMES: We are, DYCD.

19 COUNCIL MEMBER STEVENS: I know but what does
20 that look like and tell me what does that look like?

21 JUANITA HOLMES: So, what happens is uh,
22 naturally DYCD has over 900 programs.

23 COUNCIL MEMBER STEVENS: I'm aware.

24 JUANITA HOLMES: So, that's what we're plugging
25 into. So, we're doing -

1
2 COUNCIL MEMBER STEVENS: But what does that look
3 like?

4 JUANITA HOLMES: That just looks like seeing what
5 they have that fits our clients needs. So, naturally
6 by surveying the clients, what is it that you're -

7 COUNCIL MEMBER STEVENS: How many young people
8 that you have in your programs that are also in some
9 of the DYCD programs? Do you have the overlapping of
10 the programs?

11 JUANITA HOLMES: We just, right, but we just, we
12 just implemented this. So, as a result of such, I
13 spoke with Keith Howard. Keith Howards team did a
14 whole presentation on what programs they have
15 available. So, as a result of such, we're looking
16 into these programs to see that what we can segway
17 into instead of trying to recreate the wheel.

18 COUNCIL MEMBER STEVENS: But that's not what I'm
19 asking you. I'm asking, so let me finish the
20 question so you can give me the answer that I'm
21 looking for. I'm asking you, so how many young
22 people that are on probation that are in some of
23 those programs? How many young people who are also
24 ACS, in ACS custody and have different those cases
25

1
2 that are also on probation? Do you have those
3 numbers?

4 JUANITA HOLMES: Do you have those numbers Matt
5 Granoff?

6 COUNCIL MEMBER STEVENS: Like, I'm just trying to
7 see what's the overlap here because so often a lot of
8 these kids are in all of these programs and figuring
9 out how are we communicating all these different
10 things and having holistic plans opposed to it.
11 Having separate plans. So, that's why I'm asking
12 these questions. Not just saying, how are you
13 plugging the kids in the programs because I see
14 these. So, if you don't have that, I would love to
15 see how we can start working on that because I did
16 ask this question before. This isn't a new question,
17 I asked this question when you first got here when we
18 had a joint hearing with Criminal Justice and ACS and
19 DYCD and I'm just asking this because this is a
20 follow up question from almost a year ago, when I
21 asked this before. And so, I'm asking, do we now
22 have the overlapping number of young people that's
23 being served in all these different programs?

24 JUANITA HOLMES: So, I apologize because I don't
25 remember the question from a year ago and my

1
2 apologies that I didn't because I try and remember
3 what's said here.

4 COUNCIL MEMBER STEVENS: No [INAUDIBLE 01:36:18]

5 JUANITA HOLMES: With that being said, that's
6 going to be part of what he's doing now while he's
7 looking into it. Also, assessing whose already in
8 some of those programs. We do have the summer youth
9 employment that we work with them with. How many
10 young people did we have last year? Summer Youth
11 employees? 600? About 600 and now currently they've
12 registered, how many do we have registered now?
13 About 500, so they're still registering. So that we
14 did through DYCD to make sure they have employment
15 but that's part of his assessment that he's doing
16 now. They just did probably about a month and a half
17 ago, the breakdown of all their programs for us.

18 COUNCIL MEMBER STEVENS: Well, that's
19 disappointing because and I say it's disappointing in
20 the fact that I've been here for three years now and
21 this is the same thing I've been saying for the last
22 three years. It is unacceptable that we have all of
23 these different programs, serving the same young
24 people and we're not keeping track of how they are
25 going into all these programs in the city. And this

1
2 is not just on you, this is all the programs that
3 serve our young people, including DOE, DYCD and ACS
4 and I know it's not happening because I talk to
5 everybody.

6 JUANITA HOLMES: But I've been saying the same
7 thing and that what they know and that what is -.
8 That's why we started making an assessment. I walked
9 in the door saying the same thing. Why are we trying
10 to create, find new nonprofits when we have
11 everything we need right here? So, that's what it's
12 been. I agree with you wholeheartedly,
13 wholeheartedly.

14 COUNCIL MEMBER STEVENS: Listen again, I've been
15 here three years and it still hasn't happened and
16 I've offered up my services to be supportive of
17 making these things happen and saying how do we work
18 together but it clearly is not resonating because
19 three years later, we still don't know and that's
20 really disappointing.

21 JUANITA HOLMES: But I can assure you, I'm here a
22 year, I think in a couple of days. The next time
23 we're back here, we're going to have to - before
24 we're back here.

1
2 COUNCIL MEMBER STEVENS: Yeah you could
3 definitely reach out to me before.

4 JUANITA HOLMES: I'll reach out to you and we'll
5 have it in place. I can assure you that.

6 COUNCIL MEMBER STEVENS: Thank you.

7 CHAIRPERSON NURSE: Thank you Council Member
8 Stevens. I mean I think uhm, I think just the big
9 thing here is that we're relying on these programs.
10 We're relying on the Department of Probation to tell
11 us what is needed to scale up these programs. The
12 providers know what's needed. They are ready,
13 willing and able. They want to scale up. They want
14 to bring in more staff. They want to offer more
15 services. They want to be able to recruit and retain
16 staff at the right salary rates. So, you know folks
17 don't have burnout because we're taking on hard work.
18 And so, we really need the budget to reflect that
19 growth and work that we need from these programs in
20 order to reduce the population at Rikers and prevent
21 people from going there in the first place.

22 Like this is the biggest role. This is the key
23 strategy and the key pillar, so you know I'm hoping
24 that when we're back here in April, we can see
25 something different.

1
2 JUANITA HOLMES: And mental health. So, mental
3 health is key. That's what we're looking at. What
4 was in place with probation before, they weren't
5 doing the work. They were doing referrals. There
6 was some clause where they were hired to do the work
7 and couldn't do the work. Whatever it is, that's
8 what I'm looking for right now.

9 CHAIRPERSON NURSE: I'm not sure what you mean by
10 that, so it would be helpful if to say that, to have
11 some more detail provided because those are big
12 statements. And so, from my understanding, as you
13 just mentioned, we know who the people are who do
14 this work. We know who the providers are. They're
15 going to be here all day testifying. So, it's not
16 like we can't have these conversations and they are
17 like I said, wanting to do the work. I can't imagine
18 that they're not delivering. I can't imagine that
19 they don't have metrics of success that are beyond
20 just attendance. I think some of this stuff is
21 beyond what you can put in numbers. You know, you're
22 trying to change people's lives and set them up for
23 success and put them into transformational
24 opportunities and that's not always something you can
25 capture in a number.

1
2 JUANITA HOLMES: And we still have those vendors
3 working with us with the exception of one. They're
4 in all the other programs and when I tell you, the
5 evaluations that we have received and you could speak
6 to it if you want are tremendous now. We've met with
7 all of them. They agree with us. We see
8 certifications. We're seeing jobs. It really is a
9 complete turn around on what we're seeing with them.
10 So, those next step providers with the exception of
11 one, are still in DOP programs and you do see a
12 tremendous difference.

13 CHAIRPERSON NURSE: I think we would just like to
14 see an increase to their support. Okay, I think
15 we're going to take a break. Thank you so much
16 Commissioner for being here.

17 JUANITA HOLMES: Thank you.

18 CHAIRPERSON NURSE: Thanks everyone else for
19 being here. We're going to take a break.

20 JUANITA HOLMES: Thank you.

21 [01:40:57] -[01:57:41].

22 CHAIRPERSON NURSE: Alright. Welcome back.

23 Panel Two. Just wanted to say Commissioner,
24 congratulations. I said this earlier but it was just
25 a pleasure to make some time earlier this week to

1
2 talk with you, introduce ourselves and hear about you
3 know who you are and where you're coming from and how
4 you come to this work and I'm really looking forward
5 to having a productive working relationship as we
6 engage. So, thank you for being here and
7 congratulations on being Commissioner for this first
8 hearing.

9 I'm going to turn it over next to our Speaker
10 Adrienne Adams who will make some remarks.

11 SPEAKER ADRIENNE ADAMS: Thank you very much
12 Madam Chair and welcome to all of you. I thank our
13 Chair for leading today's preliminary budget hearing
14 for the Committee on Criminal Justice today and as
15 the Chair just said, I would also like to
16 congratulate you. You are our new Department of
17 Correction Commissioner Lynelle Maginley-Liddie on
18 your new role and welcome you to Council Chambers
19 today.

20 I hope that under your leadership, the Department
21 will chart a course towards a safer environment on
22 Rikers for both staff and detainees alike and that
23 your team will be collaborative with stakeholders and
24 oversight entities. I look forward to hearing about
25 your vision to change the current culture and

1
2 practices to address the humanitarian crisis in our
3 city jails. We're going to examine the Department of
4 Corrections \$105 billion fiscal year 2025 preliminary
5 budget which is \$120.7 million less than the adopted
6 fiscal year 2024 budget and \$165.7 million less than
7 the current fiscal 2024 budget. The Department of
8 Correction has a critical responsibility to ensure
9 the care and safety of the people in its care. As
10 the vast majority await trial and provide a path to
11 successful reentry into communities. Yet, reports
12 show that the DOC has been falling short of its core
13 mission with high rates of violence against
14 detainees, staff, unsanitary settings, inappropriate
15 uses of force, staff management issues and more.

16 When conditions like this exist, jail staff are
17 less safe and too many people in custody are released
18 in a worse condition by the time they return, leave
19 and return to their communities. This cycle of harm
20 does not serve our city or its residents and
21 undermines public safety. Last fall, I called for
22 the reappointment of the Independent Rikers
23 Commission to help get the plan to close Rikers on
24 track and improve public safety in our city.

1
2 The goal to make this a reality is mandated by
3 law remains as urgent and critical as ever and the
4 mission this Council is still committed to. It
5 requires active steps by the Administration to
6 address mental health diversion and treatment.
7 Pretrial and reentry services and case processing
8 delays with stakeholders across the criminal legal
9 system, while fulfilling the dozens of obligations
10 that are part of the points of agreement to close
11 Rikers.

12 The delays and lack of attention to these
13 necessary steps must be resolved and I look forward
14 to hearing about the steps that the DOC is taking to
15 remedy this. Thank you very much for being here once
16 again and I turn it back over to our Chair.

17 CHAIRPERSON NURSE: Thank you Madam Speaker. I
18 also just want to publicly thank you for appointing
19 me and trusting me to this Committee. I know this is
20 a very, very personal and top priority issue for you.

21 Okay, I'm going to turn it over to Committee
22 Counsel.

23 COMMITTEE COUNSEL: Thank you Madam Chair. I'll
24 swear in this next panel of Administration witnesses
25 with us today. From the Department of Correction, we

1
2 have Commissioner Maginley-Liddie, Nancy Savasta,
3 Francis Torres, Sherrie Rembert, Mala Srinivasan,
4 James Saunders, Patrick Benn, Ronald Edwards,
5 Jeremiah Johnson, Alexandria Maldonado and Matthew
6 Passarelli.

7 If you can all each raise your right hands. Do
8 you affirm to tell the truth, the whole truth and
9 nothing but the truth before this Committee and
10 respond honestly to Council Member questions? Noting
11 for the record that all witness answered in the
12 affirmative. You may begin your testimony.

13 Good afternoon Chair Nurse, Speaker, and members
14 of the Committee on Criminal Justice. I am Lynelle
15 Maginley-Liddie, Commissioner of the New York City
16 Department of Correction. My colleagues and I are
17 here to discuss the Preliminary Budget for Fiscal
18 Year 2025 and my vision for the future for this
19 agency.

20 Today, I am joining you as the Department's
21 newest Commissioner and I am proud to deliver my
22 testimony alongside our First Deputy Commissioner
23 Francis Torres, Acting General Counsel, Nancy
24 Savasta, Deputy Commissioner of Budget and Finance
25 Mala Srinivasan, Assistant Chief Sherrie Rembert,

1
2 Assistant Commissioner Alex Maldonado, and other
3 members of my team. Although I am new to this role,
4 I'm not new to the Department. I have served DOC for
5 over eight years. During this time, I've become
6 familiar with our policies, our legal matters, and
7 our people. As Commissioner, my unwavering
8 commitment to this agency has only deepened and I
9 consider it a privilege to lead the men and women of
10 the Department of Correction.

11 Corrections is a law enforcement job, but it also
12 involves human services. That is how I have always
13 seen my career and I encourage our staff to think
14 about their roles. As many of you know, I joined
15 this agency in 2015 with the goal of giving back to a
16 city that has given so much to me. I am proud to
17 have been granted positions of progressive
18 responsibility, including Deputy General Counsel,
19 Acting Senior Deputy Commissioner and Chief Diversity
20 Officer, and First Deputy Commissioner. But I am
21 more proud of the opportunity to keep serving the DOC
22 community and continuing to advocate for better
23 treatment for everyone working and living in our
24 jails.

1
2 I want to be clear with everyone here today that
3 people who work at DOC are committed to criminal
4 justice reform. They want to see better, safer jails
5 for themselves, their colleagues, and the people in
6 our care. However, gaining their buy-in on needed
7 reforms require that we treat them with the same
8 empathy and respect we expect to be treated with.
9 With our support behind them, they will in turn
10 provide the same level of empathy and respect to
11 those in our care. Every day, I am motivated by the
12 dedication of our workforce and their willingness to
13 engage in the difficult work of change. I see the
14 stories that go untold of the positive work they do
15 in the jail each and every day, and I am confident
16 that their passion for their work will continue to be
17 the vessel for enduring change.

18 Today, I will provide you with insight on how my
19 team and I are working to cultivate that passion and
20 how we are providing a greater voice and additional
21 support to people in our care. I will also give you
22 an overview of the Department's Fiscal Year 2025
23 Preliminary Budget.

24 I am well aware that in order to effectuate
25 change in our jails, we must first be honest about

1 the state of our jails. Our facilities are old and
2 outdated. These structures have inadequate lines of
3 sight, and the crumbling infrastructure is too easily
4 dismantled by people with ill intent. Complicating
5 matters, our population, which fell to approximately
6 4,000 at the height of the pandemic, has risen to an
7 average of approximately 6,135 per day. Of those
8 individuals, over 500 have been detained for longer
9 than two years and over 20 percent are being held on
10 a violent felony charge. These challenges are
11 further compounded by high levels of workforce
12 attrition. Over the past four years, the Department
13 has attritted nearly 3,500 uniformed staff. This
14 decline in staff plays into our difficulty in
15 managing a highly concentrated violent population and
16 has contributed to a demoralization among our
17 workforce. This, in turn, contributes to a greater
18 sense of frustration among those in our care.

19
20 These challenges are not new, but to resolve
21 them, we owe it ourselves to take a different
22 approach. Under my direction, we will face these
23 challenges by treating the source and not the
24 symptom. We are focused on assessing and meeting our
25 populations basic needs and actively listening to

1
2 them to resolve conflicts. We are taking the same
3 approach with our staff by providing enhanced
4 training and greater on the ground support.

5 As Commissioner, I firmly believe that to lead
6 the jails, you need to tour the jails. To that end,
7 I've instituted a mandatory touring schedule for all
8 uniformed and non-uniformed leadership. On these
9 tours, my team is expected to speak with staff and
10 people in custody, address any issues they see in
11 real time and report back to me on their positive
12 observations as well as areas of concern. I hold
13 myself to the same standard and continue to tour our
14 facilities as well.

15 Regular touring is critical for our success. If
16 we are to uphold our commitment to creating a safer,
17 more humane environment, then we must personally know
18 the conditions of our jails. As leaders, we must
19 listen, and we must develop solutions to problems
20 informed by those on the ground. Moreover, we know
21 that among the best paths to violence reduction is
22 ensuring that the people in our care have what they
23 are entitled to and what they deserve. Regular
24 touring by leadership ensures that an extra pair of
25

1 hands and eyes are present to get people what they
2 need.

3
4 I have also instituted focus groups with
5 uniformed and non-uniformed staff as well as people
6 in custody. The goal of these focus groups is to
7 provide a space for everyone to voice their honest
8 feedback. We've collected input on everything from
9 safety and jail conditions to wellness opportunities
10 and the need for more programming. So far, there
11 have been over 20 focus groups scheduled across
12 multiple facilities with more sessions to be
13 scheduled. The feedback offered in these sessions
14 will be compiled, shared with all members of
15 leadership, and used to inform decision making in the
16 coming year. I am committed to returning to these
17 focus groups to hear their thoughts on our efforts to
18 mitigate the issues they raised.

19 As much as I believe in the work we are doing to
20 change the culture within our jails and enhance
21 safety for everyone, I must emphasize that to truly
22 change this department, we cannot do it alone. I
23 applaud the work that our Division of Programs and
24 Community Partnerships has done to provide one on one
25 sessions and group-based facilitation programs in the

1
2 wake of a \$17 million budget gut to external
3 programming. I am also thankful to the Fortune
4 Society and Osborne Association, who have continued
5 to provide discharge planning services to the
6 population without any additional city funding. I am
7 equally grateful to the existing providers under the
8 Mayor's Office of Criminal Justices contract for
9 their work. However, an abundance of meaningful
10 programs and services is critical to reducing
11 idleness, and in turn, violence. I know this based on
12 my years at the Department and it has been echoed in
13 the focus group sessions we have held. For that
14 reason, I am thrilled to welcome external program
15 providers back into our facilities and I'm extremely
16 thankful that the Mayor has been able to restore \$14
17 million in funding to support enhanced programming
18 initiatives for people in custody. These funds will
19 target new needs and will include robust transitional
20 planning, substance misuse programming, supplemental
21 educational programming, trauma informed programming
22 and transportation for those being reintegrated into
23 our communities.

24 I also want to highlight that the Department
25 recently received a grant for \$180,000 from the New

1
2 York State Office of Mental Health Suicide Prevention
3 Center to expand wellness program for staff. Our
4 CARE unit will spearhead the grant, and I anticipate
5 that it will support our staff in managing the
6 difficulties of this work. This initiative is
7 personal for me because I know the trauma our staff
8 experience on a daily basis. I also know that
9 supporting our staff's mental health will help them
10 show up stronger for the people in our care.

11 Now, I will turn to the Fiscal Year 2025
12 Preliminary Budget. The Department's Fiscal Year
13 Budget is \$1.05 billion, which is \$165.7 million
14 decrease from the previous fiscal year. The vast
15 majority of our budget, 84 percent, is allocated for
16 Personal Services, and 16 percent for Other than
17 Personal Services. This budget decrease was achieved
18 through: Savings due to operating below the
19 authorized headcount. \$30.9 million was saved in
20 Fiscal Year '24. We are projected to save \$30.4
21 million in Fiscal Year '25. \$49.4 million in Fiscal
22 year '26 and \$49.9 million in Fiscal Year '27 by
23 continuing to remain below our budgeted headcount for
24 both civilian and uniformed staff.

1
2 Two, a reduction in overtime. The Department
3 saved \$58.1 million in Fiscal Year '24 through
4 uniformed and civilian overtime reduction efforts.

5 And three, several collective bargaining
6 adjustments, which resulted in an additional \$7.5
7 million in Fiscal Year '24, \$11.6 million in Fiscal
8 Year '25, \$16.2 million in Fiscal Year '26, \$20.8
9 million in Fiscal Year '27 and \$22.8 million in
10 Fiscal Year '28.

11 The Fiscal Year Preliminary Capital Budget and
12 Commitment Plan totals \$10.8 billion, which covers
13 Fiscal Years 2024 through 2033. As of the Fiscal
14 Year Preliminary Budget, the majority of capital
15 funding is tied to the borough-based jail programs,
16 which totals \$8.7 billion over the ten-year plan and
17 is allocated as follows: Brooklyn Facility \$2.8
18 billion, Manhattan Facility \$2 billion, Bronx
19 Facility \$1.9 billion, Queens Facility \$1.9 billion
20 and the Queens Parking Garage \$10.7 million.

21 We continue to work diligently to attract and
22 retain civilian and uniformed staff. The Departments
23 authorized headcount remains effectively unchanged
24 from the Adopted Budget totaling 8,788. 7,060
25 uniformed positions and 1,728 civilian positions.

1
2 Our actual in staffing levels continue to remain well
3 below our authorized headcount and the Department
4 intends to remain aggressive with advertising and
5 marketing strategies to promote recruitment.

6 In closing, I have assumed the role of
7 Commissioner with a deep commitment to the men and
8 women of DOC, and to the people we serve. I
9 recognize that a positive working relationship with
10 our oversight bodies including the Federal Monitor,
11 the Board of Correction and the City Council, as well
12 as with our partners and stakeholders is foundational
13 to this work.

14 In the three months that I've been Commissioner,
15 we have enacted the changes needed to clear a
16 contempt motion and restore the Monitors faith in the
17 Departments willingness to be a collaborative
18 partner. I promise you this is just the beginning.
19 I look forward to a partnership with the Council that
20 focuses on thoughtful, meaningful, expeditious
21 reforms. Achieving a safe, secure, and a humane
22 environment for those who work and live in DOC
23 facilities is my ultimate priority. Moreover, I
24 understand that this is a job of service and that
25

1
2 accepting our present challenges with humility is
3 what will lead us to create lasting solutions.

4 The Departments issues are complex. Nothing will
5 be easy but I will not entertain failure. If I
6 didn't think this city could make the necessary
7 reforms, if I didn't think we could create a safe and
8 humane environment for both staff and everyone in our
9 care, I would not have committed myself to this work.

10 I look forward to working with the Council toward
11 our shared priorities and reforms. Thank you for the
12 opportunity to speak today. My team and I are
13 available to answer any of your questions.

14 CHAIRPERSON NURSE: Thank you so much
15 Commissioner. We're going to now turn it to our
16 Speaker for any opening questions.

17 SPEAKER ADRIENNE ADAMS: Thank you Madam Chair.
18 Once again, welcome Commissioner. Dare I say that it
19 feels that the DOC finally got something right in
20 appointing you to this position.

21 This is your first preliminary budget. We
22 welcome you again. The Council was heartened to read
23 in a February 26 status update that the monitoring
24 team observed an immediate change in approach and
25 dynamic under your leadership and that the department

1
2 has made important strides in returning to a more
3 collaborative, we love that word, and transparent, we
4 love that word even more, relationship with the
5 Monitoring Team. However, the Council continues to
6 share the grave concern about conditions in the jail.
7 As Commissioner, you're responsible for marshaling
8 the departments significant appropriation of taxpayer
9 dollars. Can you describe your vision for
10 prioritizing the departments budgetary resources to
11 address the issues of staff management, violence and
12 safety, and transitioning the department to borough-
13 based jails in the coming fiscal years?

14 LYNELLE MAGINLEY-LIDDIE: Thank you for that
15 question. So, like I said initially, the work is we
16 understand that there are challenges that exist but
17 we are working collaboratively with the monitor to
18 ensure that we are addressing those challenges. With
19 respect to the staffing, I will have Chief Rembert go
20 into a little more detail on the staffing. But what
21 I can tell you in the last four years, we have
22 attritted approximately 3,400 staff members,
23 uniformed staff members and we're working to actively
24 deploy our staff to ensure that they are deployed on
25 posts that are needed within the jails. We've

1
2 created a new unit called the smart unit, which
3 manages deployment throughout the facilities to
4 ensuring that we are not – people aren't working
5 triple shifts. We're minimizing that, in addition to
6 making sure people are efficiently deployed to posts.

7 With respect to staffing, I'm just going to turn
8 it over to Chief Rembert just to give a little bit
9 more context on the staffing and all that we're doing
10 right now with respect to staffing.

11 SHERRIE REMBERT: Good morning City Council
12 Board. My name is Sherrie Rembert, Assistant Chief
13 of the New York City Department of Corrections. Our
14 agency has a multipronged approach to reducing
15 overtime expenditures. The first is embracing
16 technology. Through the use of electronic scheduling
17 system, we embarked on deploying available staff to
18 our facility in real time so we can operate
19 efficiently on a daily basis.

20 The scheduling management and the redeployment
21 team, known as the smart team unit, actively manages
22 the scheduling of our staff, and a redeployment of
23 our officers to balance our facilities. The
24 department has been redeploying available staff on a
25 consistent basis to further enhance our reduction of

1
2 over time. Once every three weeks as well as
3 deploying our DTY staff, twice a week.

4 Office of Administration is analyzing staffing
5 daily to ensure squads are balanced within the
6 facilities. Balancing squads help minimize overtime
7 by ensuring the workloads are equally distributed and
8 better resources utilization and cost savings for our
9 agency. We will continue to train our facility
10 management team on the intricate ways of utilizing
11 the electronic scheduling system as currently
12 designed and we also have taken a proactive approach
13 and educating our management team to identify posts
14 in real time that can be reallocated while supporting
15 our security permanents to reduce overtime.

16 The second problem is addressing absenteeism. We
17 have been diligently working to reduce the number of
18 staff out sick so that more staff are available to
19 work in the facilities. Since January 2022, we have
20 reduced staff absenteeism by 80 percent due to sick
21 leave. Additionally, we have been addressing the
22 personal emergency leave as well as the FMLA process
23 that at times have created undue hardship to our
24 agency. The last promised recruitment as of – our
25 recruitment because we attritted around 1,900 staff

1
2 members since calendar year '22. We have also lost
3 staff members prior to that. At that rate of
4 attrition that we have lost, it's not in cadence with
5 our ability to recruit or hire or retain as staff
6 members are eligible for retirement daily. The
7 reality is that recruiting, hiring, retaining are
8 competing factors, as this is not unique to the New
9 York City. In fact Corrections and Law Enforcement
10 Agencies globally experience the impact of retention.
11 As such we will continue to coordinate with city
12 leadership and partnering agencies through Rikers
13 Island Taskforce to increase the reach of recruiting
14 efforts and problem-solving barriers through hiring.

15 So far in calendar year of 2024, 74 officers have
16 graduated from the academy and successfully joined
17 the ranks of Correction Officers. On Thursday, March
18 7th, we had a class of 82 starting the academy
19 training. Lastly, it's important to recognize that
20 the department has completely neglected the
21 organization health for decades. We cannot slip our
22 way out of this. We must also think about how to
23 build and sustain a workforce that is trained in
24 Correction best practices that has ample professional
25 development opportunities that is professional and

1
2 accountable and that receives the supported needed to
3 do their jobs and remain in the Department of
4 Corrections.

5 LYNELLE MAGINLEY-LIDDIE: Thank you Chief. With
6 respect to violence reduction, we know that's an
7 issue. So, one of the initiatives that I started
8 uhm, was touring. Having everyone, all of the
9 uniform and non-uniform leadership, they are supposed
10 to be touring the jails every other week and there's
11 a set schedule where people are touring and doing
12 meaningful tours. With more eyes and more ears and
13 more hands onboard, you are able to see what's
14 happening in real time. If there are any issues
15 happening in real time, you're addressing it in real
16 time.

17 One of the other things that's been really a
18 challenges for us is the infrastructure, right? We
19 have old jails and we need to make repairs to those
20 jails but we are also in a place where we can't
21 utilize capital funding to do that. So, we're
22 constantly making changes and shifts to ensure that
23 we are meeting the standards and in terms of making
24 repairs in our jails but one of the things that's
25 really critical for this department and something

1
2 that I've noted upon assuming this role is
3 programming is essential right? Programming is
4 essential to ensuring that people aren't idle and
5 that we are providing them with a tool that's
6 critical for their success. And that's critical for
7 them once they leave our care.

8 I have DC Torres; DC Torres can talk a little bit
9 more about programming initiative that we have
10 underway as a result of the new funding and all the
11 programs that we're going to be rolling out to the
12 individuals in our care.

13 FRANCIS TORRES: Good afternoon Madam Chair. My
14 name is Francis Torres. I am the First Deputy
15 Commissioner for the New York City Department of
16 Correction. The Commissioner has already shared with
17 you what it is that is needed as part of our violence
18 reduction plan. Last year, I found myself in these
19 chambers because we needed to go and explain to the
20 Council Members how the Department was to do
21 insourcing as a result of the loss of the \$17 million
22 that were used for jail based targeted approach.
23 During that conversation, we laid out for the Council
24 what it was that our counseling staff primarily
25

1 assigned to the division of programs and community
2 partnerships, we're going to do.

3
4 Know that the Division of Programs actually
5 mapped out a plan of action to absorb the insourcing.
6 We began by having conversations with Local 371. We
7 also had large meetings with our Associate
8 Correctional Counselors Level 1 and 2, as well as our
9 program counselors. Those civil service staff
10 members were the ones primarily becoming responsible
11 for insourcing. Insourcing being defined as the
12 provision of one on ones and rule facilitations with
13 a robust evidence-based curricula, as well as best
14 practices. Once we did that as a division, we mapped
15 out a training component, meaning they had to be done
16 in different sessions combined of refresher trainings
17 with new trainings.

18 Let me just share with you the following: Staff
19 members assigned to the counseling unit had done one
20 and one and group facilitation prior to jail based.
21 In fact, they had done so in 2015. So, we needed to
22 bring them back to what they used to do. Once we did
23 the training sessions and we divided training in two
24 different sets. Training sessions that will go from
25

1
2 July of last year through December of last year and
3 additional sessions that would be done this year.

4 In doing so, we laid out a complete schedule on
5 how counselors would be assigned and in fact, we
6 deployed the counselors based on the housing areas
7 needs. I got to tell you that the Division of
8 Programs has done a phenomenal job. And what is it
9 that he has done for us as a department? In having
10 our staff members provide and facilitate one on ones
11 and groups, they are on the ground and they're able
12 to listen to the needs of staff as well as the
13 population.

14 And so, the reality is that we're in constant
15 evolution and we're always listening and trying to
16 determine what is further needed by our population.
17 Those who we are assigned their care for. Let me
18 pause for a minute and share the following with you.
19 Insourcing and the job being done by our counseling
20 division is only one part of the programming that is
21 done and afforded to those persons under our care.
22 There are other providers that are still on the
23 ground.

24 Contracted providers by MOCJ, we have at least 15
25 contracted providers that are for enrichment

1 programming and I'm glad to share with you that the
2 division of programs has onboarded three additional
3 contracted providers. As part of workforce
4 development, we have a memorandum of understanding
5 with the Department of Education. That memorandum of
6 understanding allows our department to afford
7 certificates and certifications in different job
8 market opportunities.
9

10 But let's go to a question that I'm sure will
11 rise and I would like to be proactive and share the
12 following. There has been an announcement made of
13 \$14 million coming to our department, thanks to the
14 support of the administration.

15 In receiving those \$14 million, insourcing will
16 remain with the members of the division of programs
17 and community partnerships. This new funding that is
18 coming to us will allow us to focus on very specific
19 programming needs that we have identified. We will
20 be able to create robust transitional planning. We
21 will be able to incorporate substance misuse
22 programming. We will develop supplemental
23 educational programming. We will also infuse our
24 curriculum by having trauma informed programming and
25 lastly, offer transportation that will guarantee the

1 transition of those being discharged into our
2 communities directly to community-based organizations
3 and other services needed within the community.

4 Thank you.

5
6 SPEAKER ADRIENNE ADAMS: Thank you. All of that
7 sounds very promising, very promising to me. In
8 taking a look at some of the programming that you
9 just mentioned and the work that's been done, the
10 sessions that you've had, and even some of the
11 programs to come and establishing those programs.

12 Can you give us some examples of some of the biggest
13 needs that you recognized within these sessions from
14 your population?

15 FRANCIS TORRES: Well, first of all with 7- thank
16 you so much Madam Speaker. With 70 percent of the
17 population assigned to our care, leaving our system
18 to return to the communities is really critical that
19 we afford robust transitional planning. To do so, we
20 need to expand the footprint that we currently have.

21 SPEAKER ADRIENNE ADAMS: Are these the results
22 that you're projecting or because my question was
23 specially, what came from the population?

24 FRANCIS TORRES: Well, part of the population has
25 asked for transitional planning. Thank you so much.

1
2 The population also has asked for additional
3 enrichment activities and services and I'm glad to
4 share with you a few examples. Prepandemic we used
5 to transport our persons in custody to other
6 facilities to conduct basketball tournaments.
7 Believe it or not, after a number of years, last year
8 we have been able to do so. We currently have
9 approximately five basketball teams that on a
10 frequency determined by our Division of Programs, as
11 well as security where able to do so.

12 We have increased our frequency on workforce
13 development courses. The population has brought to
14 our attention that they want to have a larger
15 frequency on how we offer our training. They want a
16 higher frequency on how we offer OSHA certification,
17 CPR and believe it or not, they want more barbershop
18 training. And so, as we listen to their needs and
19 their wants, we are quickly to turn around and
20 address it. We have onboarded more of additional
21 providers to target their needs. Thank you.

22 SPEAKER ADRIENNE ADAMS: Thank you. I'm going to
23 get back on track with the Commissioner. I
24 appreciated what you said very much. Thank you. In
25 looking at supervision and staff Commissioner. Uhm,

1 the Federal Monitor has indicated that a lack of
2 supervision and accountability between supervisory
3 ranks and frontline uniform officers can be linked to
4 many of the issues within the city's jails. The
5 preliminary plan includes 703 budgeted captain
6 positions yet only 546 were active as of January
7 2024. How can the department address issues with
8 frontline staff with so many vacancies in the captain
9 rank?
10

11 LYNELLE MAGINLEY-LIDDIE: So, that is, thank you
12 for that question. So, that is something that we are
13 continuing to evaluate in terms of promotions for
14 officers to the captains rank but one of the other
15 things that we are doing and we are going to be
16 rolling a robust captains training to ensure that our
17 captains understand the role of a supervisor.

18 That training has just – we had just – we
19 collaborated with the monitor on that training and
20 we've just received the training back from the
21 monitoring. That's something that we're going to be
22 rolling out very quickly. But what I can tell you
23 that staffing is a challenge. We are continuing to
24 ensure that people are touring as required. We are
25 looking at various things to ensure that we're all on

1 the same page. We have our Deputy Wardens and
2 Wardens. They're on the Island providing 24/7
3 coverage. That is something that we've developed at
4 a result of the Action Plan to ensure that there's
5 direct supervision for all of our staff. So no more
6 of the days where it's Monday through Friday. It's
7 all throughout 24/7 coverage and we'll continue to
8 work to address those gaps and ensure that we are
9 complying with our – the consent decree.

11 SPEAKER ADRIENNE ADAMS: Do you know the current
12 ratio of captains to officers right now?

13 LYNELLE MAGINLEY-LIDDIE: I don't have that
14 information right now but I can get it for you. I
15 can get it to you.

16 SPEAKER ADRIENNE ADAMS: Do you know what you
17 hope to have as far as that ratio?

18 LYNELLE MAGINLEY-LIDDIE: I don't have that
19 information right now.

20 SPEAKER ADRIENNE ADAMS: Okay, alright. Let's
21 take a look at for a minute one of the subjects of
22 the hour in that solitary confinement. Let's take a
23 look at that. Uhm, as of late, the Council has been
24 blamed for violence in the jail. We are blamed for
25 managing the jail which is something that we have no

1 control over managing the jail. We've even been
2 blamed for solitary confinement, edicts that haven't
3 even been put in place yet. So, I just wanted to get
4 that on the record. This Council does not have
5 anything to do with anything that has come before any
6 laws in place. Intro. 549 A to ban the use of
7 solitary confinement was passed by this body, just
8 passed by this body in December and won't be taking
9 effect until June.

11 Has the department made any alterations or plan
12 changes in policy to accommodate the new law?

13 LYNELLE MAGINLEY-LIDDIE: The department is
14 currently reviewing along with the Law Department,
15 the most recent guidance that we received from the
16 Federal Monitor. That is where we are at this point
17 and time and we will keep the Council apprised as to
18 next steps.

19 SPEAKER ADRIENNE ADAMS: Okay, great. In taking
20 a look at the borough-based jails. You referenced
21 that in your opening statement as well. The current
22 capital commitment plan shows very minimal changes
23 between fiscal year 2024 and fiscal year 2028.
24 Typically, this means little to no delays or cost
25 increases for capital projects, so can you explain

1
2 why there are virtually no changes in the capital
3 commitment plan? When we know that the borough-based
4 jails projects are delayed by over two years and the
5 Administration has estimated substantial increases in
6 costs due to the increased cost of labor and steel?

7 ALEXANDRIA MALDONADO: Good afternoon everyone.

8 My name is Alex Maldonado and I am the Assistant
9 Commissioner for Strategic Initiatives and I oversee
10 the borough-based jail program on behalf of the
11 department. What I can tell you about the funding
12 for the borough-based jail program, the Department of
13 Design and Construction controls the budget as well
14 as the schedule for the borough-based jail program.
15 You would not see that – you would have to ask them
16 more clearly where the funding and how we schedule it
17 progress.

18 SPEAKER ADRIENNE ADAMS: Would that question also
19 go to DDC as far as any updated commitments
20 pertaining to the executive plan?

21 ALEXANDRIA MALDONADO: Yes, that's right Ma'am.

22 SPEAKER ADRIENNE ADAMS: Okay, alright, uhm do we
23 know how the Administration is leveraging every tool
24 available to ensure that the borough-based jails

1 capital projects are delivered on time, on budget,
2 and in accordance with Local Law?

3 ALEXANDRIA MALDONADO: We are working tirelessly
4 I will assure you with our partner agencies.

5 SPEAKER ADRIENNE ADAMS: I believe you.

6 ALEXANDRIA MALDONADO: The Department of Design
7 and Construction, Correctional Health Services and
8 the Mayor's Office of Criminal Justice to ensure that
9 this program remains on track. You know we have
10 established an internal team, a transition team to
11 ensure that a seamless transition into our new
12 facilities.

13 SPEAKER ADRIENNE ADAMS: Okay, are designs
14 substantially complete for the Brooklyn Borough Jail?

15 ALEXANDRIA MALDONADO: We are in approximately 50
16 percent of design development for the Brooklyn
17 Facility. I believe you can see renderings online,
18 it's a beautiful building inside and out.

19 SPEAKER ADRIENNE ADAMS: That's good to hear.
20 Has the DOC done any staffing analysis for the jail,
21 based on those designs at all?

22 ALEXANDRIA MALDONADO: Now that we are at
23 approximately 50 percent of design development for
24 the Brooklyn Jail, we are at a comfortable place to
25

1 do a proper staffing analysis. Before, we were still
2 trying to figure out where program spaces were.
3 Where posts would be for example but we hope to
4 complete a staffing analysis within the next month or
5 so.
6

7 SPEAKER ADRIENNE ADAMS: Oh, that's a good
8 timeframe. Can you share that with the Council when
9 you get that?

10 ALEXANDRIA MALDONADO: Absolutely.

11 SPEAKER ADRIENNE ADAMS: Thank you very much.
12 Uhm, let's talk a little bit about transportation to
13 court then. A year ago, in this hearing
14 Commissioner, I did ask your predecessor about one of
15 DOC's core missions transporting people to court. We
16 were really pleased to see in the PMMR that you were
17 up to 98 percent on this. Are you aware that though
18 there has been a missed deadline currently, this
19 week, to report on court transportation stats?

20 LYNELLE MAGINLEY-LIDDIE: No, I'm not aware. We
21 will remedy that right away.

22 SPEAKER ADRIENNE ADAMS: Who's responsible for
23 that? Point them out. We want names.

24 LYNELLE MAGINLEY-LIDDIE: We will get that
25 information to you.

1
2 SPEAKER ADRIENNE ADAMS: Okay, alright. Uhm, I
3 just wanted to mention something also. In your
4 opening statement, you referenced violence in the
5 population numerous times.

6 LYNELLE MAGINLEY-LIDDIE: Right.

7 SPEAKER ADRIENNE ADAMS: I heard violent
8 population, percentage of violent population,
9 violence in the population but I didn't hear you
10 really, really reference the mental illness
11 percentages in your opening statement, even though we
12 know that half of the population suffers from mental
13 illness. So, can you dig a little bit more into
14 that? What you foresee as far as the population is
15 concerned? Mental illness? What your needs are?
16 What you're currently doing to address mental illness
17 in the jail?

18 LYNELLE MAGINLEY-LIDDIE: So, what I can tell you
19 is that upon admission into our facilities, everyone
20 goes through intake, and one of the things that
21 they're - one of the things that happens is that
22 they're met with a clinician to discuss any mental
23 health issues. Based on that conversation with that
24 clinician, it's determined what housing is
25 appropriate for the individual. We work closely with

1
2 our partners at CHS to ensure people are getting the
3 care that they need and we are constantly discussing
4 different cases with them, joint action reviews and
5 in those type of settings to talk about how we can
6 provide the best possible care for people in our
7 custody. That work is ongoing. I have the Deputy
8 Commissioner of Health Affairs; he can give you a
9 little bit more information as to – because he has
10 day to day contact with CHS. DC Sanders.

11 SPEAKER ADRIENNE ADAMS: And along with that, you
12 can add into that what I'm thinking about as well,
13 the relationship between the violent population and
14 the population with mental health issues.

15 JAMES SAUNDERS: Thank you. Can you hear me?

16 LYNELLE MAGINLEY-LIDDIE: Yes.

17 JAMES SANDERS: I'm James Saunders, Deputy
18 Commissioner for Health Affairs Compliance and
19 Quality. Thank you for the opportunity to discuss
20 these important matters today.

21 With respect to mental health services, I can
22 tell you that over the past several years we've seen
23 a significant increase in the percentage of the New
24 York City jail population that struggles with mental
25 illness.

1
2 Today, anywhere from 52 to 54 percent of the jail
3 population are known to mental health and have
4 received some form of mental health treatment while
5 in custody. According to our CHS colleagues,
6 approximately 20 percent of this population has been
7 diagnosed with a serious mental illness. Many of
8 these individuals are entering the jails with
9 preexisting conditions such as mental illness,
10 substance abuse, etc., and also then have to contend
11 with the psychological impact and stress of
12 incarceration.

13 We're proud to partner with Correctional Health
14 services, the provider of physical and mental health
15 across our facilities and to support these
16 individuals while they are in our custodial care. In
17 addition to the healthcare services provided by CHS,
18 I think you heard earlier from DC Torres, the
19 Departments program staff provides supportive
20 programming that enhances behavioral coping skills,
21 supports anger management, addresses substance abuse
22 and encourages productive and positive social
23 behavior.

24 Our objective is to address the needs of the
25 whole person while they're in our custody, which

1 includes providing appropriate levels of mental
2 health care and programmatic support that meets the
3 unique needs of the individual. For individuals in
4 need of enhanced support, the department runs several
5 specialized housing units with CHS. And we continue
6 to discuss the evolving need of safe and effective
7 mental health housing options that address a wide
8 spectrum of behavioral health concerns.

9
10 Our agencies will continue to work together to
11 ensure we develop a responsive strategy for persons
12 in custody with significant mental health needs. I'm
13 going to talk about mental observation unit. So,
14 although all individuals have access to mental health
15 providers when the need arises, certain persons in
16 custody may require a more structured environment and
17 more frequent custodial and clinical oversight and
18 observation. For that particular population, we
19 operate mental observation units. MO units operate
20 under the guidance of a multidisciplinary team of
21 unit based mental health providers who conduct daily
22 rounds, provide group programming and individual
23 psychotherapy and oversee medication treatment. MO
24 units are not punitive and afford the same out of
25 cell time as general population units.

1 Turning to folks with more serious mental
2 illness. The Department works in conjunction with
3 CHS to operate the Program for Accelerating Clinical
4 Effectiveness, also known as PACE. PACE focuses on
5 enhancing coping skills, improving communication
6 abilities, promoting insight and competency into
7 managing ones mental illness, emotions and behavior.
8 CHS advises the Department on which individuals are
9 suited for PACE placement based on their acuity of
10 mental health need.
11

12 The department also recognizes that individuals
13 with serious mental illness do not belong in any form
14 of restrictive housing. However, persons with guilty
15 adjudications for serious infractions may be a sign
16 to CAPs. And that's a unit that's based on clinical
17 determination. The assignment is based on clinical
18 determination made by CHS. That unit provides
19 intensive mental health treatments for individuals
20 with serious mental illness who have been adjudicated
21 again for a serious infraction but do not need to be
22 hospitalized. So, like PACE, CAPs unit are staffed
23 by both DOC and CHS personnel who support residents
24 by helping them enhance their coping skills, improve
25 their communication skills and develop insight and

1 competency into managing their mental illness as well
2 as their emotions and behavior.

3 I think we should address self-harm and suicide
4 prevention as well since we're on the top of mental
5 health. Is that okay?

6 SPEAKER ADRIENNE ADAMS: Briefly please. I'm
7 going to move onto my colleagues.

8 JAMES SAUNDERS: Briefly, alright, so in addition
9 to providing appropriate therapeutic housing, the
10 Department also recognizes that maintaining
11 comprehensive policies and procedures for the
12 prevention of suicide and self-harm is critically
13 important to supporting those entrusted into our
14 care. Our policies and training in this area were
15 recently reviewed by Dr. Tim Belovich, a nationally
16 recognized expert in the area of suicide prevention.

17 We recognize that during the pandemic the rates
18 of suicide increased, especially in folks who are
19 incarcerated. In our population, if you look at the
20 demographic about 57 percent of the jail populations
21 comprise of individuals between the ages of 19 to 34
22 with an overall being a majority are people of
23 African American descent and Latino men. In
24 addition, I'll strike that.
25

1 So, we do focus on training and education as well
2 in these areas. All members of service receive
3 training in mental health, mental health first aid,
4 suicide prevention, and CPR Certification at the
5 academy. We also offer crisis intervention training
6 to staff assigned to mental health housing units.
7 Crisis intervention and de-escalation is now offered
8 through an online class and all officers are trained
9 under the Department Suicide Prevention Policies,
10 which are reenforced through roll call refreshers.
11 In addition, we have posters placed throughout the
12 facilities and to other means. So, I'll stop there
13 for any questions.

14 SPEAKER ADRIENNE ADAMS: Just to follow up and
15 thank you. Just to follow up, any idea
16 percentagewise on once again the numbers I will say
17 of violent "offenders" associated with mental health?
18

19 JAMES SAUNDERS: I don't have those stats at my
20 fingertips. I'll have to look to other colleagues,
21 or we don't have that -

22 LYNELLE MAGINLEY-LIDDIE: We'll get that for you.

23 SPEAKER ADRIENNE ADAMS: Okay, thank you very
24 much. I will turn it back over into the capable
25 hands of our Chair.

CHAIRPERSON NURSE: Thank you Speaker Adams.

Okay, so I'm going to start with some just basic changes in the preliminary plan. The budget remains relatively flat from year to year but can you explain why there is such stable growth across the plan period considering DOCs operational challenges in the past few years?

LYNELLE MAGINLEY-LIDDIE: I'm going to turn that over to our Deputy Commissioner of Finance.

MALA SRINIVASAN: Good afternoon. My name is Mala Srinivasan. I'm the Deputy Commissioner of Budget and Finance. In terms of operational - in terms of the budget, our budget for Fiscal Year '24 it's \$1.2 billion compared to a budget of '25, \$1.05 billion. We, as Commissioner mentioned earlier in the testimony, we plan to achieve this through savings through due to operating below our authorized headcount and also overtime reduction.

CHAIRPERSON NURSE: Thank you for that. In the Fiscal 2024 Adopted Budget, additional units of appropriation for transportation, personal services and OTPS funding were included in DOCs budget to increase transparency. When will the budget reflect

1
2 the full realignment of new units of appropriation
3 that were added at adoption?

4 MALA SRINIVASAN: Thank you for that question.
5 The budget currently reflects the way Council had
6 requested and it does reflect everything by
7 particularly your fee and budget codes.

8 CHAIRPERSON NURSE: Okay, thank you. I'm going
9 to move to staff allocations. Uhm, we see there are
10 about 307 staff allocated to VCBC in Fiscal Year 2025
11 in the preliminary budget even though the facility is
12 closed. Does the Department plan to utilize that
13 facility at all? Why would there be staffing
14 allocations for a closed facility?

15 ALEXANDRIA MALDONADO: Good afternoon. Thank you
16 for that question. I'll take it.

17 CHAIRPERSON NURSE: Can you come a little closer
18 to the mic? I'm sorry.

19 ALEXANDRIA MALDONADO: No, I'm sorry. Uhm, right
20 now VCBC is decommissioned as a jail. We do not have
21 individuals in custody in that facility and the SCOC
22 has sort of taken it off of line. With that being
23 said, we still maintain some number of staff members
24 there to make sure that you know there's fire watch
25 to the building essentially does not become a blight.

1
2 It is still within our purview and we maintain it as
3 such.

4 CHAIRPERSON NURSE: And that requires 307 staff
5 that are allocated for that?

6 ALEXANDRIA MALDONADO: No.

7 CHAIRPERSON NURSE: I can imagine not.

8 ALEXANDRIA MALDONADO: Yeah, I'm not sure if that
9 number is accurate. We'll actually take a look at
10 that and get back to you because that does sound like
11 a lot of people.

12 CHAIRPERSON NURSE: Okay, AMKC is now also closed
13 except the industrial kitchen. Can you explain why
14 the preliminary plan shows a budgeted headcount of
15 1,111 staff allocated to AMKC in this current fiscal
16 year preliminary plan?

17 ALEXANDRIA MALDONADO: I'm sorry, can you repeat
18 the question? Sorry.

19 CHAIRPERSON NURSE: Yes, so AMKC is now closed
20 except for the kitchen but in the preliminary plan,
21 it shows a budgeted headcount for 1,111 staff for the
22 building. So, can you explain that?

23 ALEXANDRIA MALDONADO: So currently, the Fiscal
24 Year '24 headcount, the budgeted headcount is 1,728
25 for nonuniformed and 7,060 for uniformed. But the

1
2 total headcount of 8,788. But I'm not sure if you're
3 referring to the actual headcount.

4 CHAIRPERSON NURSE: I'm just showing what's
5 reflected in the plan. So, maybe you could give us a
6 headcount. If there are any staff allocated for
7 AMKC, it would be great to get that number and a
8 rationale for why they would be allocated to a
9 building that is now closed or what they would be
10 doing there.

11 ALEXANDRIA MALDONADO: We can get you more
12 details by building as a follow-up.

13 CHAIRPERSON NURSE: Thank you. So, there are 91
14 officers assigned to the Bronx Court pens in the
15 Fiscal 2025 Preliminary Plan. There are only 23 for
16 Brooklyn, 13 for Manhattan, even though Brooklyn and
17 Manhattan handle many more cases than the Bronx.
18 Could you give an explanation for this headcount?

19 LYNELLE MAGINLEY-LIDDIE: So, I'll have to take a
20 look at that but I, you know we'd have to make sure
21 that those people are actually assigned to the Bronx
22 courts. We will follow up with you after the
23 hearing.

24

25

1
2 CHAIRPERSON NURSE: Okay, it would be great to
3 get a headcount of the actual assigned to – the
4 different pens.

5 LYNELLE MAGINLEY-LIDDIE: Yes.

6 CHAIRPERSON NURSE: Okay, given the relatively
7 small size of recent academy classes, why does the
8 budget allocate 122 training academy staff including
9 110 officers at a cost of \$13 million?

10 LYNELLE MAGINLEY-LIDDIE: So, understanding that
11 yes, there are small classes but we continue to train
12 year over year. There's the academy staff, they're
13 training, they're providing in-service training to
14 all of our 6,000 uniformed staff members and it's not
15 just limited to recruit training. We have our Acting
16 Deputy Commissioner Jeremiah Johnson. He is here
17 with us and he can actually walk you through some of
18 the work that they've been doing at the academy.

19 JEREMIAH JOHNSON: Good afternoon.

20 CHAIRPERSON NURSE: Good afternoon.

21 JEREMIAH JOHNSON: Thank you for your question.
22 At the Training and Development Division, we do have
23 a staff that's reflective of the numbers that you
24 provided. Our staff are actively providing both
25 initial recruit training, which commenced yesterday

1
2 at the NYPD Academy, and we are also conducting
3 ongoing in-service trainings across DOC for both
4 uniform and nonuniform staff. This includes
5 trainings that involve ongoing certifications for
6 compliance purposes but there also is a professional
7 development aspect to many of our offerings at the
8 academy to ensure that our members of service are
9 equipped the leadership skills necessary to produce
10 the outcomes that we want to see at the Department of
11 Corrections.

12 CHAIRPERSON NURSE: Okay, understood. So you
13 have somewhere over 200 people including the academy
14 staff and officers to do ongoing training for
15 workforce development and new classes what I'm
16 understanding?

17 JEREMIAH JOHNSON: So, likely those numbers also
18 include nonuniform staff that are involved in
19 supporting the operations of the Training and
20 Development Division and not just the instructors.

21 CHAIRPERSON NURSE: Okay. I'm going to turn to
22 programming. I think that's like the biggest thing
23 that we'd love to dive into. We talked about the cut
24 last year \$17 million. An abrupt disruptive cut to
25 many of these service providers, including to you

1 know Greenhope Services for Women, SCO Family
2 Services, Fortune Society, Horticulture Society of
3 New York, Osborne Association, uhm, you know the
4 Council was very vocal about the concern that DOC
5 would not be able to meet the level of programming
6 and engagement and participation rates that these
7 providers who have credible messengers who are rooted
8 in community and are able to provide a continuity of
9 care and engagement between you know at the Island
10 and back in community and then the 2024 PMMR showed
11 that participation rates of individuals in custody
12 participating in this is 30 percent lower. And that
13 participation in group programming is down 29 percent
14 and participation and one on one sessions is down by
15 30 percent.
16

17 So, I understand that you are now bringing back
18 \$14 million, although that's not the full restoration
19 but it's unclear to me what is going to be outsourced
20 and what is going to be insourced based on what you
21 wrote down earlier. So, I'll start there just to get
22 like some clarity on that piece.

23 FRANCIS TORRES: Thank you Madam Chair. I am
24 glad you posed that question to us. When we were
25 here last and as we're transitioning to insourcing,

1 we had the similar or equal amount of staffing to
2 actually inherit insourcing, and in fact, we were
3 doing very well up until approximately September of
4 2023. There were certain things that happened within
5 the division of Programs and Community Partnerships,
6 specifically the fact that due to multiple reasons,
7 we lost 15 members. Those 15 members are assigned to
8 counseling. Some of the reasons for those losses
9 were long-term absences. We also had some staff
10 members within the counseling unit that transitioned
11 into new roles within the division or other divisions
12 within the department. The onboarding process of new
13 staff members, was also becoming a challenge for us.
14 Not to mentioned the continued increase of the
15 population. That is what justifies that 29 percent
16 as well as the 30 percent.

18 However, since January of 2024, we've been able
19 to start onboarding new staff members, specifically
20 for our counseling services unit which will continue
21 to do the one on one and the growth facilitation.
22 When we look at the next or the new \$14 million,
23 we're looking at community-based organizations and/or
24 institutions of higher learning. And I say that

1
2 because there is one of the new needs that targets
3 educational programming.

4 And so, I also want to establish that there has
5 been continuing probation of services, not just by
6 the DOC staff counseling unit but also by other DOC
7 staff members assigned to the division of programs.
8 If I can give you just a few examples.

9 CHAIRPERSON NURSE: Briefly please.

10 FRANCIS TORRES: Alright, here we go. Workforce
11 development through different partnerships, our fine
12 and performing arts, our enhanced recreation staff,
13 the MOCJ providers that continue to do transition at
14 very specific facilities, not to mention volunteers
15 and the other body of subcontracted providers that
16 target enrichment programming.

17 CHAIRPERSON NURSE: Thank you. So, I'm just
18 trying to kind of wrap my head around this because we
19 made the cut and there was some work that was being
20 done already by DOC staff. There were some other
21 MOCJ providers there. Uhm, now you've got to onboard
22 people. You also mentioned earlier that now you have
23 to train people. You mentioned uhm, there's a series
24 of trainings that would need to happen over a period
25 of time. I think you said, July through December

1 there were going to be trainings. So, I'm just
2 curious of the cost. I mean if you had folks who
3 were already in the door, they built the
4 relationships, they already know what they're doing.
5 Now they get abruptly taken out of - off of the
6 island and the relationships are severed to some
7 degree. Now you got to spend money training people
8 that hadn't done the work before or new people. It's
9 just like what's the cost analysis here or the cost
10 benefit and then to abruptly come back and have you
11 know a new RFP, set of RFPs go out for \$14 million.
12 I understand you're saying there's a new need with
13 Institution of higher learning but what would be the
14 difference in the programs that would be coming into
15 the RFPs and what existed in the past?

17 FRANCIS TORRES: Thank you for the question.
18 Madam Chair, let me just provide some clarity on what
19 I had responded to Speaker Adams. The training that
20 has been done and the training that will continue is
21 for the staff members assigned to the division of
22 programs and community partnerships who are presently
23 doing the insourcing.

24 CHAIRPERSON NURSE: Were they already doing the
25 insourcing? Is this new training?

1 FRANCIS TORRES: No, it's continued training.

2 CHAIRPERSON NURSE: It's ongoing?

3 FRANCIS TORRES: It's ongoing training. We're
4 not reinvesting in the training; we're just ensuring
5 that they continue to be refreshed on an ongoing
6 basis. Those are the staff members that will
7 continue to do anger management. That will continue
8 to do conflict resolution. That will continue to do
9 interactive journaling and other evidence-based
10 curriculum. When it comes to the new programs that
11 these \$14 will target, these are new programs and
12 I'll share with you one specifically. The
13 supplemental programming on education is supplemental
14 because we currently have our partners at the
15 Department of Education who target the 18- to 21-
16 year-olds. However, there are additional needs not
17 just for the 18 to 21 but also for the adult
18 population.
19

20 It is a need that has been expressed to us by
21 those assigned to our care. So, this particular
22 programming component was never afforded under the
23 jail based targeted approach. It is completely new.
24 It will afford us the opportunity to increase the
25 number of GED instructors. It would allow us for the

1
2 first time in many years to bring back English as a
3 second language instruction. Would allow us to do
4 tutoring and significantly will allow us to expand
5 our post-secondary.

6 CHAIRPERSON NURSE: May I ask, did you ever
7 engage in those conversations about new needs with
8 the folks that had already been in contract with you?
9 Yes or no, has there been conversations with them
10 saying we need English as a second language? We need
11 more GED?

12 FRANCIS TORRES: No, actually no. We never
13 engaged in any conversations.

14 CHAIRPERSON NURSE: Okay, thank you. Uhm, okay,
15 when will this - excuse me if it is already out
16 there. Is it out there? If not, when will it be
17 issued and when do you hope to contract and have
18 folks on the ground?

19 FRANCIS TORRES: We are excited about the \$14
20 million and what we will be able to do with it. You
21 know too well that we just received the funding that
22 oh, actually the notification that we're awarded. We
23 are currently in the process of conversations with
24 our finance division as well as OMB. We are drafting
25

1
2
3
4
5
6
7
8
9
10
11
12
13
14
15
16
17
18
19
20
21
22
23
24
25

language to determine how best to go about it. We're drafting language for an RFP -

CHAIRPERSON NURSE: Yes, it's coming.

FRANCIS TORRES: Yes, it's about 10 months to 15 months.

CHAIRPERSON NURSE: 10 months, wow okay. Uhm, I'm just curious about the service gaps there. You know you're saying you're doing the insourcing but the report of the city is showing that the programming participation has declined. You're not engaging at the level they were. I understand the reasons you identified very clearly but now; an additional 10 months is going to you know go and there are people still there idle with nothing to do looking for things. I understand you have some programming but I'm very concerned about that service gap. What kind of outreach is being done by the department to encourage participation in this program, in the programs that you have right now in sourced?

FRANCIS TORRES: What we do right now?

CHAIRPERSON NURSE: Just how you're getting, how are you working to get more people in your program.

1
2 FRANCIS TORRES: Oh participation. Well, we
3 actually advertise. We have staff members on the
4 ground. Something that we did last year was that we
5 redefined how programs operate within the facilities.
6 We actually assigned executive directors of facility
7 programs who work directly where our uniformed
8 members assigned. So, these executive directors are
9 now leading the teams assigned to programs within
10 each of the facilities. Allowing for better
11 communication as well as stronger advertisement every
12 time new programming is brought into the facilities.

13 CHAIRPERSON NURSE: Thank you. One of the -
14 sorry, at the time that the contracts were cancelled,
15 the providers were offering programs in six
16 facilities on Rikers and how many facilities are
17 programs currently being provided by DOC program
18 staff?

19 FRANCIS TORRES: In all facilities.

20 CHAIRPERSON NURSE: Okay. Okay, thank you. Oh
21 sorry, uhm if possible it would be great to have a
22 list, I don't know if you'll be able to do that now
23 of what specific programs are being done by DOC staff
24 and what are the ones that are specifically being
25 done by contracted providers.

1 FRANCIS TORRES: Not to take much of your time.

2 CHAIRPERSON NURSE: I know. You can send us a
3 list.
4

5 FRANCIS TORRES: I will tell you that we will
6 prepare a chart and share it with you.

7 CHAIRPERSON NURSE: Thank you. Okay, we're going
8 to move into vacancy rates and then I'm going to open
9 up some time for the members here.

10 So, as of this plan, the DOC has 204 vacant
11 civilian positions yet there were no vacancy
12 reductions included in the program to eliminate the
13 gap. Can you please explain which positions are
14 currently vacant and how this may effect day-to-day
15 operations?

16 MALA SRINIVASAN: Thank you for the question.
17 Are you referring to the vacancy numbers for this
18 fiscal year or?

19 CHAIRPERSON NURSE: As of this plan.

20 MALA SRINIVASAN: As of this plan, yes. So, we
21 do have 220 vacancies for civilians and are
22 nonuniformed and we have 932 vacancies for uniform
23 with a total of 1,152 vacancies. Yes, are you -
24 sorry if you were looking for -
25

1 CHAIRPERSON NURSE: That's fine for the number.
2
3 I'm just curious, I believe it was in 2019 or maybe
4 2020, there were about 1,029 staff who were reported
5 as chronically absent and over the last year we've
6 kind of had a hard time getting a number, a concrete
7 number of how many of those folks have returned to
8 work consistently or have been terminated. Do you
9 have an update on how many folks are right now
10 considered chronically absent?

11 MALA SRINIVASAN: We can share the details of how
12 many are currently absent or in terms of
13 terminations, we can share the details.

14 CHAIRPERSON NURSE: You don't have that now?

15 MALA SRINIVASAN: Uhm, just bear with me a
16 minute.

17 CHAIRPERSON NURSE: I feel like that would be a
18 number that could be pulled up.

19 MALA SRINIVASAN: Sorry, I apologize.

20 SHERRIE REMBERT: Hello and thank you for the
21 question again. Uhm, you're requesting the chronic
22 absence?

23 CHAIRPERSON NURSE: Yes, the number of staff that
24 are right now currently reported as chronically
25 absent. Out sick, whatever the terminology you use.

1
2 SHERRIE REMBERT: Okay so the total out sick
3 currently today is 362, as of March 7, excuse me,
4 yesterday is 362 and the total for indefinite sake,
5 which is our chronic is 200. The breakdown is 174
6 for COs, 17 for Captains, 3 for ADWs, 6 for
7 civilians.

8 CHAIRPERSON NURSE: And what are your strategies
9 right now for reducing, you know getting people
10 either back to work or getting them off the payroll
11 if they don't want to come back to work?

12 LYNELLE MAGINLEY-LIDDIE: So, I just want to
13 point out like at the beginning of January 2022, our
14 sick numbers, we had approximately about 2,600 people
15 out sick and shortly in the spring, I took over
16 managing the health management division and we were
17 able to decrease the number of people out sick by 80
18 percent. What we are doing is we're looking at
19 individuals and determining whether or not they are
20 medically incompetent. And then the department moves
21 forward with charges for those individuals, right?
22 There's a path in terms of settling those cases and
23 there's a discussion if people are going to come back
24 to work or they're going to be separated from the
25 department. We continue to communicate with staff

1 who are out. In addition, we have a lot of staff who
2 are medically monitored for injuries that they've
3 actually attained while on the job. And so, we have
4 a process to manage our medically monitored
5 individuals as well. Some of those individuals may
6 not necessarily have - they may not be facing
7 individuals in custody as they go through their
8 treatment and they're ready to return to their full
9 status. But that's something that's ongoing. The
10 health management division is looking at that very
11 closely to ensure that people are showing up for
12 work.

13
14 CHAIRPERSON NURSE: Okay.

15 LYNELLE MAGINLEY-LIDDIE: And we've made
16 significant strides.

17 CHAIRPERSON NURSE: With the exception of folks
18 who might be on a medical monitoring program, what is
19 the average timeline between identifying someone as
20 chronically absent to taking some course of action
21 that either brings them back, makes the final
22 decision that you're back or you're not?

23 LYNELLE MAGINLEY-LIDDIE: So, typically if the -
24 the policy is if somebody's out for 40-days or more
25 but part of that analysis is to determine whether or

1 not it's a work-related illness, right? If someone
2 is out as a result of an on-the-job injury, but our
3 team works closely. The Health Management Division
4 team works closely with our trials division and with
5 the facility to get the information, so-

6 CHAIRPERSON NURSE: No, I understand, I was just
7 trying to like if there's an average number of days.
8 Like, is it a year? Is it six months before we get
9 to an ultimate decision? I understand the variables
10 that you're -

11 LYNELLE MAGINLEY-LIDDIE: It's approximately, it
12 can range from four to six months.

13 CHAIRPERSON NURSE: Okay.

14 LYNELLE MAGINLEY-LIDDIE: Right.

15 CHAIRPERSON NURSE: Okay. I'm going to pause and
16 allow members of the Committee to ask questions.
17 Council Member Brewer.

18 COUNCIL MEMBER BREWER: Thank you very much.
19 Just picking up on the Chair. So, I understand but I
20 could be wrong that 51 percent of Correction
21 Officers, I might be wrong, are women. Is that
22 correct?
23

24 LYNELLE MAGNILEY-LIDDIE: It's 45 percent, yes.

25 COUNCIL MEMBER BREWER: Okay.

1
2 LYNELLE MAGNILEY-LIDDIE: Close, you're close,
3 yes.

4 COUNCIL MEMBER BREWER: My question then would be
5 childcare because I know, we all know that if you're
6 child is sick, you stay home. So, my question is, is
7 there some way of having childcare, a different kind
8 than perhaps we would think of in our communities
9 because you have different shifts. So, are you
10 thinking about - this would be a new need? I know
11 nobody likes to talk about new needs but they are out
12 there. New need for some kind of childcare facility
13 in the Department, not necessarily at Rikers
14 obviously but is that something that's being
15 considered because I think that would help your 45
16 percent.

17 LYNELLE MAGINLEY-LIDDIE: Yes, thank you for that
18 question. That is something that is being
19 considered. We actually conducted a survey amongst
20 our staff with respect to the same issue with
21 childcare and that's something we are exploring right
22 now so we can provide to our staff.

23 COUNCIL MEMBER BREWER: When can you update us on
24 what your survey shows and funding possibilities
25 etc., because I think that would -

1
2 LYNELLE MAGINLEY-LIDDIE: We can provide you an
3 update in the coming weeks on what we got from the
4 survey and continue to have conversations on this
5 topic.

6 COUNCIL MEMBER BREWER: And then maybe we could
7 advocate for funding.

8 LYNELLE MAGINLEY-LIDDIE: That would be great.

9 COUNCIL MEMBER BREWER: It's a very big need.
10 Number two, on transportation to the courts. I think
11 we all want the transportation to work because you
12 know we want to the percentage of those individuals
13 at Rikers to go down for every reason. So, I know
14 it's a preliminary MMR stated 98 percent compliance.
15 I was a little surprised of the investigations unit
16 Oversight and investigations and that division, thank
17 you to the department has been keeping track of this
18 and has been an actual tour with the bus. So, people
19 for whatever reason sometimes decide they don't want
20 to go to court for whatever reason, the experience
21 that day, getting up so early, etc..

22 So, I'm a little surprised at the 98 percent.
23 How do you calculate that? In other words, maybe it
24 doesn't include the people who don't want to go at
25

1
2 all. How does that 98 percent get calculated and do
3 you think this is an issue transportation to court?

4 LYNELLE MAGINLEY-LIDDIE: So, the number 98
5 percent also includes the individuals who have
6 refused. I think that the transportation division
7 has worked incredibly hard in this initiative. They
8 actually work closely with OCA. They collaborated
9 and built a dashboard to sort of track people as they
10 come to court in real time for their scheduled
11 appointments. This work is ongoing but I've seen,
12 very, the Transportation Division has worked very
13 hard to ensure people are being transported to court
14 on time.

15 COUNCIL MEMBER BREWER: Okay, and so what are the
16 reasons for those do you think not wanting to go?

17 LYNELLE MAGINLEY-LIDDIE: I think it varies.
18 Sometimes people may not want to go to court for the
19 case to move along. I think there are various
20 reasons for refusing.

21 COUNCIL MEMBER BREWER: Okay, I think we have a
22 letter that we have sent about this topic, so maybe
23 you could find it and respond with some of this
24 information.

25 LYNELLE MAGINLEY-LIDDIE: Okay.

1
2 COUNCIL MEMBER BREWER: We sent it awhile ago.
3 The issue of food is something of interest to me.
4 Obviously, I think one of the reasons people don't
5 want to go - it's not your fault but they may not get
6 fed all day long at the court, so that's one big
7 concern that we hear about a lot but on the island in
8 general, what's your budget for food? What's your
9 you know does it work? Does it not work? Do you
10 need more? Do you need less? What's the status
11 because it's a nutrition issue. There's lots of
12 issues that I think are really important about food.

13 MALA SRINIVASAN: Yeah, thank you for that
14 question Council Member. The budget for food is
15 right now \$18 million, \$19 million. We anticipate
16 because of the rise in food prices and the rise in
17 the population. We anticipate that we would be
18 spending close to \$23 million this year and we are
19 working with our oversight to add funding for that.

20 COUNCIL MEMBER BREWER: And how much, is that
21 contracted out? Is it no scratch whatsoever despite
22 having a kitchen, which I've been in. So, why is it
23 all contracted out? Why can't you do some scratch
24 food? Maybe that would even save money, meaning
25 cooking.

1
2 MALA SRINIVASAN: So, uh if you're asking about
3 the price per meal, it's basically has gone up to
4 \$8.93 compared to earlier fiscal years.

5 COUNCIL MEMBER BREWER: So, that's per person?
6 Per day? Per meal?

7 MALA SRINIVASAN: Yes, per meal.

8 COUNCIL MEMBER BREWER: So, breakfast, lunch and
9 dinner, that's the average, right? Okay, so my
10 question is do you do any scratch cooking? Do you do
11 anything that's cooked there at Rikers or is it all
12 brought in? That's my question.

13 JAMES SAUNDERS: Thank you for that question.
14 James Saunders. So, I want to address your first
15 question, which is about food and the courts and so,
16 the Nutritional Services Division gets a count on a
17 daily basis of the number of individuals who need to
18 present to court and they supply the courts with
19 meals, carry meals, sandwiches, fruits, etc.. With
20 respect to scratch cooking, I can tell you that we
21 are currently working very closely with the Mayor's
22 Office of Food Policy to address your concern about
23 scratch-based cooking. I don't know if you know but
24 the city was recently awarded a grant about \$100,000
25 to retrain the cooks who are employed by DOC. That

1 training is going to focus on scratch-based cooking.
2 Using more fresh fruits and vegetables and daily
3 meals and preparing, teaching them how to prepare a
4 meatless meal.
5

6 COUNCIL MEMBER BREWER: I like meat but okay.

7 JAMES SAUNDERS: So, we're trying to wrap. We
8 want to make sure that we combine nutritional
9 services along with health services because you
10 really can't separate those two. You know you are
11 what you eat so we want to make sure that we treat
12 the entire person while they are in our custody.

13 COUNCIL MEMBER BREWER: I just hope the meatless
14 taste good. That's what I worry about.

15 JAMES SAUNDERS: Well, we will invite you out for
16 a taste testing after that training.

17 COUNCIL MEMBER BREWER: Oh, that's okay. That's
18 alright. No, I've had food at Rikers. It's alright,
19 it's not great. That's the problem is how do you do
20 what people want to eat. So, you're working it.
21 When will that program start do you think, the one
22 you just described?

23 JAMES SAUNDERS: So, the training is I believe
24 going to start this April. I can confirm that and
25 send you the schedule of training and the

1
2 implementation. We're working with a community-based
3 organization called Hot Grid Kitchen.

4 COUNCIL MEMBER BREWER: I know Hot Grid very
5 well. Okay, one last question. On the mental
6 health, I was there in August. It does, you know
7 that was when the \$17 million, \$14 million was not in
8 existence and there wasn't a lot of activity and
9 program going on, I have to tell you but in terms of
10 mental health issues, we all hope that there will
11 alternative beds at different public hospitals.
12 That's what we're all hoping for but while we're
13 waiting for those beds to be available, tell me again
14 between Correctional Health and you, what kind of
15 costs because this is a budget hearing is allocated
16 to mental health staff. Now, is that just under
17 Correctional Health? In which case I know you're not
18 in charge of that but do you have a budget for mental
19 health or is it just correctional health?

20 LYNELLE MAGINLEY-LIDDIE: It is just Correctional
21 Health Services.

22 COUNCIL MEMBER BREWER: So, how do you monitor
23 that? How do you make sure because you do have a
24 very large number of people who have that challenge.

1 therapists. They have psychologists, psychiatrists.
2 They have nurse practitioners whose focus is in
3 psychiatry. So, I think they have the correct staff
4 and I don't want to speak for them but I think it
5 does work. And if you think about it, uh what is you
6 know we are, our society is in a mental health crisis
7 and you know with the closing of state facilities, we
8 have seen a higher number of folks with mental health
9 issues coming into our jails. That is placing stress
10 on all of these various systems and I think CHS is
11 coping with it very well and we support them by
12 providing our staff with the requisite training that
13 they need to de-escalate crisis, intervene. So, I
14 think it is, I think it's working.

16 COUNCIL MEMBER BREWER: Okay.

17 JAMES SAUNDERS: You know when we reintroduce
18 people back into the community, programs is focused
19 on that. They have a full set of counselors who
20 provide that level of support, who help reintroduce
21 the incarcerated back into programming into the
22 community. And we also have folks who are Brad H
23 designated, meaning that when we release them, they
24 can only be released during certain hours and they
25 have to at some point contact an adult back into the

1
2 community. So, I think the safety net that's there
3 is working.

4 COUNCIL MEMBER BREWER: Okay, I mean it doesn't
5 seem that when you are there but I'm not there for an
6 extended period of time. You see the individuals in
7 the unit where they're being observed to see their
8 status and it does seem a little chaotic but I hear
9 what you're saying. Just finally, so uhm the decree,
10 the great decree, it seems like Commissioner, that's
11 on the way of being addressed in terms of your
12 future.

13 LYNELLE MAGINLEY-LIDDIE: The Nunez Consent
14 Decree?

15 COUNCIL MEMBER BREWER: Yes.

16 LYNELLE MAGINLEY-LIDDIE: Yes, yes.

17 COUNCIL MEMBER BREWER: What's the timing on that
18 do you think?

19 LYNELLE MAGINLEY-LIDDIE: The timing of
20 terminating the Consent Decree. I think we have some
21 work to do and so we are committed to doing that
22 work. Earlier, a few months ago, we were held in
23 contempt for opening a unit within consulting with
24 the Monitor and the judge provided us with three
25 provisions to purge that contempt. I'm happy to say

1
2 today that we successfully purged that content. We
3 continue to collaborate with the Monitor and we are
4 committed to ensuring that people are in jails that
5 are safe and humane right? Because it's also
6 impacting our staff and people in custody.

7 So, we are working towards addressing the
8 provisions in the consent decree, ensuring that we're
9 in compliance and we are looking forward to telling
10 you when it will be terminated.

11 COUNCIL MEMBER BREWER: Alright, thank you Chair.

12 CHAIRPERSON NURSE: Thank you Council Member
13 Brewer. Council Member Stevens.

14 COUNCIL MEMBER STEVENS: Good afternoon. I just
15 have a couple of questions. And so, uhm,
16 Commissioner, in your time since you started or your
17 overall tenure in the agency, have you experienced a
18 time the department did not have enough resources or
19 staff on duty to properly conduct programming or
20 provide escorts to medical appointments?

21 LYNELLE MAGINLEY-LIDDIE: So, yes I've been at
22 the Department for the last eight years. So, there
23 are times when we are not able to provide escorting
24 to medical appointments. In terms of programming, I
25

1
2 can have FDC answer that because she manages the
3 division of programs in terms of the escorting.

4 COUNCIL MEMBER STEVENS: Very briefly please.

5 FRANCIS TORRES: Very brief.

6 COUNCIL MEMBER STEVENS: Yes, thank you.

7 FRANCIS TORRES: There are interruptions. The
8 interruptions occur due to escort. We deployed our
9 divisions members on the uniformed side to assist.
10 Thank you.

11 COUNCIL MEMBER STEVENS: Thank you so much.

12 LYNELLE MAGINLEY-LIDDIE: One of the good things
13 about programs is there are people assigned, a
14 uniformed personnel assigned to the programs division
15 to ensure that there are escorts throughout. So,
16 there is the ease of that going throughout the day.

17 COUNCIL MEMBER STEVENS: Thank you. In journals,
18 there are higher vacancy rates for higher ranking
19 positions. We see that. The Department is currently
20 budgeted for a plan of 16 Wardens but only four
21 Warden positions were active in January. How many
22 facilities does one Warden oversee?

23 LYNELLE MAGINLEY-LIDDIE: How many facilities
24 does a uniformed Warden oversee?

1
2 COUNCIL MEMBER STEVENS: Yeah, how many
3 facilities do they oversee?

4 LYNELLE MAGINLEY-LIDDIE: So, I think we, so
5 we've - due to the action plan, we've hired outside
6 personnel and so, there are some people who are -
7 they are actual in the rank of assistant
8 commissioner.

9 COUNCIL MEMBER STEVENS: Okay.

10 LYNELLE MAGINLEY-LIDDIE: All of our facilities
11 are overseen by an Assistant Commissioner of
12 Operations or a Warden.

13 COUNCIL MEMBER STEVENS: Thank you. According to
14 the Federal Monitor that noted that reducing the
15 overall population is necessary to improve conditions
16 in jails and maximize exposure of dangerous
17 conditions at Rikers but a portion of the jail
18 population over the DOC has the most control. A
19 number of people serving city sentences is up by 300
20 percent since January 2022. Can you explain the
21 process and critique for reviewing and selecting
22 people where possible early release under 6A?

23 FRANCIS TORRES: Since I oversee that process as
24 well Council Member, I'll be straight and to the
25 point.

1 COUNCIL MEMBER STEVENS: Thank you.

2 FRANCIS TORRES: The 6A program allows the
3 Commissioner, in this case, also the department, to
4 look at the sentenced population and take into
5 account the past criminal justice involvement, the
6 institutional conduct, as well as previous charges
7 and there needs. Once they are released, all of
8 those factors are taken into account and assessed in
9 order for them to qualify for 6A.
10

11 To date, since 2022, we have been able to release
12 or transition 75 of them. Five done recently under
13 Commissioner Maginley-Liddie. In order for them to
14 transition, we do certain things but what is
15 important is that we ensure there is a linkage of
16 that person in custody transitioning to the community
17 with one of our partners. That the partners create
18 transition plans, ensure that all of the needs that
19 are needed are waiting for the person up in release
20 and then we ensure that we adhere, we present to the
21 person being considered for it. We meet with them to
22 ensure what our expectations are in the community.
23 Whether it is a weekly check-in with a case manager
24 assigned. Whether it is a biweekly or two days per
25

1 week, the frequency is determined by the needs of the
2 person that is being released into 6A. Thank you.

3 COUNCIL MEMBER STEVENS: How many of those
4 reviewed were women and gender nonconforming people?
5 Do you have that breakdown?

6 FRANCIS TORRES: I don't have the names with me
7 but I'll be more than happy to follow up.

8 COUNCIL MEMBER STEVENS: Why hasn't the
9 Administration expanded this process given the
10 increase? Because you said you had uhm, I think 75,
11 like why are we not trying to ramp up and use the 6A
12 a little bit more, especially since we're trying to
13 get the population down?

14 LYNELLE MAGINLEY-LIDDIE: I can tell you that's
15 something that I'm actually assessing and reviewing
16 myself as Commissioner. FDC and I are in constant
17 communication about who can be released under 6A.

18 COUNCIL MEMBER STEVENS: Thank you so much.

19 CHAIRPERSON NURSE: Council Member Restler.

20 COUNCIL MEMBER RESTLER: Thank you so much Chair
21 Nurse and I'd just like to thank Speaker Adams for
22 attending this hearing, it's critically important.
23 Commissioner, I don't believe we've had the chance to
24 meet, so congratulations on the appointment. I also
25

1 just want to commend you. I was pleased to hear that
2 upon your appointment, the monitoring team found
3 there was an immediate shift in the Departments
4 approach and a willingness to work together and
5 engage constructively. I hope that this is a
6 harbinger of a shift in tone and approach more
7 broadly as I've been deeply concerned about the
8 approach that the Mayor and his Administration has
9 taken at the Department of Corrections over your
10 first two years in office.

12 I just want to firstly start on a positive note
13 on the therapeutic outposted units. I was thrilled
14 by the announcement earlier this week that the 360
15 units are moving forward at all three sites,
16 including North Central Bronx and Woodhall and that
17 they are slated to open in mid-2027. Is the
18 Department of Correction supportive committed to this
19 investment and timeline?

20 LYNELLE MAGINLEY-LIDDIE: Absolutely.

21 COUNCIL MEMBER RESTLER: Great. Uhm, next, so
22 percentage of people who have a serious health
23 designation – uh serious mental health issue at
24 Rikers. Could you give me the current percentage?
25 55? Just a number please?

1
2 JAMES SAUNDERS: Hi, James Saunders, Deputy
3 Commissioner. So, approximately anywhere from 52 to
4 54 percent—

5 COUNCIL MEMBER RESTLER: We saw over —

6 JAMES SAUNDERS: Of the population are known to
7 mental health.

8 COUNCIL MEMBER RESTLER: Yes, just I'm on the
9 clock so I appreciate it. I'm just looking for
10 direct answers.

11 JAMES SAUNDERS: 20 percent of those have been
12 diagnosed with a serious mental illness.

13 COUNCIL MEMBER RESTLER: I appreciate it sir.
14 I'm going to keep going. So, over 54 percent is the
15 current number as far as I understand. That is a
16 record high as far as DOC has tracked this number.
17 Is that correct, yes or no?

18 JAMES SAUNDERS: That's an approximate, no.

19 COUNCIL MEMBER RESTLER: No, not a record high.

20 JAMES SAUNDERS: No, it fluctuates based on —

21 COUNCIL MEMBER RESTLER: So, 54 point something
22 percent is not a record high? We've sort of hacked
23 those numbers in the past?

24 JAMES SAUNDERS: That I don't know.
25

1
2 COUNCIL MEMBER RESTLER: Oh, so you're not saying
3 no, you're saying I don't know? I just want to make
4 sure.

5 JAMES SAUNDERS: I don't know if it's a record
6 high.

7 COUNCIL MEMBER RESTLER: Does anyone else on the
8 panel able to confirm that this is a record high in
9 terms of the percent of people with a serious mental
10 health designation?

11 LYNELLE MAGINLEY-LIDDIE: We don't have that
12 information for you but we can get it.

13 COUNCIL MEMBER RESTLER: I can tell you based on
14 the analysis we've done; this is a record in terms of
15 the percentage of people at Rikers with a Brad H
16 mental health designation. So, I am deeply concerned
17 that Rikers is an ever growing, the ever-growing
18 largest psychiatric facility in the state of New York
19 but notably in the PMMR we found that health visits
20 were down by 30 percent year over year. Is that
21 correct? Yes or no please. In the PMMR, this is the
22 data point. I assume you have it at your fingertips.

23 JAMES SAUNDERS: Uhm, I don't have that data, so
24 I can't speak —

1
2 COUNCIL MEMBER RESTLER: Okay, well it's
3 accurate. So, what are you doing to fix it? We've
4 got ever growing number of people who have serious
5 mental health designations at Rikers and we're seeing
6 health visits plummet this current fiscal year. What
7 is being done to address this distinctively please.

8 JAMES SAUNDERS: So, the Department is committed
9 to ensuring that everyone in our care and custody has
10 access to quality mental healthcare.

11 COUNCIL MEMBER RESTLER: Okay, I hear you. I
12 don't need a long speech. I just am looking for a
13 direct answer.

14 JAMES SAUNDERS: So, we produce reports in
15 accordance with Local Law 132 of 2019. I think you
16 have received those reports. I think it's in our
17 public facing website. We'd be happy to send those.

18 COUNCIL MEMBER RESTLER: Could I ask, I just love
19 when my questions are answered directly.

20 JAMES SAUNDERS: So, if you look at the data,
21 you'd realize that in calendar year 2023, there were
22 over 600,110,000 scales of appointments. Looking at
23 that, we have approximately, we were able to produce
24 people to a majority of their appointments and with
25 respect to nonproduction, approximately three percent

1 of nonproduction is due to no escorts. And so,
2 production refusal reasons tracked by DOC can range
3 from I don't want the service. I do not want to go
4 to the service or I'm not coming now and will come
5 later.
6

7 COUNCIL MEMBER RESTLER: Okay.

8 JAMES SAUNDERS: And some of the data points that
9 we do track.

10 COUNCIL MEMBER RESTLER: I understand that but
11 could you please stick, I'm on the clock and I'm
12 asking once again to stick to answering my questions.
13 We've gone from 41 percent of people with a Brad H
14 designation in 2022 to 54, 55 percent today yet
15 health visits are down 30 percent. So, some things
16 are not right.

17 Commissioner, because I don't think I'm getting
18 any answers here from the Deputy Commissioner, could
19 you help me? What is being done to reverse this
20 trend and to try and address this?

21 LYNELLE MAGINLEY-LIDDIE: So, we are working
22 internally at the department to ensuring people are
23 getting access to minimum standards. The team is
24 actually developing an audit protocol to making sure
25 people are getting what they need. That is ongoing

1
2 and we expect to have something in the coming weeks
3 on that. But that is what we're doing. We
4 understand that we have challenges. We know that
5 there are issues but first, the first thing is to
6 admit that and to address that.

7 COUNCIL MEMBER RESTLER: I appreciate that.

8 Thank you.

9 LYNELLE MAGINLEY-LIDDIE: And that is what we are
10 doing.

11 COUNCIL MEMBER RESTLER: Thank you. We would be
12 very interested in understanding what is being done
13 to further address this. Chair, if it would be okay
14 for me to just do two more topics? Uhm, thank you.
15 The - it's a seriously concerning trend for the
16 health and wellbeing of the people that are in your
17 care. We've seen two dozen plus fatalities on Rikers
18 Island since the Mayor came into office. So, making
19 sure people have access to the healthcare they need
20 is life and death and so, that's - I raise these
21 issues with the most alarm and concern that I can
22 muster. I'd like to just circle back on one item
23 that the Chair raised which was, I believe
24 Commissioner you testified that when somebody is out
25 for nonvacation reasons for 40 days, that's when you

1
2 take a look at whether you need to assess whether
3 they can continue to say on the DOC workforce or
4 further, you know what the – you look at their
5 individual case further when an officer is out for
6 more than 40 days. Is that right? Is that what I
7 heard you say?

8 LYNELLE MAGINLEY-LIDDIE: Yes, there's a new
9 policy but there are several things with respect to
10 that policy but yes.

11 COUNCIL MEMBER RESTLER: Because the thing that
12 was really disconcerting to me in the PMMR is that
13 this year, DOC is on average that every officer is
14 slated to be on average 29.3 days. So, missing a
15 full month of work for sick or other issues, that's a
16 lot of time that we're losing that officers should be
17 showing up to their job but they're not. So, the
18 fact that you're saying the 40 days, it's an alarm
19 that you start to do a further analysis if action
20 needs to be taken and the 29.3 days is the average
21 for entire workforce. It strikes me that we continue
22 to have a very serious issue of chronic absenteeism,
23 and I know this has been a priority of your
24 predecessor. I hope it continues to be a priority
25 for you. We have to get this under control.

1
2 LYNELLE MAGINLEY-LIDDIE: I actually managed the
3 - I actually oversaw the management of the Health
4 Management Division beginning spring of 2022 and it
5 is a concern of mine. Also, to make sure that staff
6 are well right? It's a difficult job. They work
7 extremely hard.

8 COUNCIL MEMBER RESTLER: Absolutely.

9 LYNELLE MAGINLEY-LIDDIE: And so, we are ensuring
10 that our staff get the assistance and the care and
11 wellness that they need to do their jobs and do it
12 effectively,

13 COUNCIL MEMBER RESTLER: I appreciate that and I
14 share very much that sentiment. Last question for me
15 and it's just something that Council Member Stevens
16 raised. The hard numbers, if I have them right on
17 the city sentence population at Rikers, and I
18 appreciate Deputy Commissioner Torres testimony or
19 comments on this as well, are that we've gone from
20 142 at the beginning of the Mayor's tenure, city
21 sentenced individuals to 485 or so today.

22 LYNELLE MAGINLEY-LIDDIE: I believe the number
23 yesterday was 420.

24 COUNCIL MEMBER RESTLER: 420, okay. We're still
25 at uh, that's still 142 to 420 is still a three-fold

1
2 increase since the Mayor came into office. Over
3 these two years, we've seen the city sentence
4 population triple. As has been noted, this is the
5 one thing that you can directly control in terms of
6 the population at Rikers. We've seen a 30 percent
7 increase in the total population but a tripling of
8 the city sentence population since the Mayor came
9 into office. Can we get any more firm commitment
10 from you that you're going to aggressively use your
11 6A powers to reduce unnecessary incarceration and
12 shorten jail terms?

13 LYNELLE MAGINLEY-LIDDIE: I'm going to be
14 reviewing and assessing everyone. The FDC and I meet
15 very regularly on this process and that is what I
16 will do.

17 COUNCIL MEMBER RESTLER: I just, I hope, hope,
18 hope that you'll take advantage of the authority
19 that's in your power. The last comment I'll make is
20 just that the Council offered to pay for the reentry
21 programming this year. Last year, Deputy
22 Commissioner Torres testified that it was uniquely
23 only a budgetary decision that you all chose to
24 eliminate this reentry programming. We offered to pay
25 for it. The Mayor and your team said no. You didn't

1 want the eyes and ears in Rikers. As a result, from
2 June 2023 – from June 2022 to July 2022, from that
3 when the fiscal year shifted, we saw half as many
4 people access reentry programming and services like
5 this (FINGERS SNAPPED) as soon as you eliminated that
6 programming. While we appreciate it coming back, the
7 10-to-15-month timeline that your First Deputy
8 Commissioner testified to today means that we're
9 going to have about a two-year period, two-year total
10 period that people don't have access to the reentry
11 services that they need. That is an absolute
12 disaster. It is a failure to the people who are on
13 Rikers Island. Who are going to be coming back into
14 our communities who don't get the support that they
15 need to do better when they're home and I really just
16 am, we should not – you've done the right thing by
17 putting the money in now. It should never have ever
18 happened and that is a travesty.

19
20 So, I just have to say that on the record. Thank
21 you Chair Nurse, I appreciate the time.

22 CHAIRPERSON NURSE: Thank you Council Member
23 Restler. I just want to build off the jail
24 population reduction and numbers. How long on
25

1
2 average are people staying at Rikers after sentencing
3 is complete before going upstate?

4 LYNELLE MAGINLEY-LIDDIE: Chair, I don't believe
5 I have that number with me right now but that is
6 something we can follow up with you after.

7 CHAIRPERSON NURSE: I think from my
8 understanding, it's about two and a half years. We
9 would love that follow up. We would love that follow
10 up. How long on average are people staying at Rikers
11 after being found not competent to stand trial before
12 going to a state mental hospital for treatment?

13 LYNELLE MAGINLEY-LIDDIE: That is another data
14 point that we'll have to follow up with you on.

15 CHAIRPERSON NURSE: Okay, just circling back on
16 staffing and overtime and I know that something, this
17 was touched on a little bit in your testimony but
18 does the department have up to date facility
19 operating plans or other staffing analysis that lay
20 out the number of posts and staff needed per shift to
21 properly run each open facility and ancillary
22 services like transportation.

23 SHERRIE REMBERT: One moment please.
24
25

1
2 CHAIRPERSON NURSE: Do you not have – do you guys
3 have facility operating plans that let you know you
4 have staff? Like what your staffing needs are?

5 LYNELLE MAGINLEY-LIDDIE: Yeah, we have an
6 operating table of organizations.

7 SHERRIE REMBERT: The operating table of
8 organizations yes, we do use it. To give you the
9 number of staff as acquired is a magical number based
10 on the number of persons in custody as well as the
11 infrastructure of the facilities.

12 CHAIRPERSON NURSE: Okay, I just would love to
13 have that analysis provided to the Council.

14 SHERRIE REMBERT: Yes ma'am.

15 CHAIRPERSON NURSE: You mentioned, can you say
16 more about the SMART unit that you said you were
17 launching?

18 LYNELLE MAGINLEY-LIDDIE: It's actually, it's
19 already been instituted and the Chief can actually
20 talk a little bit more about the smart unit because
21 that unit is primarily responsible for deploying
22 staff throughout the jails. And so Chief.

23 SHERRIE REMBERT: Thank you. Thank you for the
24 question. The SMART team is a scheduled Management
25 and Redeployment Team and some of their functions are

1
2 to monitor, to generate schedules on a weekly basis
3 for the facility, balance squads, analyze staffing to
4 ensure that we get a balance of staffing into the
5 facility, challenge the facility as well as all the
6 facilities.

7 Also, the SMART unit reviews the overtime
8 reduction to make sure that we eliminate overtime in
9 facilities where needed without hampering our
10 security perimeters. SMART team looks at – makes
11 sure that we do not go into any type of unstaffed
12 posts, triple tours. So, the squad team takes care
13 of all that.

14 CHAIRPERSON NURSE: And how long has this been in
15 use?

16 LYNELLE MAGINLEY-LIDDIE: It's fairly recent.

17 SHERRIE REMBERT: Yes ma'am, yes it's fairly
18 recent. It's only about I would say no more than a
19 year.

20 CHAIRPERSON NURSE: Okay. DOC has a history of
21 underbudgeting uniform overtime spending while using
22 accruals to cover the shortages. In this plan, your
23 agency has a new need of \$161.1 million for
24 additional personnel services, primarily driven by
25 overtime for fiscal year 2024. Can you please

1
2 clarify why the department also included a PEG in
3 this plan that reduces overtime funding in FY24 by
4 \$58 million?

5 LYNELLE MAGINLEY-LIDDIE: Thank you for that
6 question. I'm going to turn that question over to DC
7 Srinivasan.

8 MALA SRINIVASAN: Yes, uhm, yeah, so did take
9 accrual savings as a result of uh, a lower headcount
10 and an authorized headcount and also one of the
11 initiatives were overtime reduction and we plan to
12 achieve this overtime savings through the
13 reassignment to posts, reducing the sick time as well
14 as civilianization.

15 CHAIRPERSON NURSE: Okay, is there a correlation
16 between the new need for an increase in PS spending,
17 the PEG that reduces PS spending by \$30.9 million and
18 the overtime reduction?

19 MALA SRINIVASAN: Yes.

20 CHAIRPERSON NURSE: Do you have any plans to
21 incentivize staff to work in housing areas to ensure
22 there are enough officers and civilians to deliver
23 essential services for incarcerated people and meet
24 minimum standards? For instance, have you considered
25 allowing officers in housing areas to work 12-hour

1
2 shifts, fewer days a week or some other shift
3 incentive?

4 LYNELLE MAGINLEY-LIDDIE: That is something
5 that's ongoing and we're in further discussions with
6 the Federal Monitor on staffing.

7 CHAIRPERSON NURSE: And when will we have some
8 idea of a plan for that?

9 LYNELLE MAGINLEY-LIDDIE: In the coming weeks.

10 CHAIRPERSON NURSE: Okay, great. I want to turn
11 to the conditions the facilities. There have been
12 reports of people in custody handwashing their
13 clothing in small sinks, as they often do not have
14 access to laundry as often as necessary. Are all the
15 washers and dryers fully functioning in every unit?

16 LYNELLE MAGINLEY-LIDDIE: So, that is something
17 that we're looking into. We had this discussion at a
18 Board of Correction Hearing with respect to laundry.
19 I can tell you right after that hearing, I went to
20 that facility where a lot of those complaints rose
21 out of. Uhm, we are looking into making sure that
22 people provided with laundered services and we're
23 exploring if even an outside contractor but that is
24 also something that we're going to be monitoring with
25

1
2 this audit process to ensure that people are getting
3 the minimum standards that they need.

4 CHAIRPERSON NURSE: Okay, yeah, I think you know
5 some of the reports were that people were washing
6 their clothes in the toilets or wearing their clothes
7 in the showers to clean them. And I know when I
8 visited, I had personally watched people trying to
9 clean their clothes. I mean it was pretty gross and
10 so, I think that would be an urgent need. Do you
11 have alignment for what the Fiscal 2025 budget for
12 laundry services in the city jails is? And if not,
13 can you follow up with that?

14 MALA SRINIVASAN: We can provide you details.

15 CHAIRPERSON NURSE: Okay. Give me one second.
16 So, I want to talk a little bit about death in
17 custody. Nine people died in 2023 while in DOC
18 custody and according to reports produced by the
19 Board of Correction, these individuals were often
20 left unsupervised in the hours before their death and
21 they were often not taken to scheduled medical
22 appointments by DOC officers. How have the
23 recommendations from the Board of Correction been
24 received by the Department and what actions are being
25

1
2 taken to prevent these types of incidents in the
3 future?

4 LYNELLE MAGINLEY-LIDDIE: So, every death in
5 custody is a tragedy and we take it very seriously.
6 I can tell you that the department has done a lot in
7 terms of training officers with respect to utilizing
8 Narcan. As of March 5th, our training numbers for
9 officers 91 percent. We're also utilizing, making
10 sure people are trained with CPR training and also we
11 are constantly having a conversation also with our
12 partners at CHS. Following every death in custody,
13 there's a joint review, joint action review where we
14 look at the incident and we determine if there are
15 any short of gaps or inefficiencies or things that we
16 need to address so that it doesn't happen going
17 forward.

18 In addition, we've implemented a suicide
19 prevention committed and DC Saunders can talk a
20 little bit more about that on all the work that we've
21 been doing because it's something that we also have
22 provided to the Federal Monitor and we just got,
23 recently got a report from one of our - one of the
24 experts who have been working with us through this
25

1
2 process and it was pretty – he acknowledged that we
3 have made a lot of strides in this process.

4 JAMES SAUNDERS: Thank you for the question.

5 James Saunders, Deputy Commissioner. So, with
6 respect to deaths in custody and working closely with
7 our colleagues in CHS as the Commissioner stated,
8 after every in-custody death there is a joint
9 assessment review two days following the death, seven
10 days following the death and thirty days following
11 that death. And so, the purpose of that is to
12 determine whether or not there's any immediate,
13 medium range or long-range measures that can be taken
14 to remediate any of the causes surrounding the
15 deaths. Last year we experienced eight deaths, two
16 of those were deemed by the Office of the Chief
17 Medical Examiner to be suicide. We were very
18 concerned with that obviously and so we've
19 implemented a suicide prevention task force. That
20 taskforce is charged with looking at every suicide
21 that is committed. We look at the data. We look at
22 the number of individuals who are placed on suicide
23 watch and on that Committee, we have senior
24 leadership on the mental health side from CHS as well
25 as senior leadership on the operation side. So,

1
2 there's a lot more collaboration surrounding controls
3 that can be put in place to prevent suicides.

4 CHAIRPERSON NURSE: Okay, thank you for that. I
5 mean I think, I'd be curious to see what those
6 recommendations, how those recommendations are
7 different from what we've been seeing from reports.
8 It seems from the Federal Monitor, it seems that
9 consistently when they look at the deaths and the
10 suicides, it was you know a lack of people being on
11 their post or doing their tour consistently or not
12 you know, getting the next up in the chain to come
13 down or not providing first aid and CPR. So, what
14 are you doing to ensure that you have adequate
15 staffing in the housing units, in the jails and to
16 keep them at their post and making sure that they're
17 doing their tours on time?

18 JAMES SAUNDERS: So, after every death, we
19 conduct a very, very thorough investigations that's
20 conducted by the forensic unit and our operations,
21 right? The folks on the operations side and I can
22 tell you with respect to deaths where there were
23 findings, where the officers were not conducting
24 meaningful tours, they were appropriately
25 disciplined. And so, between the training and the

1 discipline, you know we are seeing improvements. We
2 also have an observation aid program in place whereby
3 people in custody have an opportunity to work as a
4 suicide prevention aid. It's one of the highest paid
5 work assignments in Department of Corrections. And
6 so, that provides us with an extra set of eyes on all
7 three tours. Their job is to again, serve as that
8 extra set of eyes. Not to intervene but to alert the
9 officers who themselves have to conduct meaningful
10 tours. And so, we're -

12 CHAIRPERSON NURSE: It seems that you know one of
13 the things that we saw in some of the reports were
14 that the accountability measures were you know two
15 weeks someone off, you know an officer off. Someone
16 dies and then there's two weeks of a period where
17 they're just off.

18 It doesn't really feel like a strong
19 accountability measure given the preventable loss of
20 life. An intervention could have been made had
21 someone been at their job doing the work that they're
22 supposed to be doing in the right place and the right
23 time while providing first aid. So, I'd love to if
24 you could, in the follow up give us more information

25

1
2 about the uhm, unit you just mentioned, the watch,
3 the Suicide Watch.

4 JAMES SAUNDERS: So, the observation aids.

5 CHAIRPERSON NURSE: Observation aides, yeah.

6 JAMES SAUNDERS: Policy and the staffing levels
7 currently.

8 CHAIRPERSON NURSE: Okay. Council Member Brewer
9 had another question.

10 COUNCIL MEMBER BREWER: I appreciate it. I'll be
11 very quick. So, I just wanted to say about the
12 tablets, because I believe that everybody has one if
13 you could be clear on that and then how they're used
14 and then Secure Us I think is the contractor. There
15 has, I want to know what their contract budget is,
16 how long it is, and then there was a concern about
17 privacy on that particular contract. Those are my
18 questions.

19 MALA SRINIVASAN: Thank you for your question
20 Council Member. The Secure Us contract, we have a
21 base contract that provides tablets to the
22 population. The contract, the annual value of the
23 contract is \$5.4 million and the contract, the
24 renewal contract ends in the end of this calendar
25 year 2024.

1
2 COUNCIL MEMBER BREWER: Okay, are there any
3 concerns about privacy? How was that handled in
4 terms of peoples information? I mean you know, we're
5 all concerned about that, cameras, AI etc., but is
6 there some oversight on how information, in other
7 words, private contractor, access to the tablets?
8 How do you monitor, make sure that peoples private
9 information is not part of the private contract?
10 It's not just this contract, you know but in general;
11 we're concerned about privacy.

12 LYNELLE MAGINLEY-LIDDIE: That's something that
13 our IT division works closely with with OTI and when
14 we're negotiating these contracts. So, that's
15 something that discussed as we're negotiating the
16 contract.

17 COUNCIL MEMBER BREWER: Yeah, but you have the
18 contract now.

19 LYNELLE MAGINLEY-LIDDIE: That's correct.

20 COUNCIL MEMBER BREWER: So, could somebody get
21 back to me to make sure that this is being monitored?
22 I have heard a lot of complaints about it, so that's
23 why I'm asking. Because people are worried about
24 their private information. You know if it was you
25 running it, they may not feel the same way but this

1 is a private contractor. Obviously, private
2 conversations need to be private and not shared with
3 a private contractor. You understand what I'm trying
4 to say.

5
6 LYNELLE MAGINLEY-LIDDIE: I agree.

7 COUNCIL MEMBER BREWER: And I understand that's
8 not happening so I'd like to know from you what
9 safeguards we have to be sure that this company is
10 not taking any information that they shouldn't be.

11 LYNELLE MAGINLEY-LIDDIE: I will check with OIT
12 division and get back to you on that.

13 COUNCIL MEMBER BREWER: Thank you.

14 CHAIRPERSON NURSE: I just have a couple more
15 questions. I know you all are running on the clock
16 as well. I wanted to talk about the use of chemical
17 agents or pepper spray. The Board of Correction
18 released a report that looked at a number of
19 incidents where chemical agents were used. Uhm, it
20 looked at a period about ten months. The first ten
21 months of 2023. It was used 2,972 times. The report
22 lists several instances where officers used a
23 chemical agent on individuals who appear to be
24 inflicting self-harm on eight separate occasions as
25 well as an instance where a detainee was shackled to

1
2 a wheelchair later to find that he was only out of
3 his cell because he had not received his blood
4 pressure medication for two weeks.

5 We also saw that the report showed that officers
6 are utilizing the strongest form of chemical agent
7 and may not have been trained recently or retrained
8 recently on this. So, how are you all responding to
9 that report? What actions are you taking to ensure
10 that officers are following proper de-escalation
11 protocols and proper protocols for the use of
12 chemical agents?

13 LYNELLE MAGINLEY-LIDDIE: So, we just received
14 that report, so we are looking through that report
15 internally. We're actually uhm, presenting at a
16 Board of Correction hearing next week to go through
17 it but we're still going through it right now and we
18 could follow up with you in terms of what steps we're
19 going to take but we're still, that's still ongoing
20 internally.

21 CHAIRPERSON NURSE: Okay. Okay, I breezed
22 through that in a day. It had some pretty clear
23 recommendations. The BOC report, this report also
24 noted that fewer than half of the incidents were
25 captured on body worn cameras because staff were not

1 to remove the pollution limits from the state that
2 the state puts on the facility. This would increase
3 the amount of air pollution, incarcerated people,
4 workers on Rikers Island and in surrounding
5 communities are exposed to. Is the project, is this
6 project moving forward in 2024? How much is budgeted
7 and if you have any, if you've spend any money on
8 consultants for this project?
9

10 PATRICK BENN: Good afternoon. I'm Deputy
11 Commissioner Patrick Benn DOC, I'm in charge of FMRD
12 so it falls on me. Yes, the generator pollution
13 project is moving forward and the exact numbers, I
14 don't know off the top of my head. I will have to
15 get back to with it but yes, it is moving forward to
16 remove the pollution.

17 CHAIRPERSON NURSE: Okay, uhm, sorry I did have
18 one more question. I'd be remiss if I didn't ask.
19 Has DOC been in any conversations regarding the now
20 decommissioned buildings in terms of when we might be
21 turning the new building, vacancy and vacant land
22 over to DCAS? Have you been in any conversations
23 where there is a plan being developed?

24 LYNELLE MAGINLEY-LIDDIE: We continue to assess.
25 Right now there are no available properties to turn

1
2 over but that's something that's ongoing, our
3 assessing of that.

4 CHAIRPERSON NURSE: Yeah, when we toured, we
5 toured fully outside of facilities, a swath of open
6 vacant land that has no plans you know, storage
7 containers that probably need to be emptied. Offices
8 that are being used. It seems like there was
9 actually an abundance of land available to transfer
10 over. As we know, the Administration is now almost,
11 coming up on almost five times of being noncompliant
12 with the renewable Rikers law of 2019. There's just
13 really no rationale for not transferring these
14 parcels of land open. We're not building new jails,
15 so any vacant land should just be turned over and it
16 would be really great to see some kind of plan for
17 how the city can become compliant because it really
18 would be very simple to start handing over some of
19 those parcels over to DCAS.

20 LYNELLE MAGINLEY-LIDDIE: Okay.

21 CHAIRPERSON NURSE: Okay great. Thank you
22 Commissioner. It was nice to meet you in person.
23 Thank you for being here and we're going to take
24 another break. Thank you.

25 LYNELLE MAGINLEY-LIDDIE: Thank you.

1
2 BREAK [04:04:08]- [04:18:39]

3 CHAIRPERSON NURSE: Alright ladies and gentlemen
4 were going to keep going. Welcome, welcome to our
5 Friday hearing. I'm going to turn it to our
6 Committee Counsel to swear you in.

7 COMMITTEE COUNSEL: Thank you. I'll now swear in
8 our last panel of Administration witnesses from the
9 Board of Corrections. We have Jasmine Georges-Yilla,
10 Melissa Cintron Hernandez, Danielle Ortega, and
11 Katrina Blackman. If you could all please raise your
12 right hands. Do you affirm to tell the truth, the
13 whole truth and nothing but the truth before this
14 Committee and respond honestly to Council Member
15 questions? Noting for the record, all witnesses
16 answered affirmatively. You may begin your
17 testimony.

18 JASMINE GEORGES-YILLA: Thank you. Good
19 afternoon, Chair Nurse and members of the New York
20 City Council Committee on Criminal Justice. I am
21 Jasmine Georges-Yilla, Executive Director of the New
22 York City Board of Correction. I am joined today by
23 BOCs Deputy Executive Director of Administration,
24 Danielle Ortega, our Assistant Executive Director of
25 Monitoring, Katrina Blackman, and our General

1
2 Counsel, Melissa Cintron Hernandez. Thank you for
3 the opportunity to testify.

4 The Board has carried out critical independent
5 oversight of the city's jails since 1957, despite
6 being a relatively small agency with limited
7 resources. The New York City Charter outlines the
8 Boards broad mandates to establish local regulations,
9 investigate any matter within the jurisdiction of the
10 Department of Correction and evaluate the Department
11 and Correctional Health Services performance. The
12 Boards minimum standards set the baseline for what
13 must be provided to people in custody.

14 We thank the City Council for investing in the
15 Board as a key partner in the strategy to transform
16 the jail system and the broader criminal justice
17 system. The one-year funding that the Council
18 provided for four positions in Fiscal Year 2024 was
19 extremely helpful. Indeed, despite six employee
20 separations in the past year, we were able to hire
21 two additional correctional standard review
22 specialists to monitor the jails and we created and
23 filled a Director of Appeals position and an
24 Assistant Executive Director of Intergovernmental
25 Affairs position. We also restructured our

1 operations to optimize productivity and performance
2 as we work to fulfill the priorities of the Board and
3 comply with the laws enacted by the City Council.

4 Last year, despite difficult circumstances, we
5 published two death reports, a report on the North
6 Infirmary Command Fire, and a progress report on the
7 City's Borough Based Jails plan. So far in 2024, we
8 have published on death report and assessment on the
9 Departments use of chemical agents, and a Borough
10 Based Jails progress report.

11
12 In 2024, and beyond, we are committed to
13 providing more frequent and timely reporting centered
14 on deaths, serious incidents, and Minimum Standard
15 Compliance. With more resources we can do much more.

16 Despite the Board's huge mandate and ambitious
17 goals, we are a very small agency with an expense
18 budget of \$3.17 million, which supports a headcount
19 of 29 positions in Fiscal Year 2025. At present the
20 Board has 24 active staff and nine vacant positions,
21 which we are working to fill. As part of the Fiscal
22 2025 Financial Plans, the Board sustained budget
23 reductions totaling \$672,000 in Fiscal Year 2024 and
24 \$313,000 in Fiscal Year 2025, a part of citywide
25 programs to eliminate the gap. The cuts included the

1
2 agency's loss of two full-time positions in Fiscal
3 Year 2024 and the outyears, a research and compliance
4 associate position and a Special Investigations
5 Coordinator position. For an agency as small as the
6 Board, this will present serious challenges to
7 meeting our Charter and legislative mandate.

8 Indeed, these cuts reduced the Board's already-
9 small research operations by 25 percent, a move from
10 four to three research staff. And we currently only
11 have one Research and Compliance Associate due to two
12 separations. This loss impedes the agency's progress
13 towards robust and timely data reporting.

14 Following the Council's historic vote to fund new
15 jail construction and close Rikers Island, this is a
16 moment for the expansion of independent jail
17 oversight, not retraction. As it stands, the Board's
18 Fiscal Year 2025 budget represents .3 percent of the
19 budget of the Department. Adjusting our Fiscal Year
20 2025 funding and headcount to our initial Fiscal Year
21 2024 budget, which is 35 positions and \$3.8 million,
22 which amounts to just \$673,000, will allow us to meet
23 our mandates more effectively. In Fiscal Year 2025,
24 the Board requires additional funding to increase its
25 staff so we can consistently publish data driven

1 reports, meet requirements set by City Council,
2 increase public engagement, and monitor conditions of
3 confinement for the thousands of people in custody
4 during DOCs 24-hour operation. Specifically, the
5 Board is seeking funding for 20 new positions across
6 the agency and the ability to fill four additional
7 positions using existing vacancies.
8

9 Monitoring staff are critical to BOC's mission.
10 We currently have only 12 monitoring staff who work
11 in the jails, court pens, and hospital jail wards,
12 speaking to people in custody and resolving
13 complaints about conditions of confinement. As you
14 know, there are thousands of people in custody.
15 Yesterday, there were 6,246 people in the Departments
16 care. Funding to expand the Board's monitoring
17 operations is crucial because lives and fundamental
18 fairness are at stake.

19 Furthermore, it is vital that BOC have sufficient
20 headcount to thoroughly research and understand the
21 numerous data points and material that we receive
22 from both DOC and CHS. While we anticipate having a
23 Director of Research and Monitoring Compliance join
24 our sole Research and Compliance Associate later this
25 month, there is still a need to increase the research

1 staff and analytical capacity of our agency. Funding
2 for five additional research staff will support our
3 commitment to evaluating and analyzing operations and
4 outcomes in the jails, increasing transparency and
5 timely data sharing.

6 We also request more funding and headcount for
7 our Legal team. The Special Investigations unit is a
8 two-person unit responsible for investigating various
9 incidents within DOCs facility. This includes deaths
10 in custody, unresponsive persons in custody, fires,
11 or any other incident that falls under the unusual
12 incident category. An additional Special
13 Investigations Coordinator would allow the Board to
14 identify many more incidents in custody and is
15 essential for the Board to fulfill its mandate to
16 investigate incidents in custody and issue timely
17 public reports. The Special Investigations unit
18 would also benefit greatly from a part time doctor or
19 nurse practitioner with the expertise to analyze
20 medical records, give independent advice, and help
21 lead the joint reviews with the CHS staff.

22 Moreover, to support the agency's vital work
23 related to visit appeals and its impact on both
24 incarcerated persons and their loved ones, BOC
25

1
2 requests one position and associated funding to hire
3 an appeals coordinator to join our one-person appeals
4 unit. More funding and headcount will also bolster
5 our violence prevention unit. More resources will
6 allow the Violence Prevention Unit to conduct routine
7 assessments of matters of violence in the jails and
8 issue more frequent comprehensive reports that make
9 recommendations in areas of key correctional
10 planning.

11 Additionally, the agency currently does not have
12 any staff dedicated to monitoring the standards on
13 the elimination of sexual abuse and sexual harassment
14 under the Prison Rape Elimination Act. We are
15 requesting funding to add one PREA Research Associate
16 and one PREA Coordinator to the Violence Prevention
17 Team. These new positions would allow BOC to
18 routinely assess DOCs compliance with the PREA
19 reporting provisions, conduct annual audits of DOCs
20 closing memos on investigations of sexual abuse and
21 harassment allegations, analyze sexual abuse and
22 harassment allegations, and closely monitor the
23 housing decisions for transgender individuals in
24 custody.

1 The Boards General Counsel Office is also a one-
2 person unit. Currently, our General Counsel handles
3 all requires made under the Freedom of Information
4 Law, all policy and rule-making matters and serves as
5 the agencies Chief Contracting Officer and Records
6 Management Officer. The Board is in the process of
7 drafting amendments to Chapter 6 of its rules to
8 align its existing standards banning solitary
9 confinement with the requirements of Local Law 42 for
10 the year 2024. The Board would greatly benefit from
11 the addition of a Deputy General Counsel and Legal
12 Associate to assist with this rule making process and
13 all other legal matters.
14

15 We also request more funding and headcount for
16 our Administration and IT units, specially we need a
17 dedicated staff person to work on human resources and
18 EEO matters, and a dedicated budget analyst.

19 Moreover, BOC only has one IT staff person, a
20 Director of IT, who supports all agency operations
21 across two BOC office locations in downtown Manhattan
22 and on Rikers Island. One IT person is not
23 sufficient for the long-term stability of the agency.
24 The Board needs six new positions to support its IT
25 operations and systems.

1
2 BOC has previously requested funding for a new
3 secure information technology and data management
4 system that will keep pace with DOCs transition to
5 new technology and the Boards mandates to investigate
6 and evaluate jail conditions and monitor compliance
7 with the minimum standards. We renew that request
8 for future funding today. Investment in a new
9 technology system is critical to BOCs long term
10 stability and necessary to continue the Boards data
11 driven oversight.

12 BOC also needs additional staff to focus on the
13 review of the city's borough-based jails plan, as
14 required by Local Law 192 for the year 2019.
15 Currently, BOC does not have a dedicated staff person
16 in this area, which has resulted in delayed
17 reporting. We hope to hire a Program Associate to
18 fill this void. In the meantime, the Board will
19 continue to seek opportunities to be involved in
20 discussions concerning the design and construction of
21 the new borough-based facilities to ensure the
22 minimum standards are met.

23 The Board is essential to the success of the
24 reforms that the City Council and the Administration
25 seek to realize. Without the appropriate funding,

1
2 the Board will struggle to meet these shared goals
3 and legislative mandates. It is essential that
4 funding for our critical positions be restored and
5 additional funding be provided, so we can meet both
6 our mandate and our promise.

7 Thank you again for the opportunity to testify
8 today. I'm happy to take any questions.

9 CHAIRPERSON NURSE: Thank you so much. Uhm, I
10 just have a few questions. So, I wanted to talk
11 about your headcount vacancy rate and the impact of
12 that on charter mandated reports and then some of the
13 stuff that you brought up in your testimony.

14 The Board Chair has recommended increasing the
15 presence of Board Monitoring staff in the jails by
16 expanding monitoring hours to nights and weekends.
17 How many additional staff with the Board need to
18 expand its monitoring hours?

19 JASMINE GEORGES-YILLA: Thank you for that
20 question. That was actually one of our priorities
21 last year when we testified before the Committee and
22 we requested 27 additional staff to be able to
23 implement that sort of vision. And we did not
24 receive that funding unfortunately and we've had to
25 restructure due to the PEGs. So, I would say 27 as

1
2 we asked for it last year but I'd ask my Deputy
3 Executive Director of Administration to fill anything
4 in.

5 CHAIRPERSON NURSE: Okay.

6 DANIELLE ORTEGA: Thank you and so that is
7 correct but we can also share the prior proposal with
8 Council Finance.

9 CHAIRPERSON NURSE: Okay and do you know what the
10 budget – that budget amount would be for those 27
11 staff that you were hoping to get?

12 DANIELLE ORTEGA: I'll have to get back to you
13 with that information.

14 CHAIRPERSON NURSE: Okay, so in light of the law,
15 in solitary confinement that we managed to get
16 through, uhm will the Board need additional staff to
17 monitor implementation and compliance with the law
18 when it takes effect?

19 JASMINE GEORGES-YILLA: Yes, absolutely we will.
20 It will require a lot of engagement with DOC and CHS
21 and monitoring inside the jails and making sure that
22 reports are being produced. So, yes.

23 CHAIRPERSON NURSE: And so, with that 27 staff
24 that you were hoping for, that would be a part of –
25 it would be overlapping work in that?

1 JASMINE GEORGES-YILLA: Yes.

2 CHAIRPERSON NURSE: Okay. Uhm, you know when we
3 asked Commissioner Jiha was it Monday? Monday was
4 the hearing like two weeks ago, you know why there
5 was a proposed cut for the Board of Corrections, he
6 said, "well, you know these positions are
7 underutilized, they are vacant and that's seems to be
8 an ongoing issue." That's what he said to us. My
9 understanding is these are really challenging
10 positions to fill given the nature of the work.
11 Could you expand a little bit more on what are those
12 challenges? Why is it hard to fill these positions?
13 Uhm, you know you could touch upon salary if you want
14 that we could use in advocating for more funding for
15 you all.

16 JASMINE GEORGES-YILLA: Yes, I would say the
17 challenges at least this year has been the hiring
18 freeze. We actually had postings for a part-time
19 position that would assist our special investigations
20 unit to review medical documentations. We had to
21 pull that due to the hire freeze. We also had a part
22 time HR specialist that we were going to hire for.
23 So, the nature of monitoring inside the jails is
24 definitely difficult but we want to increase our
25

1
2 staff so we can accomplish our mandate. So, we
3 should not be restricted by hiring freezes or any
4 thing of the such and we will definitely,
5 wholeheartedly move forward with filling any
6 vacancies.

7 CHAIRPERSON NURSE: Right and we argue that this
8 is a key function of public safety, which was one of
9 the exemptions for some of the folks from having a
10 hiring freeze. Prior to the hiring freeze, what type
11 of outreach had been done by the Board to try to fill
12 these positions?

13 DANIELLE ORTEGA: Sure, so the Board. So, I just
14 want to talk a little bit about free hiring freeze a
15 little bit because when we talk about our vacancies
16 and we talk about our vacancies right? Uhm, in
17 Fiscal Year 2023, the Board actually did make
18 increasing its headcount, increasing it's active
19 staff from 23 to 28, right? And so, as you start the
20 fiscal year, you know it further displays the impact
21 of the hiring freeze to the fact that we're now at
22 24, right? So, just to kind of talk a little bit
23 about our vacancies and give context that we are
24 trying and we are working.

1
2 So, what did we do? Uhm, so our postings, when
3 we post them, we post them on Jobs NYC, we also post
4 them on our website and you know to the fact that
5 opportunities for internal promotion are important,
6 we also spread them around internally so that our
7 staff are aware. One of the things that we are
8 looking at is how in the future, as we have
9 opportunities to hire, is to make more public our
10 vacancies and our postings and that includes working
11 for job boards, such as LinkedIn and Indeed and also
12 looking at opportunities by criminal justice schools.

13 One of our requests for an HR Generalist, uhm,
14 would also help with some of our recruiting and
15 retention activities.

16 CHAIRPERSON NURSE: Thank you. I just want to
17 turn to Charter mandated reports. The Board recently
18 released a report regarding the unnecessary use of
19 chemical agents on people in custody at Rikers. The
20 DOC Commissioner testified that they're going through
21 it but could you please share for the record the
22 recommendations that the Board has or any that you
23 particularly would like to highlight?

24 Recommendations that you have made to the Department

1
2 in order to avoid unnecessary use of chemicals, of
3 these chemicals moving forward.

4 JASMINE GEORGES-YILLA: Yes, I'll turn it over to
5 my General Counsel but I just wanted to initially say
6 that we did share a draft of the report with the
7 Department in January and there's actually an
8 addendum to the report, which is a response from DOC
9 and CHS. So, and also a part of our restructuring
10 has been to restructure our Board meetings to center
11 around minimum standards and to address issues such
12 as the use of the chemical agents, which is what our
13 meeting next week will focus on. So, we hope that
14 the Department comes prepared to address the
15 recommendation.

16 MELISSA CINTRON HERNANDEZ: Thank you Chair
17 nurse. Some of the recommendations that the Board of
18 Correction made in its report on the use of chemical
19 agents in the jails, include on training. The
20 Department should closely examine the current
21 chemical agent training for both officers and
22 captains. That also relates to recertification. One
23 of the findings was that officers are not getting
24 recertified on a timely basis and that a very small
25

1 percentage of captains are also not getting
2 recertified.

3
4 So, one of the recommendations is to increase its
5 training pace. In the aspect of monitoring, we noted
6 that there are issues with completing use of force
7 reports. So, one of the recommendations that we made
8 is identifying incomplete or incorrect use of
9 reports, ensuring that officers with expired OC
10 Training Certifications are not issued OC handheld
11 units, assessing the availability and response time
12 of captains to call us for assistance. We also made
13 recommendations when it comes to their policies. So,
14 where applicable, the Department should revise its
15 current chemical agent policies and practices related
16 to the following concerns. The authorization for the
17 use MK9, which is a very strong chemical agent that
18 is usually used for crowd control. We're advised the
19 anticipated use of force tracking and reporting
20 protocol, expand the use of body worn camera use in
21 the jails to always be on during the full shift,
22 attempt mental health interventions prior to chemical
23 agent deployment and review lower strength handheld
24 OC units. Pending to our report, the Department did
25 include some information about how they reviewed the

1
2 report and some of the recommendations that they will
3 take into consideration including reviewing the
4 trainings. And ensuring that officers and captains
5 are trained.

6 CHAIRPERSON NURSE: Thank you for that and the
7 Commissioner did testify that she was preparing to
8 come to you all with some response, so hopefully that
9 happens.

10 Uhm, I think that's one of my last questions. I
11 mean, I have a couple, just two more. The Boards
12 compliance dashboard of DOCs and Correctional Health
13 Services sexual abuse and harassment minimum
14 standards related reporting haven't been updated
15 since mid-2022 and the Department has not produced a
16 semi-annual report evaluating sexual abuse and sexual
17 harassment allegations which is required by those
18 standards since August 2020. Is the Boards delay in
19 reporting this information related to insufficient
20 staffing?

21 JASMINE GEORGES-YILLA: Yes it is and a part of
22 our restructuring to accommodate that is that we've
23 moved that reporting under our violence prevention
24 team and we hope to get back up to robust and timely
25

1 reporting in that area but we do require additional
2 staff.

3
4 CHAIRPERSON NURSE: Last question I think we have
5 from a Committee Member who uhm – okay, okay, okay.
6 I guess we have no further questions. Is there
7 anything that you would like to add to anything that
8 you've heard today? Anything you'd like the Council
9 to know while you're here at the table?

10 JASMINE GEORGES-YILLA: No, we just really want
11 to thank the Council for always supporting. We feel
12 it and we appreciate it and thank you.

13 CHAIRPERSON NURSE: Thank you for coming. Okay,
14 alright, thank you all for being here and happy
15 Friday. We're going to transition to testimony. I'm
16 going to kick it over to our Committee Counsel.

17 COMMITTEE COUNSEL: Thank you Madam Chair. We
18 will move onto public testimony. Just a quick
19 announcement for those wishing to testify in person,
20 please see the Sergeant at Arms in the back of the
21 room and fill out a testimony slip. Even if you
22 registered online, please fill out a testimony slip
23 with the Sergeants. All testimony must be on topic.
24 This hearing is being livestreamed and recorded.
25 Witnesses may not use a recording device to film

1
2 themselves or the proceedings while they are
3 testifying. For those wishing to testify and are
4 Zoom, after the in-person testimony, we will move
5 onto virtual testimony. Those on Zoom will be called
6 and promptly unmuted and we will be limiting public
7 testimony today to three minutes each.

8 Uhm, with that, I'll call up the first panel,
9 which includes Hannah May-Powers, Dalvanie K. Powell,
10 Amanda Berman, Barbara Hamilton and Sabastian
11 Soloman. You can start your testimony in whatever
12 order.

13 DALVANIE K. POWELL: Good afternoon. I was going
14 to say good morning. Good afternoon Chairperson
15 Nurse and Members of the Committee. My name is
16 Dalvanie and I'm the President of the United
17 Probation Officers Association. I want to thank the
18 Committee for affording me on behalf of the members
19 of the UPOA the opportunity to testify on employment
20 issues impacting the future criminal justice, the
21 future of criminal justice and the City of New York
22 for your consideration and preparing your
23 recommendations for the next fiscal years budget.
24 Probation Officers work every day to keep our city
25 safe while giving New Yorkers involved in the

1 criminal justice system a second chance. UPOA
2 members have bachelor's and masters degree in
3 education and work experience in social work, which
4 we use to help our clients begin to live lawful
5 lives.
6

7 We are charged by the city to oversee
8 approximately 15,000 men, women, and youth who have
9 been convicted of crimes and sentenced to probation
10 instead of jail, prison and placement. When we are
11 successful, we save the city and the state millions
12 of dollars by diverting people from being sentenced
13 and incarcerated. We are responsible for making sure
14 that they do not violate the terms of their probation
15 and work with them to turn their lives around. Our
16 members are peace officers, they serve on a taskforce
17 with other agencies such as US Marshals, Drug
18 Enforcement Agencies and NYPD. We carry firearms,
19 make arrests and execute search warrants and arrest
20 warrants.

21 Despite the role we play in law enforcement, our
22 members are considered civilians rather than law
23 enforcement officers which impacts our salaries and
24 benefits. Currently, we have approximately 668
25 probation officers, supervising probation officers

1 serving the Department of Probation. The vast
2 majority of our members are women and people of
3 color. This is a significant decrease from a decade
4 ago.
5

6 Prior to the Bloomberg Administration, there were
7 approximately 1,550 probation officers working in New
8 York City. Over the past several years, staffing
9 levels at the Department of Probation have reduced by
10 more than 50 percent. I am also providing you with
11 the DOP's resignation rate from January 2018 to
12 December 2022.

13 As staffing levels have decreased, our work load
14 has continued to increase. This is in part due to
15 bail reform and raise the age, which have increased a
16 number of the clients served on probation. This
17 cannot continue. To be able to perform our duties
18 and responsibilities, we need more support and your
19 help.

20 In June 2023, I was invited by DCAS to testify in
21 a public hearing to consider a proposal to
22 temporarily classify 3,000 noncompetitive class under
23 the Hiring Emergency Limited Placement, known as HELP
24 program. Unfortunately, we met the criteria and I'm
25 also providing with a notice for your review. The

1 Department of Probation has issues with retention and
2 recruitment. Our members are leaving for higher
3 paying positions. In the criminal justice system,
4 this includes other law enforcement agencies in New
5 York City as well probation departments in
6 neighboring counties. Our compensation lacks far
7 behind other law enforcement agencies even though we
8 work the same population and face the same dangers.
9 For example, based on our last contract, which
10 expired in November 2020, the hiring rate of
11 probation officers is 45,934, which is far lower than
12 the starting salaries in the NYPD, DOC and other
13 agencies. Although there's a salary range for our
14 titles, the majority of our member are suppressed at
15 the lower end of the range with almost no opportunity
16 to earn more to reach the top salaries.

18 Compared to other probation departments, our
19 salaries are lowest in the metropolitan area,
20 including Nassau, Suffolk County and Westchester
21 County. We do to the same work as Probation Officers
22 and nearby jurisdictions deserve the same pay. We
23 recently had the civil service examination for
24 probation officers in August 2023, for supervised
25 probation officers in May of 2021, and there has not

1
2 been a civil service exam for Administrative
3 Probation Officers since 2017. However, our recent
4 Administration has petitioned DCAS for Administrative
5 Probation Office Exam and finally it now begins April
6 3rd to the 23rd. We have begun to work with the
7 Mayor's Office to address some of these changes and
8 are hopeful that the newly appointed Department of
9 Probation Commissioner Juanita Holmes and her team
10 will be receptive. But if history is our guide, we
11 will need the Council's support to ensure that
12 members of Probation feel respected because they are
13 the frontlines as other alternatives to sentencing at
14 a time when we are striving to lower the population
15 of those who are incarcerated. I would appreciate
16 the opportunity to discuss with you further. Thank
17 you and I stand to answer any questions you may have
18 now and look forward to meeting with you and your
19 representative in the future. Thank you.

20 CHAIRPERSON NURSE: Thank you. Thank you very
21 much. Uhm, I didn't mention but you know everyone's
22 got three minutes. I usually let people in person go
23 a little bit longer but if after the bell rings you
24 could wrap up your remarks, I would suggest you know
25 long introductions by your organizations can be in

1
2 your thing. You know highlight what you really need
3 in that three minutes please. Thank you.

4 Good afternoon Chair Nurse and thank you also to
5 the members of the Criminal Justice Committee for
6 holding this hearing today. My name is Hannah May-
7 Powers and I am here today on behalf of Brooklyn
8 Borough President Antonio Reynoso to say
9 unequivocally that Rikers Island must be closed by
10 the legally mandated date of August 31, 2027.

11 According to the Vera Institute, the Department
12 of Correction spends more than \$556,000 per person
13 per year currently incarcerated on Rikers Island.
14 This is nearly 350 percent more per person than the
15 Los Angeles and Cook County systems. Yet Rikers
16 Island remains a humanitarian crisis. Even a single
17 death of an incarcerated person is too many; however,
18 30 people have died on Rikers Island alone since
19 January 2022.

20 Despite these egregious numbers, Mayor Adams
21 wants to cut funding to some of the most impactful,
22 research driven programs that help keep people out of
23 jail. These budget cuts include \$6.7 million for
24 alternatives to incarceration, \$13 million for
25

1 supervised release, and \$8 million for reentry
2 services.
3

4 The most bloated areas of spending for DOC, 88.3
5 of agency expenses are staff, salaries, benefits, and
6 overtime. There are approximately 901 current
7 vacancies of uniformed DOC staff, yet even with
8 these, the ratio of uniform staff to incarcerated
9 individuals is more than four times the national
10 average. Rightsizing DOC by cutting these vacancies
11 could free up \$162 million in Fiscal Year 2025 alone.
12 It is also necessary to hold uniform DOC employees
13 accountable for chronic absenteeism.

14 As of December 2023, the number of uniformed DOC
15 officers taking sick leave is nearly twice that of
16 pre-pandemic rates within the Department.
17 Approximately 8.49 percent of uniformed DOC employees
18 are out sick on any given day, which is nearly twice
19 the rate of NYPD and FDNY, agencies also have
20 unlimited sick time. Relevant budget areas include:
21 justice involved, support housing, and mental health
22 safety net, increasing the Board of Correction
23 headcount, increasing and funding alternatives to
24 incarceration, investing in our youth and keeping our
25

1
2 communities out of Rikers Island for their own
3 safety.

4 Thank you for this opportunity to participate in
5 the hearing today. The Brooklyn Borough President
6 looks forward to working with you to ensure that we
7 can keep our commitments to all New Yorkers and
8 address the many injustices happening daily on Rikers
9 Island. It's time to invest our public dollars to
10 supporting our neighbors instead of incarcerating
11 them.

12 AMANDA BERMAN: Good afternoon Chair Nurse and
13 esteemed staff of this Committee. My name is Amanda
14 Berman. I'm here today on behalf of the Center for
15 Justice Innovation and I'm here to talk a little bit
16 more about the critical need that we face for
17 continued funding of alternatives to incarceration
18 and alternatives to detention, which I know you know
19 full well Chair Nurse how critical they are. They
20 are critical to the goals of closing Rikers,
21 improving public safety, and also producing much
22 needed cost savings. And as you said Chair earlier
23 today in your opening remarks, we should be doubling
24 down in this moment on programs that have proven
25

1
2 track records of reducing recidivism and promoting
3 healing in this moment.

4 The Center for Justice Innovation, our work spans
5 every borough of the city and the entire justice
6 continuum, beginning with community-based prevention
7 efforts. Through prearrangement diversion, and pre-
8 trial supervision to alternatives to incarceration
9 for both felonies and misdemeanors. And not only do
10 we provide these services but we also study them. We
11 evaluate everything that we do to identify what works
12 and spread best practices in the field to produce
13 better outcomes. What do those better outcomes look
14 like?

15 For our participants it means meeting their
16 immediate needs, to provide a better sense of
17 stability, and assessing their long-term needs and
18 goals and connecting them to resources and services
19 that are designed to set them up for longer-term
20 success. Whether that be part of their mandate with
21 us or to follow up on a voluntary basis for them
22 after their case is over. So, this also includes
23 mental health, substance use services, of course
24 education and employment and housing just to name a
25 few. And throughout that process, we center the

1 dignity of every person that we serve and the
2 humanity of everyone of our participants. And better
3 outcomes are also captured in our data and that data
4 is often reflective of what we know to be the
5 research and the data in the field more broadly
6 around alternatives like this.
7

8 So, for example, our Brooklyn Mental Health Corp
9 works with participants who have serious mental
10 illness and have been released to our program as an
11 alternative to incarceration on serious felony
12 charges and we have a proven track record of reducing
13 recidivism. Our active participants in that court
14 are 46 percent less likely to be rearrested while
15 they are engaged with us, and the graduates are 29
16 percent less likely to be reconvicted.

17 Similarly, through our work at the Red Hook
18 Community Justice Center, we've also managed to
19 reduce recidivism, 10 percent for adults, 20 percent
20 for juveniles, and also resulted in cost savings of
21 \$6.8 million a year.

22 And finally, in our Supervised Release Program,
23 which we operate in the boroughs of Brooklyn and
24 Staten Island, we serve nearly 9,000 participants a
25 year to ensure that they return to court.

1
2 I'll wrap up if you'll indulge me with just
3 another moment. In Supervised Release, we are making
4 sure participants return to court and then connecting
5 them with services to make sure they have the
6 stability we need. We have an impressive 90 percent
7 appearance rate in that program, even as we serve
8 people with the most serious charges. And I know
9 that we have been in moment where there's a lot of
10 discussion right now about Rikers closure and whether
11 it is feasible to meet the deadline of 2027 and as we
12 see the population increase and I think it's clear,
13 we know what the answers are. We have those tools.
14 We know that these programs work and they can bring
15 the Rikers population down and it is just critical we
16 continue to invest. So, thank you for your time
17 today.

18 BARBARA HAMILTON: There we go. My name is
19 Barbara Hamilton. I've been working on city jail
20 issues since 2008 and I am not the Supervising
21 Attorney of Incarcerated Client Services at Legal
22 Aid. Thank you for the opportunity to testify here
23 briefly about the need to expand our work within the
24 city jails, as well as the need to increase
25 programming within the city jails.

1
2 Needless to say, people in carceral settings have
3 significant obstacles at hand and Legal Aid has
4 worked to support and to improve those conditions of
5 confinement in the city jails and to further the end,
6 Legal Aid operates an incarcerated persons crisis
7 hotline and has paralegals posted in every facility
8 to address the needs, not only of our own clients but
9 everybody within the city jails. And through this
10 testimony, Legal Aid is urging the City Council to
11 invest more funding to expand our hotline services
12 and our facility staff in each one of those jails.

13 DOC has even filed a letter of support in our
14 funding application to the City Council and they
15 recognize us as a critical resource and the need for
16 expansion. And second, uhm at a time when the city's
17 supposed to be on a path to closing Rikers Island and
18 creating smaller and more humane jails, divestments
19 in programming for incarcerated people are actually
20 contrary to these significant goals. And recent cuts
21 during the last Fiscal Year to programming
22 predictably had a decline for people in custody. And
23 to date, service providers at Rikers are not working
24 for free with limited services and limited staff.
25 This of course is not sustainable and not sustainable

1 for the future of the City jails in New York, and
2 although the Mayor has recently announced \$14 million
3 in programming, this is still \$3 million short of the
4 \$17 million budget cuts that happened last fiscal
5 year. And to remedy this, Legal Aid urges the City
6 Council not only to reinstate the funding but to look
7 to increase it moving forward so we further that goal
8 of creating a more just system. Thank you.

9
10 SEBASTIAN SOLOMAN: Good afternoon Chair Nurse.
11 My name is Sebastian Soloman and I am the Associate
12 Director of Policy of the Greater Justice New York
13 Program at the Vera Institute of Justice. Thank you
14 for the opportunity to testify.

15 We spend more than \$14 billion on jails and
16 police in New York City every year, yet many New
17 Yorkers still do not feel safe. Continuing to
18 overstaff and overfund our jails will not make us
19 safer. Yet once again, the Mayor's Preliminary Budget
20 for Fiscal Year 2025 shows continued overspending on
21 incarceration instead of adequate investment in
22 community-based safety solutions. It is past time to
23 listen to the evidence and take a different approach.

24 We urge the City Council to pass a budget that
25 invests in community-based supports to prevent crime

1 before it happens instead of just reacting to it
2 afterwards. The FY 2025 preliminary budget maintains
3 astronomical funding for the Department of
4 Correction, despite the city's commitment to
5 decarcerate, close, and replace Rikers Island with a
6 smaller borough-based jail system.
7

8 DOC's budget is set to decrease by just 3.3
9 percent compared to estimated FY 2024 spending,
10 remaining above \$2.6 billion. Meanwhile, despite
11 growing concerns about New York City's inability to
12 care for people experiencing mental illness,
13 substance use disorder, and homelessness, funding for
14 the departments serving these populations is set to
15 shrink significantly more in FY 2025.

16 The preliminary budget decreases funding for the
17 Department of Youth and Community Development by 25.4
18 percent, the Department of Health and Mental Hygiene
19 by 20.4 percent, and the Department of Social
20 Services by 14.9 percent, compared to their estimated
21 FY 2024 expenditures.

22 According to the New York City Comptroller's
23 office, in 2023, DOC employed approximately 400 more
24 correction officers than people in detention. In
25 contrast, in 2022, the typical American jail had a

1
2 uniformed workforce roughly one-quarter the size of
3 its jail population. The overstaffing on Rikers
4 inevitably results in overspending. Personnel costs
5 represent 88 percent of the Department's bloated \$2.6
6 billion budget.

7 Although the decarceration and construction plans
8 are behind schedule, New York City has a legal
9 obligation to close Rikers Island by 2027. To do so,
10 New York City must revamp DOC with staffing
11 proportionate to the smaller capacity of the borough-
12 based jail system and begin reducing budgeted officer
13 positions now. Current government projections
14 indicate that DOC intends for budget for 7,060
15 uniformed officers through the end of FY 2028,
16 suggesting plans to offset attrition with significant
17 hiring despite the decreasing need for officers.
18 Eliminating these uniformed vacancies to bring
19 budgeted headcount in line with actual headcount
20 would save a total of \$162 million next fiscal year
21 alone.

22 In addition to eliminating vacancies, DOC must
23 rein in overtime spending, which at \$157.9 – I'll
24 just skip through, but which is obviously way over
25 budget from what it was supposed to be and will be

1
2 much greater than it will be expected next year. So,
3 instead of continuing to fund DOCs mismanagement,
4 we've listed some alternative investments that we
5 think the City Council should focus on and longer
6 term, DOC must also right size its uniformed
7 workforce to match the smaller footprint of the
8 borough-based jails.

9 Natural attrition is neither fast nor targeted
10 enough to do so, and mass layoffs are not a viable
11 option. The city must enable DOC staff to begin
12 transitioning to agencies and sectors that provide
13 the same economic opportunity and job security
14 without the trauma of working on Rikers Island.
15 Thank you for the opportunity to provide testimony.
16 Please do not hesitate to contact me at the Vera
17 Institute of Justice may provide further support.

18 CHAIRPERSON NURSE: Thank you all. Thank you for
19 coming. Thank you spending all that time waiting.
20 Thank you.

21 COMMITTEE COUNSEL: Alright, I'll call up the
22 next panel. Victor Herrera, Darren Mack, Ashley
23 Santiago, Joanne Delapaz, Megan French-Marcelin,
24 Jennifer Parish and Yonah Zeitz.

25 We can start at this end of the table.

1
2 Madam Chair, do you mind if I just preface with
3 something that I wanted to reiterate throughout the
4 hearing today and thank you for the Committee Members
5 for allowing me to testify. I have the honor of
6 representing a directly impacted woman who is a
7 member of Freedom Agenda today and I'm honored to
8 read her testimony but it would be remiss of me to
9 not bring up Mary Ahuda today who lost her life on
10 DOC. A lot that came up today was how closely DOC
11 and Correctional Health Services work. When we saw
12 that Mary Ahuda upon intake was never checked for
13 diabetes, a complaint from February 2nd until her
14 loss of her life in May about shortness of breath,
15 pain in her arms and then DOC slandered her name and
16 said her death was because of a fentanyl overdose.

17 So, I just wanted to uplift her name today. Uhm,
18 today I am representing a Freedom Agenda member who
19 we will refer to as Ms. B. She has chosen to omit
20 her name because of her experiences. They continue
21 to make her fearful that law enforcement will
22 retaliate against her even though she has finished
23 serving her time.

24 Uhm, with me is a survivor of Rikers Island in
25 the New York State prison system a deeply traumatic

1
2 time in her life that she will be forever recovering
3 from. In her words, when I think about the time I
4 spent in jail and in prison, my mind never goes to
5 anything my mom and dad, who I lost – my mind never
6 goes to anything positive that was done for me.

7 On the contrary I think of being away from my
8 newborn son and my mom and dad who I lost while
9 serving time in jail and prison. I think of the
10 Corrections Officers accumulating vacation time and
11 getting new cars and homes while I was getting
12 sexually abused by the people entrusted to be
13 professional and provide care. I was punished for
14 that addiction so much more than the big players who
15 run the drug game and kept substance use going on
16 behind the walls at Rikers. Me and my people who
17 come from severely underfunded communities remain
18 easy targets for broken windows policing and fueling
19 mass incarceration when for decades are needs have
20 yet to be met. Instead of the ridiculous amount that
21 the city has spent to keep me locked up in traumatic
22 conditions away from my son, my family, my community,
23 that money could have been better funded to my
24 healing and to address the root causes of
25 difficulties I was experiencing.

1
2 That money should have been used to invest in
3 quality mental healthcare, crisis respite centers,
4 education and transition to long term housing, except
5 the city year after year, continues to write blank
6 checks for the Department of Corrections instead of
7 the services that have been proven to work. The
8 Mayor's budget shows to me that several New York City
9 agencies are going to suffer with less funding or
10 cuts such as the education system, the Health
11 Department and Youth Services. Even the Parks and
12 Recreation Department and Sanitation. The Mayor's
13 Budget promises to punish more poor people who have
14 no access to resources to get arrested and sent to
15 jail. The figures in this budget are also punishment
16 to taxpayers and an unmerited award to a grossly
17 mismanaged department.

18 New Yorkers are counting on our allies and City
19 Council to divest from the Department of Corrections
20 and invest in local communities, especially the ones
21 in the poorest parts of our city. That is the plan
22 to close Rikers that I fought for and we know we can
23 work with this Council to make a reality. Thank you
24 so much.

1
2 JOANNE DELAPAZ: Good afternoon Committee
3 Members. Thank you for allowing me to testify today.
4 My name is Joanne Delapaz, I'm a member of Freedom
5 Agenda. I live in Harlem New York. I am a mother to
6 two boys who are currently in Rikers Island and have
7 been there for the last year and a half fighting
8 their cases. Both of my sons were there because of a
9 Judge set a bail amount that I couldn't afford. The
10 back and forward from court dates alone is taking a
11 toll on my financially. There is no way I can pay
12 ransom they demand for my children's freedom.

13 The city has spent close to \$2 million so far
14 keeping my children on an Island where they are
15 isolated from the rest of the city. There is more
16 money than I ever thought invested in their wellbeing
17 by our city government and what kind of treatment do
18 they get for the cost, half of a million dollars per
19 person per year. Since they have been there, they
20 have been subjected to violence attacks like being
21 stabbed 12 to 14 times. They see plenty of
22 correction officers roaming around but not assigned
23 to their posts. Most of the DOCs costs are driven
24 over staffing. The ratio of uniformed staff to
25

1
2 incarceration people is more than four times higher
3 than the national average.

4 My sons awful experience and the rest of the
5 people on Rikers Island who are sharing the same
6 experience are prime examples of every day that's
7 wrong with our city budget promises. We are the only
8 jail systems in the nation where more guards than
9 people in custody and its more we are throwing away
10 while we cut funding from things our community needs.
11 Year after year, I hope that the city will find the
12 resources and service that makes our community
13 healthy and safe like putting mental health programs
14 and recreation centers. Instead, this city continues
15 to make sons, daughters, brothers, nieces, and family
16 invisible and when the Mayor looks to balance his
17 budget, the only system of care that he loves to cut.

18 I really call the City Council to pass a budget
19 that will reflect community needs, ways to support
20 and uplift our communities, not more punishment
21 measures that leave our loved ones worse off. We
22 cannot keep the torture chambers open. Please work
23 with us. Pass a budget that ends the special
24 treatment of DOC and put the resources in place to
25

1
2 close the torture chambers sitting in the middle of
3 our city. Thank you.

4 DARREN MACK: Thank you Chair Nurse for the
5 opportunity to testify today. My name is Darren Mack
6 and I'm a Co-Director of Freedom Agenda. New York
7 City has committed to closing Rikers Island because
8 mass incarceration is a policy failure, and so is
9 banishing people awaiting trial to a penal colony
10 built on toxic land. We have moved past debating if
11 Rikers should close or can close. Rikers is legally
12 required to close by 2027, and our city budget must
13 put all the necessary resources in place to give the
14 support people need, close the pipelines that feed
15 incarceration, and shift to a smaller borough jail
16 system.

17 The average jail system in our country has one
18 uniformed officer for four people in custody. If you
19 applied that same ratio to the current New York City
20 jail population of about 6,200 people, that would
21 amount to 1,550 officers. Instead, DOC has 6,000
22 uniformed officers, and is budgeted for 7,060. Yet
23 they still aren't providing basic services for people
24 in custody, including recreation, laundry, and access
25 to medical care. What are officers doing with their

1
2 time? Based on many reports from the Federal monitor,
3 they are too often responding to incidents with
4 overwhelming force, and many are still abusing sick
5 leave.

6 Mayor Adams' budget proposal shows a plan to
7 maintain 7,060 uniform officers in the Department of
8 Correction into Fiscal Year 2028, when Rikers is
9 required to close. The borough-based jail system and
10 secure hospital units, even with the Mayor's plans to
11 increase the number of beds, would have a maximum
12 capacity of about 4,000 people. There is clearly no
13 need for 7,060 officers in that system, and the city
14 can start rightsizing the DOC workforce this year by
15 eliminating their 1,450 projected vacancies. You
16 will hear the Administration say they are expecting
17 the jail population to rise. I can see how they
18 would expect that when all their policies are
19 designed to create that outcome, including slashing
20 \$28 million from alternatives to incarceration and
21 re-entry programs, and refusing to fund supportive
22 housing or mental health treatment to scale, despite
23 the Mayor's lip service to addressing the mental
24 health crisis.

1 But the Mayor doesn't govern this city alone.
2
3 This City Council knows that Rikers must close and
4 you know that the safest communities are the ones
5 with the most resources, not the most incarceration.
6 In the full written testimony that we submitted;
7 you'll see a full budget analysis from the Campaign
8 to Close Rikers. Thank you.

9 MEGAN FRENCH-MARCELIN: Thank you so much
10 Chairwoman Nurse and Members of the Committee. My
11 name is Megan French-Marcelin, I am the Senior
12 Director of New York State Policy at Legal Action
13 Center.

14 Today, I testify on behalf of the New York City
15 ATI and Reentry Coalition. The coalition is a
16 collaborative of eleven service providers with
17 decades of experience. Coalition members offer a
18 broad range of alternative to detention and
19 incarceration programs as well as reentry services to
20 New Yorkers returning home from prison. Our non-
21 carceral, I'll say that again, non-carceral,
22 community-based programs include counseling and youth
23 development, treatment-rich housing, and jobs skills
24 training. Coalition members offer services specially
25 tailored for specific populations such as women,

1
2 young men, gender non-conforming and gender-expansive
3 folks, and people with mental illness.

4 Collectively, we serve upwards of 25,000 justice-
5 involved individuals each year. City Council funding
6 for these programs has been immensely important and
7 that support will be even more critical this year as
8 we prepare to continue to provide services amid the
9 proposed funding cuts for our programs. And despite
10 an ever-increasing need for our services.

11 Accordingly, we are requesting a measly \$1.1 million
12 in additional funds for the member of our coalition.

13 ATI programs improve public safety and build
14 healthy vital and economically strong neighborhoods.
15 These programs help move people away from criminal
16 legal involvement by forging pathways to employment,
17 secure housing, better health and family stability
18 with a wide range of interventions and programs. Our
19 services have been shown to reduce incarceration and
20 detention, lower recidivism rates, and help New
21 Yorkers achieve stable employment, housing and
22 health.

23 Additionally, studies have also consistently
24 shown that these programs yield significant cost
25 savings when compared to incarceration. While

1 simultaneously reducing crime rates. The average
2 cost of one of our programs is just 8,500 per
3 participant. For what it costs to detain just one
4 person at Rikers, we could serve at least 57 people
5 through programs that don't just keep people out of
6 jail but also build communities.
7

8 If we maintain as our coalition does, that
9 closing Rikers is essential to the public safety of
10 this city, we must continue to scale the funding for
11 those programs. Thank you.

12 VICTOR HERRERA: Hi, my name is Victor Herrera.
13 I'm a directly impacted - directly and indirectly
14 impacted. I'm a leader and member of Freedom Agenda
15 and uh, I'm going to be honest okay, I'm not going to
16 put a dollar sign on human life, okay. I'm going to
17 talk about my brother, okay? My brother is
18 incarcerated right now and I advocated real difficult
19 - real, real hard for him okay for him to get
20 diversion, and today, he's still on Rikers Island,
21 56 years old. Why? Because DOC and CHS collectively
22 obstructing his ability to get to his appointments.
23 For CGI to meet their requirements okay for the
24 diversion that I advocated with the Kings County
25 District Attorney's Office, who conceded to provide

1
2 him the services that he needs for his dual
3 diagnosis.

4 I'm done with this dollar sign thing that's
5 branded on every human being that goes through Rikers
6 Island. We are not a dollar sign for profit, okay.
7 Every one of those individuals is suffering in there
8 and I don't want to wait till the day that my brother
9 has to wait for ATI reentry okay, that something
10 drastic happens to him. He's 56 years old okay. I
11 am a survivor of Rikers Island and lucky for me, I've
12 been a member of the community for the last 24 years
13 okay advocating for those who don't have a voice.
14 This needs to stop. There is no more branding of a
15 dollar value on human life. We need to give
16 something about DOC and CHS and hold them accountable
17 for what's going on. These appointments that they're
18 required to meet, okay, they need to get to them.
19 So, CJI and diversion and the courts can do what they
20 need to do to get these individuals the services they
21 require. Thank you.

22 YONAH ZEITZ: Thank you Chair Nurse and Member of
23 the Committee for holding this budget hearing today.
24 My name is Yonah Zeitz and I'm the Director of
25 Advocacy at the Katal Center for Equity, Health, and

1
2 Justice and we submit this testimony today to bring
3 your attention to the crisis at Rikers and the need
4 to immediately shutter the notorious and torturous
5 jail complex.

6 New Yorkers across the city including our members
7 are deeply concerned about what's unfolding at
8 Rikers, and they're also concerned about its enormous
9 fiscal costs. As we've heard repeatedly today, the
10 cost of incarceration at Rikers is over \$550,000 a
11 person per year which is over \$1,500 a day, and so
12 why are we, why are libraries, universal Pre-K,
13 summer youth program, educational programs and other
14 essential services being cut while the city continues
15 to excessively fund incarceration at this deadly jail
16 complex.

17 As a lot of folks have said, the Mayor is
18 proposing a very bloated and excessive \$2.6 billion
19 budget for the DOC in fiscal year 2025 while also
20 cutting \$28 million in alternatives to incarceration,
21 supervised release and reentry services. And we know
22 alternatives to incarceration work. They are much
23 cheaper and diversion options are available right now
24 to reduce the jail population.

1 clearly untenable to the plan to close Rikers. We
2 urge members of the New York Council to take drastic
3 steps to get the city back on track to fulfilling its
4 commitment to close Rikers.
5

6 We have three points. First, cut the budgets
7 used for caging people. The DOCs budget is bloated,
8 wasteful and must be cut. The city must also cut the
9 number of people incarcerated at Rikers through
10 increasing funding for ATIs, supervised release and
11 reentry services. And second, the closure of Rikers
12 is not just a moral and legal imperative but given
13 the extraordinary savings that could be realized,
14 it's a fiscal imperative for the city. And so, the
15 Council must pass a budget that advances efforts to
16 shutter the notorious jail complex.

17 And third, we just maintain investments in things
18 that we know actually produce real public safety,
19 housing, healthcare, education and jobs. And
20 finally, with regards to Rikers and the human beings
21 detained there and working there, there's one more
22 thing the Council can do right now, which is to pass
23 Resolution 186, which calls for a federal receiver.

24 While the Council continues to work for fighting
25 for a budget that will allow all New Yorkers to

1 thrive, we urge the Council to take immediate action
2 to relieve their suffering at Rikers by passing this
3 Resolution. This Resolution is a concrete step this
4 Council can take right now to address the crisis at
5 Rikers. Until Rikers is closed, there must immediate
6 action to improve conditions, save lives and invest
7 in alternatives to incarceration and other non-
8 carceral solutions that are proven to increase public
9 safety. Thank you.

11 JENNIFER PARISH: Good afternoon. My name is
12 Jennifer Parish. I work at the Urban Justice Center
13 Mental Health Project. I'm a member of the Solitary
14 Campaign, the Jails Action Coalition and the Campaign
15 to Close Rikers.

16 You would think that the city's legal obligation
17 to close Rikers by 2027 would actually be spurring
18 investment and preventive services and interventions
19 designed to decrease the jail population, but instead
20 the Mayor's proposed budget slashes funding for
21 services that have demonstrated success in reducing
22 incarceration such as supervised release and
23 alternatives to incarceration.

24 And what's more, the Mayor's budget includes no
25 funding for developing a true community based mental

1 health safety net, which is desperately needed, given
2 that 20 percent of the jail population, actually 21
3 percent of the jail population now has a serious
4 mental illness. We know that forensic act teams,
5 forensic Assertive Community Treatment teams, known
6 as ACT teams and justice involved supportive housing
7 are effective but the Administration has chosen not
8 to expand those services.
9

10 It's vital that the Council rely on evidence
11 about what creates actual community safety and
12 provides for individual growth and recovery. The
13 Department of Correction does not promote public
14 safety. We know that incarceration has little effect
15 on crime rates and can actually lead to increased
16 crime.

17 Everything possible must be done to keep people
18 out of this harm inducing system. You have to look
19 no further than the presentation that Health and
20 Hospitals, Correctional Health Services presented to
21 the Board of Correction on February 27th. They
22 talked about the psychological impact of jail itself
23 and how that those conditions such as being separated
24 from the community, the disruption it caused,
25 exposure to trauma, loss of control in that

1
2 unpredictable setting. All of that leads to anxiety,
3 mood changes and causes people to have worse mental
4 health conditions when they came in or to development
5 one if they didn't have that already.

6 It's shameful that we have about 1,300 people who
7 are diagnosed with a serious mental illness on Rikers
8 Island right now and what does that look like to
9 them. I mean, if you look at the report that Board
10 of Correction just recently introduced that was
11 talked about in this hearing about use of chemical
12 agents, what does it say about how people with
13 serious mental illness are treated? 48 percent of
14 the cases they looked at involved people with a
15 recent history of being housed in a specialized
16 mental health unit. That's not even the whole 1,300
17 people. They can't even all qualify to be in a
18 specialized mental health unit.

19 To be in a specialized mental health unit, you
20 need to be needing serious care and yet 48 percent of
21 the ones were subjected to chemical spray of the ones
22 that they looked at. And 16 percent of the people
23 who were sprayed in those cases, had engaged, were
24 actually engaged in self-harm or had a ligature
25 around their neck. That's shameful.

1
2 In December, the Mental Health Project put out a
3 report to address how all of these systems are really
4 interconnected and we need to find services in the
5 community for people with mental health. We need to
6 find services that get them out, like forensic
7 Assertive Community Treatment needed and we also need
8 to expand alternatives to incarceration that are
9 specifically focused on this population. Thank you.

10 COMMITTEE COUNSEL: Thank you to the panel. The
11 next panel will include David Long, Christopher
12 Jefferies, Jay Edidin, Akiana Smith, Megan Carr,
13 Mollie Beebe, and King Downing.

14 DAVID LONG: Good afternoon Council Member Nurse
15 and staff. Thank you for allowing me to testify
16 today. My name is David Long, I am the Executive
17 Director of the Liberty Fund. This testimony will
18 outline our programming, how funding from the New
19 York City Council can continue to enable our justice
20 reform work, while also ensuring public safety in the
21 city.

22 Since 2016, the Liberty Fund has successfully
23 provided a set of services and access to resources
24 for the pretrial jail population using our court-
25 based approach. As part of the Liberty Funds model,

1
2 our team addresses critical needs, helping clients
3 meet their court requirements while connecting them
4 to the best fit services especially in housing and
5 workforce development.

6 The Liberty Funds mission is to reduce the
7 pretrial jail population in order to prevent the
8 poorest New Yorkers from having their lives upended
9 and their freedom sacrificed. Our goal is to provide
10 support in order to avoid future interactions with
11 the criminal justice system.

12 We achieve our mission by providing pretrial
13 services including bail and robust case management to
14 any qualifying bail or ROR, Released on Recognizance
15 client throughout the pendency of their court case.
16 The Liberty Fund is an independent 501 C3
17 organization originally established in 2016 in
18 partnership with the New York City Council and the
19 DOE Fund, New York City's leading agency in reducing
20 recidivism and homelessness through social enterprise
21 coupled with transitional housing and supportive
22 service including workforce development.

23 Over the past eight years, the Liberty Fund has
24 helped over 1,500 clients access community-based
25 services, prevented 7,000 days of detention and

1 facilitated an annual cost savings of \$5.1 million on
2 the city's incarceration spending and achieved an 88
3 percent client court appearance rate.
4

5 More specifically, the last four years, our
6 cutting-edge ROR case management program has served
7 over 325 people in need of critical pretrial
8 services, conducted over 12,000 court reminder and
9 wellness calls, sent over 6,500 client updates to
10 assigned attorneys, made 428 referrals to community-
11 based organizations and providers, and maintained an
12 88 percent client court appearance rate.

13 The Liberty Fund will provide our unique ROR case
14 management program to approximately 250 unique
15 individuals during the FY 2025 contract year,
16 approximately 20 cases per year. We will achieve
17 this target through our formal referral partnerships
18 with key defense agencies. Our model has four
19 innovative features for impact. Free trial
20 innovations are initiated at the most critical
21 touchpoint for success. It's voluntary with non-
22 mandated services, which ensure no additional
23 restrictions are placed on clients to prevent further
24 net widening as they stabilize their lives. Its
25 person-incented services determined by the client to

1
2 better meet, to best meet their individual needs,
3 promote personal agency and connect to best fit
4 services and it's court based. Low touch
5 interventions leveraged during court appointed for
6 effective time usage.

7 In conclusion, I would say that the Liberty Fund
8 has been part of the justice reform and is a key part
9 to hopefully closing Rikers and to give the services
10 to the folks that are no longer incarcerated there.
11 Thank you.

12 CHRISTOPHER JEFFRIES: Good afternoon Chair and
13 Council. Thank you for having me. My name is
14 Christopher Jeffries and I'm a Youth Advocate at
15 Bronx Connect, which is an alternative to
16 incarceration. As you can see, I don't have any
17 numbers printed out. I wanted to speak from the
18 heart today because I have a unique experience. So,
19 I'm impacted by being on Rikers Island and in Upstate
20 Prison. Also, I have experienced working inside of
21 juvenile detentions for ACS at Crossroads Detention
22 Facility in Brooklyn. And like I stated now,
23 currently, I am in the field of ATIs.

24 So, I can see the difference works with ATI.
25 It's more effective. It's more cost effective. When

1
2 I was a prisoner on Rikers Island, I was getting -
3 well, the city, it was costing them over \$500,000 to
4 house me but that \$500,000 didn't benefit me at all.
5 I didn't get any rehabilitative services. I didn't
6 learn any new skills. I didn't get any mental health
7 check ins, anything like that.

8 And the same thing with my time as a Youth
9 Development Specialist at Crossroads Juvenile
10 Detention. They don't get, they barely get
11 schooling. They don't have any resources. The food
12 is bad. The living conditions are bad. It's
13 violent. It's unsafe for staff but as a youth
14 advocate for Bronx Connect, I see the success through
15 our participants. I see them getting resources. I
16 see them getting job opportunities. I see them
17 taking places in our Youth Council where they get to
18 learn about politics and how things work. I see them
19 qualifying for grants. I see them not returning to
20 jail after they complete the program.

21 Bronx Connect has a 97 percent chance of the
22 participants not coming back. That's way better than
23 any jail that I've been in or worked for. Uhm, and
24 when people go through these situations and they come
25 out unrehabilitated, they're subjected to go back.

1
2 So, when the Mayor is making cuts to programs that
3 can directly solve these issues in favor of more
4 jails, in my opinion it just shows gross negligence
5 and it comes off as tyrannical. Thank you.

6 JAY EDIDIN: Thank you Chair Nurse and Member of
7 the Criminal Justice Committee. My name is Jay
8 Edidin and I am the Director of Advocacy at the
9 Women's Community Justice Association. Like many of
10 the people here today, I have come to speak about and
11 on behalf of people incarcerated at Rikers Island.
12 Specifically on this International Women's Day, I want
13 to bring your attention to the budgets impact on a
14 population that frequently gets left out when we're
15 talking about people involved in the criminal legal
16 system, specially the women and gender expansive
17 people incarcerated at the Rose M. Singer Center.

18 As you already know, the Adams Administrations
19 plans for the upcoming Queens Borough Jail more than
20 triple the agreed-on number of beds for women and
21 gender expansive people from 126 to 450. This is
22 happening at a time when mass incarceration of women
23 is rising at an alarming rate, disproportionate to
24 either the incarceration of men or and this is the

1
2 part that should make you particularly angry, wait of
3 criminal offense.

4 The Administration has claimed that its expansion
5 of mass incarceration is a matter of simple math
6 beyond its control and they make this claim in the
7 same breath as a budget that includes catastrophic
8 cuts to community services, including our
9 alternatives to incarceration and detention.

10 I want to return to the women and gender
11 expansive people currently incarcerated at RMSC. 77
12 percent of the more primary care givers. 80 percent
13 have some kind of mental health concern. Either of
14 those facts alone would justify diversion from
15 incarceration and together they represent a mandate.
16 And yet, thanks to pressure again from the current
17 administration, judges and prosecutors at whose sole
18 discretion those options are available, are taking
19 less and less advantage of alternatives to
20 incarceration and detention and sending more and more
21 women and gender expansive people to jail. So, I'm
22 asking you to resist that fear mongering and to look
23 at the actual crime statistics and the price to human
24 and financial of the city's embrace mass
25 incarceration, the destruction of lives and families,

1
2 the waste of taxpayer dollars and for what? A
3 bloated, inhumane and ultimately ineffective system.

4 Look at the Women's Community Justice Association
5 and Lippman Commissions path to 100 report, which
6 offered simple, direct and effective interventions to
7 lower the population of RMSC below 100. Look at the
8 data on re-offense and how it differs between
9 incarceration and ATIs.

10 Mayor Adams, DOCs and the NYPD will tell you that
11 mass incarceration is the cost of safety. You and I
12 know that it is not. I call on this Committee to
13 prioritize community resources and alternatives to
14 incarceration and to resist the growing sprawl of the
15 borough jails. Thank you for your time and the
16 opportunity to testify.

17 MOLLIE BEEBE: I'd like to thank Chair Nurse and
18 the Committee Members for their unwavering commitment
19 to offering viable alternatives to incarceration.
20 Thank you for taking the time today to hear this
21 testimony. I am Mollie Beebe, the Assistant Vice
22 President of the Families Rising Program. I have
23 worked with justice involved young people for over
24 ten years. I know how critically important access to
25 trauma informed mental health is for young people.

1
2 The New York Foundling citywide program called,
3 Families Rising, works with young people and their
4 families to reduce family conflict, substance abuse,
5 recidivism and violent behavior in the long term.
6 Since its inception, Families Rising has served 513
7 young people and their families. In Fiscal Year
8 2023, 93 percent of clients who completed services
9 successfully and whose court case has resolved have
10 avoided jail or prison sentence. Despite its
11 success, the program is currently facing budget cuts
12 due to the city's program to eliminate the gap.

13 We estimate for every \$100,000 cut in our
14 funding, 16, young people will not be able to receive
15 our mental health treatment. Clients like Karime
16 highlight the importance of alternative to
17 incarceration programs and second chances. When
18 Karime, who was a high school senior at the time was
19 arrested for criminal possession weapon, he was
20 referred to families rising. Shortly after his
21 referral, he was rearrested. With the support of
22 their therapist, the family strengthened their
23 relationship and lessened Karime's dependence on
24 negative peers in the community.

1
2 By the end of therapy, he received his youthful
3 offender adjudication, graduate high school and was
4 headed to college on a full scholarship. If we want
5 these programs to continue to serve and stabilize
6 young people at home and with their families, must
7 invest in the professionals who provide these
8 critical services and restore the budget cuts from
9 the last financial plan.

10 This work is important to us. Please see the
11 Foundling as a partner and call on us to help address
12 this issue. Please come visit and see the programs
13 impact on the families we serve for yourself. Thank
14 you Council Members for taking the time to hear this
15 testimony today and for your continued efforts to
16 fund alternative to incarceration programs citywide.

17 AKIANA SMITH: Good afternoon Chair and Members
18 of the Committee. Thank you for allowing me the
19 opportunity to testify. I also want to acknowledge
20 that today is

21 International Women's Day. My name is Akiana
22 Smith and I am the Community and Court Navigator at
23 the Women's Community Justice Association. An
24 organization dedicated to improving the lives of
25 women and gender expansive New Yorkers impacted by

1 mass incarceration. I'm here today on behalf of the
2 Beyond Rosie's Campaign and on behalf of communities
3 in particular, danger of being negatively impacted by
4 the Mayor's budget.
5

6 As of this week, at least one in five of the
7 women and gender expansive people currently
8 incarcerated at the Rose M Singer Center on Rikers
9 Island is unhoused. One in five. In the charges
10 that the population faces, are overwhelmingly for
11 nonviolent survival crimes. Crimes they wouldn't
12 have needed to even consider if they had access to
13 resources to which every New Yorkers, every human
14 being, has a fundamental right. Over 77 percent are
15 caregivers and over 80 percent have mental health
16 concerns. The Mayor's budget prioritizes
17 incarceration over essential services and
18 alternatives, and if passed, it will create a New
19 York where even more people are incarcerated because
20 of the absence of those services and alternatives.
21 This is not what justice looks like. True justice is
22 supportive housing. True justice is accessible
23 mental health services that allow people to stay in
24 their communities. True justice is food. It is
25 healthcare and it is offering employment

1
2 opportunities. It is prioritizing alternatives to
3 locking away our mothers and daughters for the crime
4 of surviving in this hostile world.

5 Lastly, we would like to thank the Chairwoman of
6 the Criminal Justice Committee, Council Member Sandy
7 Nurse, the fierce Speaker and our majority women led
8 City Council for sparking the changes needed. Thank
9 you.

10 Thank you Chair Nurse and Council Members for the
11 opportunity to testify before you today. My name is
12 Megan Carr and I'm a Legal Fellow at New York Lawyers
13 for the Public Interest. We advocate for health
14 disability and environmental justice and I'd like to
15 talk about Rikers Island which has been an
16 environmental injustice from the start. The penal
17 colony nestled in the middle of the East River was
18 literally built upon mounds of trash, as landfill was
19 transported to expand the island and make it suitable
20 for development.

21 It is well documented that this decomposing
22 garbage releases high levels of methane gas on the
23 island and poor air quality on Rikers is further
24 exacerbated by the many industrial facilities and
25 polluting sources in the neighboring South Bronx and

1 Northern Queens, including multiple Peaker plants and
2 waste transfer stations. Rikers is required by law
3 to close by 2027, but this Administration seems
4 unconcerned with taking the necessary actions to
5 enforce the law and shut down Rikers. We see this
6 through the DOC's actions, and in the proposed
7 budget, which continues to prioritize mass
8 incarceration over vital services that make us safer,
9 such as housing, healthcare, and education.
10

11 The requested budget for fiscal year 2025 is a
12 continuation of this trend and we urge the City
13 Council to intervene. Far from actualizing the
14 vision of a Renewable Rikers, DOC seems intent on
15 keeping Rikers open and perpetuating the carceral and
16 environmental injustice that lives there. For
17 example, the gas-powered cogeneration plant that
18 powers the island has been operating under an expired
19 Title V air permit since 2018, for six years. DOC
20 has applied to have that expired permit renewed and
21 modified, seeking to lift the emission caps on
22 nitrogen oxides and fine particulate matter.

23 Nitrogen oxides alone are harmful to human health,
24 and when emitted can react with other chemicals in
25 the air to form additional particulate matter and

1
2 ozone, compounding risks for those that have to
3 breathe this polluted air, the people that are kept
4 on Rikers and in the surrounding environmental
5 justice communities.

6 We are deeply concerned about the attempts to
7 pollute more at Rikers Island, which can and should
8 be transformed into a clean energy and thriving green
9 jobs hub, as the latest feasibility studies show, it
10 can be. We are also troubled that, according to the
11 DOC's own documents, this request for an increase in
12 emissions is just to reflect what the plant is
13 already currently emitting, meaning that they are
14 already exceeding the limits of their six-year
15 expired permit. This shows us once again that the
16 DOC believes they can act beyond the bounds of the
17 law.

18 DOC has budgeted over \$3 million for maintenance
19 of this powerplant the Riker's. It's a lot of money
20 but it's just a small slice of DOC's staggering
21 budget. The consultancy and other costs that DOC may
22 be paying to pursue changes to the existing power
23 plant are not shown in the agency's budget documents.
24 Yet, there are even more costs posed by this
25 powerplant in its proposed modification. There are

1 the cost to human health of nitrous oxide and PM10.

2 There are the costs of human life and dignity of
3 detaining people on Rikers Island, a place that has
4 become synonymous with cruelty and injustice.
5

6 And if I may briefly conclude, beyond this
7 enormous unnecessary and costly proposed budget,
8 there are the unknown future costs that come with
9 every decision that locks in continued operations at
10 Rikers Island and the human cruelty and environmental
11 injustice that comes with it. Thank you.

12 KING DOWNING: Good afternoon. Thank you
13 Councilperson Nurse and thank you to the Council for
14 having us here and we appreciate the work that you've
15 been doing. My name is King Downing. I am the
16 Director of Healing Justice for the New York, New
17 Jersey American Friend Service Committee, also known
18 as AFSC. The advocacy group that was brought
19 together by the Quakers. We deal with criminal
20 justice incarceration. We go into the prisons. We
21 have people provide counseling. We work with youth
22 who have been impacted either through their families
23 or directly by holding camps and workshops for them.
24 We were the first group to create along with
25 returning citizens the Campaign to end the new Jim

1
2 Crow series of organizations that formed around the
3 country after Michelle Alexanders book. I'm also a
4 Lawyer.

5 I knew that the statistics were going to be
6 presented here, so I just tried to take a little bit
7 of a different take that reflects my personal
8 experience. So, I had three points. So, this idea
9 of program budget cuts, we've been there. We've done
10 that. So, why are we going back down this road
11 again? And my second point is, now, we're going to
12 move in that same direction and the only reason why I
13 could see doing it is we expect different results but
14 I don't there are going to be and I'm going to
15 present some data. And the third is that there's
16 some actions that I hope that we take along those
17 lines.

18 So, to my first point, been there, done that.
19 Before law school and before AFSC, a good number of
20 years back, I ran a GED program that was right at the
21 boarder of El Barrio and Yorkville. I brought a
22 group of students down here who all are probably
23 fully grown and their own families now because there
24 were going to be budget cuts to the Summer Youth
25 Employment Project. So, we came down here and

1 testified and if somebody said, we'd be back here
2 doing the same thing again, I'd probably tell them
3 that they were crazy.
4

5 So, of course we did not win. We did not
6 succeed. The cuts were made and right after that
7 happened, I was walking through our neighborhood and
8 I saw one of my students on the corner. He was a
9 lookout for one of the drug posts and I pulled him
10 aside and found out that he was making \$25 for
11 showing up in the morning and working until past
12 midnight.

13 What would have happened if that Summer Youth Job
14 Program had been there? I wonder now, is he alive?
15 Is he incarcerated? Is he dead? What happened?
16 That one job could have taken him out of that life
17 and whatever direction that pointed to him. And at
18 that time, the only evidence I had about this problem
19 was anecdotal. Now, I've gone to law school for
20 better or for worse and now the information that I
21 get is more statistical and that type of evidence.

22 So, just quickly, the evidence shows the alliance
23 for educational justice show all of the statistical
24 impacts of the budget cuts. And we can't go down
25

1
2
3
4
5
6
7
8
9
10
11
12
13
14
15
16
17
18
19
20
21
22
23
24
25

that road anymore and I hope that you all will take action around that. Thank you.

COMMITTEE COUNSEL: Thank you. Uhm, this is the last in-person panel before we move to Zoom. If anybody is present in the room that wishes to testify and your name hasn't been called after I call this panel, please see the Sergeant at arms in the back. So, the last in person panel will be Prime Freedmen, Jason Alleyne, Batman Gee, Tiffany Sloan, Alex Stein.

PRIME FREEDMEN: Oh, sorry, thank you. Peace, Peace, Peace. My name is Prime Freedmen. I'm an Organizer, a Reparations and I'm an American Freedman Citizen, so my perspective will be from the American Freedmen perspective, which means I am a descendent of persons who were nationally emancipated by way of the 13th Amendment because my ancestors built this country, New York City included along with the other millions of people. I work alongside organizations like the US Freedmen Project and the United Sons and Daughters of Freedmen. I'm also in here in support of I'll say the abolitionist organizations like Freedom Agenda and other ones as well, Community not Cages and things like that.

1
2 So, I was listening the entire time. I've been
3 here since the beginning and unfortunately I was
4 hearing a billion-dollar budget to incarcerate, to
5 enslave and to kill the people who live in
6 neighborhoods like the Bronx, Harlem, Brownsville,
7 etc.. Now, that was very, very personal to me
8 because those are the areas that I'm from, Harlem and
9 the Bronx. I call it HBO, Harlem, Bronx Only. So,
10 that's why I'm here. I am most definitely negatively
11 impacted both directly and indirectly. I noticed
12 when the City Council, they asked specific questions
13 and those questions, they weren't able to answer
14 them. So that's very unfortunate.

15 So, I'll just get to the solutions, because I see
16 my time is limited. Close Rikers, Close Rikers,
17 Close Rikers, Shutdown Rikers and I'll say abolish
18 Rikers. Now that is just mandated by law. I would
19 also include reparations for the American Freedmen
20 State acts of annulment, we have a State Assembly
21 woman by the name of Nicky Lucas who has proposed a
22 bill, A07828B and also prioritizing the youth. A lot
23 of times I hear people say, we have to elevate the
24 youth but many of the times they're not listened to.
25 They're ignored. We have to grant access and

1
2 opportunities for the youth and the families. I
3 heard a lot of budgets and numbers talking about the
4 millions and millions of dollars that were saved but
5 there were no millions and millions or
6 quantification's or the metrics of the millions of
7 families that would be saved or the millions of
8 mothers and fathers and the children that should be
9 saved. So, I think that we need to do some metrics
10 on that. Stop discriminating against the people who
11 were incarcerated because now they carry the state
12 property badge or the badge of being a felon.

13 Yeah, so, get the job done. Uhm, we are at City
14 Hall, the moral argument is clear as well as the
15 legal argument. So, thank you.

16 JASON ALLEYNE: Thank you Speaker Adams, Chair
17 Nurse and distinguished members of the Council for
18 the opportunity to speak here today. My name is
19 Jason Alleyne and I am the Chief Program Officer at
20 Exalt. An organization that since 2006 has been
21 dedicated to elevating expectations of personal
22 success for young people who have been involved in
23 the criminal justice system. Our powerful
24 combination of classes for tangible skill development
25 to navigate the education and criminal justice

1
2 system, placement and paid internships and an alumni
3 network of resources equips our youth with the tools
4 and experiences necessary to avoid recidivism and
5 reinvigorate their lives.

6 At Exalt we empower youth to see a future filled
7 with hope and we provide the roadmap to get there.
8 Exalt serves criminal justice impacted youth between
9 the ages of 15 to 19. Many of them come to us
10 chronically disengaged from their respective schools,
11 over age, under credited and reading at a fourth-
12 grade level. All of our participants have five staff
13 members working with them throughout their
14 involvement in a cycle. These staff members include
15 a program coordinator, teacher, educational advocate,
16 internship liaison and an alumni liaison.

17 Although our program generally requires that our
18 youth be enrolled in school, if they are not, our
19 educational advocate works in collaboration with them
20 to enroll them in a school best designed to support
21 their academic advancement. In their first six weeks
22 with us, they are immersed in our pre-internship
23 training, which includes our culturally competent,
24 responsive and academically tested curriculum that
25 rejuvenates their love of learning by focusing on

1 content that is applicable to their lived experiences
2 and curated in a way that is engaging. Our pre-
3 internship program also provides all of our young
4 people with professional skills training, such as
5 resume building, MOC interviewing and digital
6 literacy. With our curriculum as a vehicle, Exalt
7 enhances four core skills: communication; resource
8 management; critical thinking; and creative problem
9 solving. Upon completion of the pre-internship
10 program, our participants are placed in an eight-week
11 paid internship in high demands fields throughout New
12 York City.
13

14 Our core program participants are paid \$18 an
15 hour. Our list of internship partners includes a
16 vast array of nonprofit business and government
17 entities. While our students are actively engaged in
18 the educational employment components of our core
19 program, Exalts court advocacy department supports
20 those that arrive to us with open court cases
21 navigate the complex landscape of the criminal
22 justice system. Our advocates build deep
23 partnerships with major stakeholders that comprise
24 the system, including district attorney's, parole
25 officers and judges. Exalt has been able go on

1
2 remarkable results with the young people that in many
3 ways society at large has failed. We are proud to
4 say that 70 percent of the young people that come to
5 us with open cases have their sentences reduced or
6 dismissed, 95 percent do not recidivate two years
7 after graduating from our program, 98 percent are on
8 track to graduate by age 20, and 100 percent of our
9 young people become more employable.

10 Currently, Exalt is in the midst of a three-year
11 strategic plan that is focused on increasing
12 capacity, strengthening our alumni program and
13 establishing an Exalt learning institute.

14 Historically, our organization has relied heavily on
15 the philanthropic sector with 90 percent of our
16 organizational budget coming from foundations. As we
17 look to deepen the impact of our work, partnership
18 with government is of the utmost importance to our
19 growth as we look to change the landscape of juvenile
20 justice here in New York City.

21 We ask as you prepare to make budget decisions
22 that best advance your criminal justice goals that
23 you support Exalt and the work we do to help
24 facilitate the greatness in our young people. We
25 thank you for your leadership and dedication to

1
2 addressing how the criminal justice system impacts
3 young New Yorkers. Thank you for your time today.

4 TIFFANY SLOAN: Hello, thank you for the
5 opportunity to testify for the first time today. My
6 name is Tiffany Sloan and I am from Punishment to
7 Public Health Initiative at John Jay College. P2PH
8 works to transform the infrastructure of public
9 health and public safety. We do this by convening
10 stakeholders across the system of care, drawing on
11 their expertise to build and scale equitable
12 solutions grounded in the health and wellbeing of
13 families and communities.

14 Throughout my journey in the city, I have
15 witnessed the advantages of public health-oriented
16 initiative, conversely, I observed the detrimental
17 impact of over policing and mass incarceration
18 particularly within African American communities.
19 This city is more dynamic than any other place in the
20 world. I, myself, moved to the city to continue my
21 education. Despite the advantages of the city, many
22 New Yorkers are still struggling to get back on their
23 feet after the COVID shutdowns, and it's important
24 that we continue to support the most vulnerable
25 members of our community. A lot of New Yorkers are

1
2 understandably concerned about the spikes in crime
3 during the COVID years but it's important to
4 recognize that 2023 was not 2021. Violent crime is
5 down 14 percent.

6 To effectively decrease involvement in the
7 criminal justice system and subsequently lower mass
8 incarcerates in the city, individuals must have
9 access to fundamental necessities such as housing,
10 employment and healthcare. These needs must be
11 addressed as a priority, regardless of any prior
12 involvement in the criminal justice system.

13 When this body voted to close Rikers by 2027, it
14 acknowledged that the status quo of mass
15 incarceration and surveillance has failed to protect
16 marginalized communities from the root causes of
17 violence. This years budget is a change to renew
18 that commitment to the families and communities most
19 impacted by poverty, violence and housing insecurity.
20 This budget debate is a clear message to our
21 neighbors in need. Do we expand access to drug
22 treatment and harm reduction services or do we revert
23 back to trying to punish our way out of addiction? A
24 strategy we know results in stark racial
25 inequalities. Do we invest in community mental

1 health resources or more involuntary commitments to
2 locked hospital wings and rows of cages on Rikers
3 Island? Do we increase the number of pretrial
4 programs and alternatives to incarceration programs
5 or do we continue to increase jails and prison
6 populations and facilities that are not properly
7 taken care of. At P2PH we are lucky to be surrounded
8 by organizations and advocates that work directly at
9 the heart of these issues. Our cross-sector advocacy
10 group convenes stakeholders from mental health,
11 housing, substance use and criminal justice reform to
12 focus on areas where public health solutions can play
13 a leading role in creating more equitable and dynamic
14 communities.
15

16 I thank you again for the opportunity to speak
17 with you today and we look forward to sharing
18 additional resources for your consideration and our
19 written testimony.

20 ALEX STEIN: What's up Council? It's me,
21 Primetime 99 Alex Stein. I know you guys know who I
22 am. Obviously, I'm world known and I'm also very
23 close friends with the 45th President of the United
24 States Donald Trump and it's sad that you guys are
25 allocating all our resources to arrest the President

1
2 but you guys are doing nothing about the Venezuelans
3 that are cooking rats on the street.

4 So, I have the man himself, President Trump, are
5 you there sir? Let's see if he's there, hold on.

6 Are you there President Trump? Oh my gosh. Oh my
7 gosh, I don't have him. Let's see if he answers.

8 But no, seriously you guys are spending all these
9 resources trying to arrest the President when we know
10 that the city is crumbling. We know that crime is at
11 a rate where all these people are talking about.

12 President Trump, are you there?

13 PRESIDENT TRUMP: Well of course, you know we
14 know that the city, I'm not supposed to be there.
15 I'm not supposed to come there and because they have
16 a judge, a terrible judge.

17 CHAIRPERSON NURSE: Do you have testimony.

18 ALEX STEIN: It's the President.

19 CHAIRPERSON NURSE: I don't care about that. Do
20 you have testimony?

21 ALEX STEIN: Hey Sandy, have some respect. Hey,
22 you're just a dumb City Council women.

23 CHAIRPERSON NURSE: I just don't want the video.
24 I don't want the video.

1
2
3
4
5
6
7
8
9
10
11
12
13
14
15
16
17
18
19
20
21
22
23
24
25

COMMITTEE ON CRIMINAL JUSTICE

ALEX STEIN: President Trump, just go ahead she's too stupid -

CHAIRPERSON NURSE: You can fill your thing. You can finish your testimony.

PRESIDENT TRUMP: People are going to do what they're going to do and unfortunately what's happening is terrible you know they don't want to hear me talk about -

CHAIRPERSON NURSE: I would ask that you please stick to the topic for today's hearing.

PRESIDENT TRUMP: They're coming after me and it's awful to see what they're doing. You know saw Laticia James. She got peekaboo by the FDNY yesterday. She got peek a bood. She got bood worse than I did and Philadelphia and it's a shame to see what happened and they love me.

CHAIRPERSON NURSE: Do you have any testimony that's related to the topic at hand?

ALEX STEIN: Yeah, I'm here. Hey, you're too stupid. This is the President, have some respect.

CHAIRPERSON NURSE: Okay, I need to know, do you have testimony related to the topic?

ALEX STEIN: Hey, what are you going to do?

1
2 CHAIRPERSON NURSE: No, no, no, don't worry about
3 him sir. Sergeant, can you please excuse me, can you
4 please ask him to leave? Please ask him to leave.

5 ALEX STEIN: Do you even know who the President
6 is?

7 CHAIRPERSON NURSE: Please ask him to leave.

8 ALEX STEIN: I don't know - listen Sandy, I'm
9 going to show you. I'm here trying to talk. The
10 President is trying to talk. I don't know what's
11 going on.

12 CHAIRPERSON NURSE: Do you have something related
13 to this topic?

14 ALEX STEIN: The crime in New York City Sandy,
15 but you're too stupid to know that I'm here to talk
16 about the crime.

17 CHAIRPERSON NURSE: [GAVEL] Sergeant, please.
18 Sir, sir.

19 [SCREAMING IN BACKGROUND [05:59:12]- [05:59:22]

20 CHAIRPERSON NURSE: Sergeant, can we please have
21 order here in this court house? [SCREAMING IN
22 BACKGROUND 05:59:25]- [05:59:27] You have nothing on
23 topic. You have nothing on topic. You have nothing
24 on topic. No you don't. You have nothing on topic.

1
2 Sir. [05:59:38]- [05:59:48]. Run the rest of the
3 six seconds please.

4 ALEX STEIN: You know you all are ridiculous.
5 Hey, President Trump, are you there?

6 PRESIDENT TRUMP: Of course, I'm listening to it.
7 What a crazy thing. It's a witch hunt. They don't
8 like me and -

9 ALEX STEIN: I didn't get my three minutes. I
10 didn't get my three minutes. President Trump - this
11 guy interrupted my speech. Why are you grabbing me?

12 [06:00:24]- [06:01:43]

13 Okay, when you're ready.

14 BATMAN GEE: Howdy, I would like to deescalate
15 this toxic tension with my beautiful sign. It says,
16 We the Youth of New York want you to invest in our
17 Future. [APPLAUSE]. Thank you.

18 Howdy, my name is Batman but I'm not Bruce Wayne,
19 I'm here representing myself. An Afro Latino
20 fighting for the liberation of Black and Brown people
21 by any means necessary. I am a Youth Advocate. I
22 Youth represent. We facilitate outreach to youth.
23 Hold spaces for youth to express themselves and
24 promote positive change in communities. Outside of
25 Youth Represent, I advocate for social and racial

1 justice. I am a child entertainer and birthday
2 planner/organizer for kids and adults, an excentric
3 artist and passionate longboarder. Unfortunately
4 most youth and young people lack the ability to
5 receive or retrieve proper and positive resources to
6 sustain themselves in society. We desperately need
7 programs and services that target these specific
8 needs such as the youth physical, health, mental
9 health, afterschool programs that engage their
10 interest and promote positivity such as tutoring,
11 extra-curricular activities, art and music programs,
12 job opportunities that focus on resume building, job
13 hunting, interview prep and how to write a check and
14 food services.
15

16 These are the things that the city must invest
17 and to keep us safe instead of pouring more funds
18 into policing, detaining and jailing young people.
19 Alternative to incarceration programs such as Exalt,
20 Youth Represent and After School programs grant youth
21 the opportunity, another chance to change their
22 adverse situation into a pragmatic and beneficial
23 one. Exalt is a program that youth up to the age of
24 19 can be sent to instead of being locked up and may
25

1
2 provide courses that prepare youth for real
3 internships.

4 Youth represent is a nonprofit that provides free
5 legal services to young people up to the age of 25
6 and also provide opportunities for youth to learn
7 about laws and advocacy. By investing in programs
8 like these, it gives youth the opportunity to find a
9 healthy way to express themselves and learn to be
10 better members of society. With the help of these
11 programs, it will not only inform youth of better
12 opportunities but place these young people in the
13 positive environments necessary to be their better
14 selves, as well as being able to sustain that
15 positive motion moving forward in life and to not
16 need to fall back into a toxic cycle this unjust
17 racial system has created.

18 Mental health, especially for young people, is
19 another saliant factor to invest in because not every
20 child or young adult has other resources at home to
21 succeed in school or society. With the absence and
22 lack of investments and programs and mental health
23 that helps them to engage youth to be the best
24 version of themselves and offer a system of support,
25 they are doomed to repeat unhealthy patterns such as

1
2 emotional outbreaks and/or lashing out from bottling
3 emotions, isolation issues, bullying, delayed
4 learning and comprehension skills and seeking other
5 outlets to express themselves that they may or may
6 not know is unhealthy. By investing in important
7 programs like these, it is undoubtedly proven that it
8 will increase mental stability, help young people
9 focus on goals in life and become excited to show up
10 and learn.

11 My experience receiving support with mental
12 health and wellness services with Youth Represent has
13 personally changed my outlook on life. I left a
14 hospital environment and became homeless through some
15 circumstances. Youth Represent was able to support
16 me financially by helping buy groceries, so I could
17 eat. They helped me build my resume and apply for a
18 new state ID so I could be eligible to apply for job
19 opportunities. Most importantly, they helped me
20 provide counseling to get me through my current
21 housing transition and due to the support of Youth
22 Represent, my mental health is feeling optimistic and
23 bright because I'm being constantly encouraged to be
24 my best version of myself.

1
2 I no longer waiver in my emotions and feel sad
3 without any options to help myself. Thank you for
4 your consideration and time listening to me today. I
5 hope that everyone listening here today does not just
6 consider investing in programs for youth but
7 comprehend the urgent need for the city to start
8 investing in the future of its youth in a positive
9 way. The youth will eventually grow to fill the
10 seats of those who retire. How much time and effort
11 we invest into their growth as members of society
12 will impact the state and the country. How we treat
13 the youth in the present time is how we treat the
14 future of our nation. And I close with this sign
15 that says let's create opportunities for our youth.
16 [APPLAUSE].

17 CHAIRPERSON NURSE: Thank you. Thank you dear.
18 I think that is everyone in person. If we missed
19 anyone, you need to let us know in the back. We're
20 going to move to Zoom.

21 COMMITTEE COUNSEL: So, for the virtual panelists
22 on Zoom, once your name is called, a member of our
23 staff will unmute you and the Sergeant at Arms will
24 set the timer and give you the go ahead to begin.
25 I'm just going to list off the people we're going to

1
2 start with. So, we're going to go with Tanesha Grant
3 then Ronald Day then Danile Gerard.

4 TANISHA GRANT: Hello everyone. Thank you Chair
5 Nurse for this important committee meeting. We
6 appreciate your efforts. My name is Tanesha Grant.
7 I am the Executive Director of Parents Supporting
8 Parents New York and Moms United for Black Lives New
9 York City.

10 Today, I want to give testimony about family
11 separation that happens when parents are unlawfully
12 incarcerated. There are many children suffering
13 behind their mothers and fathers being on Rikers
14 Island. This leads to much generational harm and a
15 vicious cycle. I ask that this Committee and the
16 City Council continue to hold the DOC accountable and
17 ensure that Rikers Island is closed. I also ask that
18 money be put into the budget to support our parents
19 with services when they come home and resources to
20 stay with their family.

21 Parents deserve a productive way to reenter
22 society and stay with their children and their
23 families. It is very, very important that we invest
24 in our parents. If we invest in our parent then we
25 are invested in our children. We often know that

1
2 when you have a parent that has been locked up that
3 sometimes that cycle is over to the children
4 repeating that vicious cycle. What if we took all of
5 this money that we give to the Department of
6 Corrections, that we give to Rikers Island and really
7 invest it in our families?

8 As I heard before on testimony, it is the
9 communities that have the most resources that have
10 the less crime. So again, I implore everyone to
11 think about how parents are affected and how youth
12 are affected when their parents are held in jails for
13 a long period of time for no good reason. That is
14 the end of my testimony. I will be submitting
15 written testimony and again, thank you so much Chair
16 for holding this important hearing.

17 COMMITTEE COUNSEL: Thank you. Next up, Ronald
18 Day.

19 SERGEANT AT ARMS: Starting time.

20 RONALD DAY: Good afternoon Council Committee
21 Chair Nurse and Members of the Committee on Criminal
22 Justice and thank you for the opportunity to provide
23 testimony today.

24 My name is Ronald Day and I'm Senior Vice
25 President at the Fortune Society. I bring you a

1
2 unique perspective to this discussion having spent
3 one year on Rikers Island in 1992. I've been with
4 the Fortune Society for over nine years managing
5 various units including discharge planning,
6 employment services and our research and policy
7 centers.

8 The Fortune Society with this 56-year legacy is
9 committed to supporting successful reentry from
10 incarceration and providing alternatives to
11 incarceration. In Fiscal Year 2023, we served over
12 11,000 individuals across diverse programs including
13 nearly 2,700 people in our city jails. While we
14 heartened to see the Administrations recent
15 announcement about advancing programming and services
16 for people in DOC. The services described and the
17 \$14 million in funding do not amount to a full
18 restoration. It is also not clear, even after the
19 testimony offered today, what services the \$14
20 million will pay for. Before contract cancelation
21 last year, Fortune and our sister providers
22 collectively engage with nearly 1,700 people on a
23 daily basis across 200 housing units in seven jail
24 facilities, in group sessions, hard skills training
25 and other supports and activities.

1 DOC claimed it could provide identical
2 programming with in-house resources. We know now and
3 we knew then that that was wishful thinking. Thank
4 you for your time and consideration. Recognizing the
5 challenging financial decision the city confronts, it
6 is imperative to adopt a forward-thinking perspective
7 for the enhancement of our shared safety and well-
8 being.

9 We must remain vigilant against exacerbating
10 racial and socioeconomic inequalities. Investing in
11 proven strategies not only aligns with Fiscal wisdom,
12 but it's also a moral necessity that forces economic
13 justice, advances racial equality, and upholds our
14 collective humanity.

15 Thank you for the opportunity to testify here
16 today and my testimony will be submitted in full.
17 Thank you.

18 COMMITTEE COUNSEL: Thank you. Next, Daniele
19 Gerard.

20 SERGEANT AT ARMS: Starting time.

21 DANIELE GERARD: Thank you Chair Nurse, Council
22 Member Brewer, who I know was just there and
23 Committee Members. Children's Rights is a national
24

1
2 advocate for youth in state systems. My name is
3 Daniele Gerard and I am a Senior Attorney here.

4 We are also a member of the New York City Jails
5 Action Coalition. We advocate on behalf of young
6 adults on Rikers. As you have heard repeatedly
7 today, New York City operates both the most over-
8 staffed and excessively funded jail system in the
9 country. Despite the enormous sums poured into the
10 system, countless reports show that incarcerated
11 persons are subjected to some of the most dangerous,
12 degrading, and inhumane conditions in the country.
13 We need look no further than the Nunez monitor's
14 regular reports and the February 28, 2024 report
15 filed in Benjamin v. Molina detailing vermin
16 infestation and sanitary violations on Rikers.

17 Serving time on Rikers can also be a death
18 sentence: since Mayor Adams took office, 30
19 incarcerated people have lost their lives there.
20 Rikers must close by 2027 in accordance with the law.
21 Yet Mayor Adams's proposed budget will undoubtedly
22 reduce the chances of this happening by cutting
23 funding for alternatives to incarceration and re-
24 entry services and failing to adequately fund
25 community resources such as supportive housing and

1 Council to fund the Board of Correction adequately so
2 it can provide meaningful oversight of the
3 abomination that is Rikers.
4

5 We look to you and Speaker Adams to negotiate a
6 fair, just and reasonable budget that serves all New
7 Yorkers including young adults and everyone else
8 incarcerated on Rikers. Thank you for the
9 opportunity to testify today. I refer you to our
10 written testimony for further detail.

11 COMMITTEE COUNSEL: Thank you. Next, I'll
12 announce the next participants. Kelly Grace Price,
13 Amanda Granger, and then Eileen Maher. Kelly Grace
14 Price.

15 SERGEANT AT ARMS: Starting time.

16 KELLY GRACE PRICE: Oh hi, good afternoon. You
17 caught me off guard there. I'm so happy to follow
18 Batman. Those are kind of some hard big shoes to
19 follow. Uhm, and I'm very disappointed I can't be
20 there today for your first Criminal Justice hearing.
21 Council Member Nurse, I'm very excited for your
22 Chairmanship of this Committee. Jeremy as well, I'm
23 sorry I missed you. I'm in a hospital waiting room
24 waiting for a doctor's appointment, so I might have
25 to log off if security catches me but I just want to

1 say to preface, congratulations to all the women
2 bosses in the room today. I don't think there's ever
3 been a criminal justice committee hearing where the
4 Commissioner of DOC was a woman. The Commissioner of
5 Parole was a woman. The Chair of the Council was a
6 woman and the Executive Director of BOC was a woman.
7 What a great look for us New York City gals today. I
8 just wanted to take a moment to celebrate that if it
9 hadn't been already.

11 I missed a lot of the hearing but uhm, I caught
12 most of it but uhm, I caught most of it and I just
13 want to say please, uhm stay on Commissioner,
14 Assistant Deputy Commissioner Torres. She's been
15 promising a hand list of programs for years now.

16 Every time she shows up, she has asked for it and
17 please share it when you get it. We'd be very
18 interested in having that. I'll turn in my copious
19 written testimony but I just took off a few of the
20 highlights from it very quickly.

21 Again, I'm Kelly Grace Price from Close Rosies.
22 If you don't mind, I'd like to reemphasize a few
23 things I emphasize every year at this budget hearing
24 and I have since 2013 when I started coming to them
25 when it was still the Fire and Safety Committee. We

1 need budget parity with the Board of Correction.

2 Please answer all of the Executive Director's Budget
3 requests. I can't emphasize enough how important
4 that is. I support all of her budget requests and
5 urge the Council to expand on them. We still don't
6 have enough BOC employees to do the work of rule
7 making audits. We haven't had a PREA audit since
8 2019 and even then it was partial.
9

10 People are being raped and sexually assaulted and
11 we have no one to do the work of the audits. I fear
12 the same for whatever resolution comes with the
13 solitary confinement rule, we'll have no one to do
14 the audits and to hold the Departments feet to the
15 fire in the Administration.

16 I'd also like to emphasize uhm, that as the BOC
17 Charter is being rewritten or revamped, because of
18 some legislation put through by the former Chair of
19 this Committee involving, reporting on deaths on the
20 Island, there is an opportunity to go back and look
21 at the BOC Charter for parity.

22 I want to just move along quickly. As far as
23 access to cameras, I heard Tina Longo from Legal Aid
24 say this. I've heard her say it -

25 SERGEANT AT ARMS: Time is expired.

1 KELLY GRACE PRICE: Thank you for your time.

2
3 I'll include my written comments but I just want to
4 say New York City sends seven percent of the world's
5 female cage population into cages and we need to do
6 better. Thank you so much. Kelly Grace Price, Close
7 Rosies.

8 COMMITTEE COUNSEL: Thank you. Next, Amanda
9 Granger.

10 SERGEANT AT ARMS: Starting time.

11 AMANDA GRANGER: Good afternoon, Chair Nurse and
12 Committee Members. My name is Amanda Granger, I am
13 the Senior Director of Communications at CASES.
14 We're one of the leading providers of alternatives to
15 incarceration in New York City and we're so honored
16 to be here today with so many of our partners and
17 allies. We specialize in working with people with
18 serious mental illness and criminal legal system
19 involvement. Every year, we provide hope and healing
20 to almost 10,000 New Yorkers. The vast majority of
21 them are low-income, Black and Brown people in over
22 policed and under resourced communities. We are
23 perhaps most well-known for the Nathaniel Assertive
24 Community Treatment or Nathaniel Act, ATI program.
25 This is the city's first ATI for people living with

1 serious mental illness who have a felony arrest. And
2 through Nathaniel ACT, participants are able to
3 access the treatment and support they need, which
4 leads to healthier and safer communities for all of
5 us.
6

7 I'd like to share the story of Michael, who is
8 not his real name but he is a recent Nathiel Act
9 graduate who came to CASES after being charged with a
10 violent felony for an incident while he was in a
11 psychiatric crisis.

12 As a child, Michael was adopted from the foster
13 system. In school, he was bullied and despite
14 frequent panic attacks, he still managed to enroll in
15 college. Unfortunately, he began drinking and using
16 drugs as a coping mechanism, eventually becoming
17 homeless and dropping out. He soon began
18 experiencing symptoms of serious mental illness,
19 including disorganized thinking and hallucinations.
20 Our Nathaniel ACT ATI team worked with Michael for
21 three years. They supported him to complete a
22 substance use treatment program, obtain permanent
23 housing and find full-time employment. Today, he
24 enjoys concerts and cultural events. He designs his
25

1 own clothing, and he has friends who love him for who
2 he is and he is committed to staying in treatment.

3
4 Michael's success story is not unique. Two years
5 after completing Nathaniel ACT, 93 percent of clients
6 have no new convictions and 100 percent have no new
7 violent felony convictions. Participants achieve a 70
8 percent reduction in homelessness and a 49 percent
9 decrease in psychiatric hospitalizations. And given
10 the cost of a stay at Rikers or an inpatient
11 facility, which we all know, Nathaniel Act has saved
12 the city millions of dollars. Nathaniel ACT
13 currently had a waitlist and with the Rikers
14 population growing, now is not the time to make new
15 cuts to ATI's, reentry, and supervised release
16 programs.

17 CASES ask that the Council fully fund the ATI
18 reentry coalition initiative requests supporting
19 programs like Nathaniel Act, and that the city
20 restore cuts to programs like our impact youth
21 mentoring program, which was cut by the Department of
22 Probation as well as Fortune Osborne's work at
23 Rikers. Thank you so much for your time.

24 COMMITTEE COUNSEL: Thank you. Next, Eileen
25 Maher.

1 programs such as law library, religious services,
2 education, court, medical and recreation at their own
3 whim. What I mean is that the officer or staff don't
4 feel like escorting or holding the program or
5 monitoring the service or program, they simply don't.
6 Hence, methadone, medical education and other
7 medication services such as insulin and finger
8 sticks, many others are remaining nonexistent. The
9 problem lies in the incompetency, ignorance and
10 sadomasochistic proclivities of the officers. They
11 simply do not care nor do they wish to care or even
12 do their jobs at all. It seems that the only time
13 they "work" is when torturing detainees, example the
14 use of pepper spray, violating the state and city
15 laws are in solitary confinement, raping and beating
16 detainees without provocation and of course, the age-
17 old past time of New York City DOC, the trafficking
18 and of weapons, contraband, narcotics and now with
19 the added ingredient of fentanyl. Violence reduction
20 in the facilities can only be achieved if the COs is
21 continued choreographic said violence.
22

23 Even though there are literally rooms full of
24 toilet paper and sanitary napkins, these items
25 continue to be scarce for the detainees, never mind

1
2 mattresses because the COs have repeatedly stated
3 that they just don't feel like getting the items.

4 These were issues when I was at Rosie's. They
5 were issues 50 years prior to that and they are
6 currently as intimated to me this week, by current
7 male and female detainees and by three anonymous COs,
8 who work in the DOC facilities currently. It is
9 transparently obvious that New York City DOC is
10 incapable of doing any and all of their jobs.

11 SERGEANT AT ARMS: Time has expired.

12 EILEEN MAHER: Can you just give me like one more
13 minute? Retraining does not work, for example, the
14 academy trains them not to traffic in contraband,
15 rape, so forth and so on but they do it anyway. The
16 new Commissioner murdered two detainees her first
17 month on the job. Mr. Williams and Mr. Luna that we
18 know of. Those are the only names that have been
19 released. I really just don't trust the members
20 anymore.

21 Control of the city jails must be turned over to
22 someone such as a federal receiver but really anyone
23 that's not New York City DOC. ATI's reentry and real
24 programming must be implemented and actually provided
25 properly. Close the Island, decarcerate, remove New

1
2 York City DOC from all and any facilities and replace
3 them with properly vetted psychiatrically evaluated
4 humane correction officers and staff. Increase ATI's
5 reentry community-based programs, such as mental
6 health, health, education, violence interrupters,
7 career training programs, housing and supportive
8 housing. Become a catalyst not in the plague of
9 maintaining a mass incarceration pandemic but in
10 creating positive change in services that ends mass
11 incarceration and serves as an example to the world.

12 Oh, and court food is, as it has always been, has
13 been a honey sandwich or a cheese sandwich and
14 sometimes milk. Fruit is a fantasy. Thank you.

15 COMMITTEE COUNSEL: Thank you. Next up we'll
16 hear from LuAnne Blaauboer then Nicole Farrelly, and
17 then finally Lauren Stephens-Davidowitz. LuAnne.

18 SERGEANT AT ARMS: Starting time.

19 LUANNE BLAAUBOER: Thank you Chair Nurse and
20 Committee for the opportunity to testify today. My
21 name is LuAnne Blaauboer and I am the Vice President
22 of Vocational Programs at Good Shepherd Services.

23 So I oversee several programs that are funded by
24 the Department of Probation through the Works Plus
25 Contract and I'll highlight the fact that they

1 resemble the recently shutdown Next Steps program in
2 terms of size and funding dollars. So, I'm very
3 concerned about the future direction of this agency.
4 I'm here today to underscore the value of these small
5 community specific programs that support vulnerable
6 populations like justice involved or out of school,
7 out of work youth.
8

9 So, enormous programs that serve large numbers of
10 people with one size fits all outcomes might seem
11 like the efficient solution to challenging issues
12 like poverty and recidivism but they're not because
13 those who are most at risk, disconnected from school
14 and work, lives disrupted by the legal system, living
15 in communities that are suffering from the long term
16 consequences of systemic racism, may not have the
17 resources, soft skills or even the baseline stability
18 required to engage with those kind of programs at
19 all.

20 If we want to move the needle on poverty or on
21 community violence, on recidivism, then small,
22 hyperlocal, high touch programs delivered by
23 organizations with deep expertise, deep roots in
24 communities that we serve. Those programs are the
25 answer. Programs that allow us as providers to give

1
2 intensive levels of support to those most at risk of
3 falling through the cracks are a crucial part of the
4 solution. Our programs start by connecting with
5 young adults because we know that for young adults,
6 supportive, transformational relationships trump
7 every other intervention, including high tech CGI
8 gadgets right?

9 So, in addition to standard work readiness
10 content, we highlight outcomes like showing up,
11 attendance, because attendance issues are the number
12 one reason young people lose their jobs and we
13 highlight social, emotional outcomes because
14 dysregulation on the job isn't conducive to job
15 persistence.

16 So, our programs support young adults in building
17 stability along with building their capacity to be
18 able to take advantage of career level training.
19 These small programs are a vital link in a system of
20 opportunities because without them, those who need
21 the resources the most are the most in danger of
22 being left behind by one size fits all programming.
23 And we will never be able to move that needle if we
24 refuse to invest in the people who are most at risk.

1 cannot be overstated. In one year, we reduced
2 sentences by 1,300 years, saving taxpayers tens of
3 millions of dollars and 98 percent of our clients
4 avoided detention by meeting their court
5 requirements.
6

7 The cost of one year on Rikers is \$556,000 per
8 person. For that, ATI's can serve over 30 people and
9 yield life changing results that make us all safer.
10 As compelling as these numbers are alone, I want to
11 tell you about two of our clients. It's important
12 that we remember that every one of our more than
13 6,000 people on Rikers is a person with a story.

14 When I met Mr. Lopez, he was 30 years old and 6
15 years into his 10-year probation sentence. He was on
16 Rikers for violating probation because he missed
17 appointments and dropped out of required treatment
18 due to a painful back injury that left him almost
19 immobile. He had committed no new crimes and was a
20 loving husband and father to two young children. On
21 Rikers Island, Mr. Lopez's physical health
22 deteriorated. He was in severe pain and became
23 wheelchair bound. He never received his promised
24 MRI's or pain medication.
25

1
2 In one meeting, he told me, this place is
3 literally killing me. I would take hundreds of years
4 of house arrests rather than be in here. With our
5 advocacy, he was restored to probation after spending
6 months deteriorating on Rikers Island. With proper
7 supports now in place, his probation requirements
8 adjusted to accommodate his physical limitations. He
9 has reenrolled in treatment, is back with his family
10 and is living a law-abiding life.

11 Another client, MT, is a 23-year-old nonbinary
12 individual who is facing 25 years in prison. We
13 gathered background information to understand their
14 needs and presented them to the court. MT had
15 significant childhood trauma, faced many challenges
16 and had a difficult time on Rikers Island. We found
17 a residential program where MT was accepted, achieved
18 sobriety and thrived. We advocated for a reduction
19 in their charges and a nonincarcerated sentence with
20 a longer-term residential program as an ATI.

21 The Judge and ADA agreed. MT has maintained
22 sobriety for over one year, completed vocational
23 training program and is now employed full time. They
24 received a housing voucher and are looking for
25 independent long-term housing. The court recently

1
2 decided that upon completion of the program, MT will
3 be able to re plea to a misdemeanor in May.

4 Without court advocacy and community-based
5 programs, MT could have spent decades in prison
6 towards what gain—

7 SERGEANT AT ARMS: Time is expired.

8 NICOLE FARRELLY: Thank you.

9 COMMITTEE COUNSEL: Thank you. Next, we'll hear
10 from Lauren Stephens-Davidowitz and then the last
11 person will be Peleya Patterson. Lauren.

12 SERGEANT AT ARMS: Starting time.

13 LAUREN STEPHENS-DAVIDOWITZ: Hi, thank you all so
14 much for giving the Legal Aid Society the chance to
15 address the Preliminary Budget for the Board of
16 Correction. We strongly oppose the proposed cuts to
17 the small but vital protector of the people held in
18 the city's jails. Jails present the challenge to
19 democracy. Behind closed doors, the government
20 exerts maximum control over someone's life. To
21 ensure accountability in the exercise of this power,
22 the City Charter gives the Board of Correction
23 authority to monitor the city's jails.

24 The Board is in effect, the publics only window
25 into the closed world of corrections. City law

1
2 makers and residents and families of those in
3 custody, depend on the board for reliable information
4 about the jails, admits the mounting Rikers death
5 toll and DOCs inaccurate or shifting explanations.
6 The Board has provided high quality information about
7 the often deeply disturbing circumstances leading to
8 each death.

9 Recently the Board issued an in-depth analysis of
10 DOCs use of chemical agents against people who
11 present passive resistance, argue with staff, or
12 attempt to inflict self-harm. And it released a
13 report on a destructive fire in 2023 where people
14 remain locked in cells whose sprinklers had been
15 turned off. The Board also regularly releases data
16 about restrictive housing, young adults in custody,
17 and efforts to stop sexual abuse.

18 Notably for most of the past year, the Board
19 provided its oversight despite City Halls decision to
20 cut off its access to jail surveillance videos. A
21 violation of the City Charter that was only reversed
22 after the Board took court action. The Board cannot
23 perform its role without a fully funded and well-
24 resourced staff and the city needs a watchdog over
25 its jails now more than ever. The Council is well

1
2 aware of DOCs failures to provide basic services and
3 to keep those in custody safe. The Council must
4 ensure that the Boards pivotal role is sustained with
5 sufficient funding. Thank you.

6 COMMITTEE COUNSEL: Thank you. Next, Peleya
7 Patterson.

8 SERGEANT AT ARMS: Starting time.

9 PELEYA PATTERSON: Good afternoon. Thank you
10 Chair Nurse and the members of the Committee on
11 Criminal Justice for the opportunity to testify on
12 the preliminary budget hearing for the Department of
13 Probation.

14 My name is Peleya Patterson and I am the Vice
15 President of Justice Initiatives at Good Shepherd
16 Services. Good Sheperd Services is a provider of
17 community-based youth justice programs, cure
18 violence, family enrichment centers, and community
19 partnerships programs as well as community centers
20 and after school programing.

21 When I last testified before the Committee in
22 September, I was demanding that the Department of
23 Probation reinstate the next steps mentoring program
24 which the Department of Probation abruptly terminated
25 in August of last year.

1
2 Today, I am urging the Council to restore cuts to
3 the Arches program which were announced in the
4 November plan and to protect programs that support
5 youth across New York City, such as Arches, Work Plus
6 and many more. I heard testimony today about the
7 need for educational and the vocational opportunities
8 but a failure to recognize the impact that credible
9 messengers, positive adult relationships and
10 mentoring have on youth that help them navigate the
11 challenges they face to attain these opportunities.

12 Credible messengers not only help youth cope with
13 and navigate the daily challenges of their lives but
14 also provide youth with tools that can later serve as
15 a foundation for future success.

16 In a time of financial crisis, young people
17 should not be under attack. The city has decided to
18 remove critical services that will have a negative
19 impact across the city. Young people are facing so
20 many issues and they are asking us to reinvest in
21 them, not take resources away. Thank you again for
22 the opportunity to testify.

23 COMMITTEE COUNSEL: Thank you. Uhm, I'm just
24 going to note for the record, those whose signed up
25 to testify today and those names are Michael

1
2
3
4
5
6
7
8
9
10
11
12
13
14
15
16
17
18
19
20
21
22
23
24
25

McWillan(SP?), Tonya Crupat(SP?), Trinity
Moralas(SP?), Candy Johnson, Julian Calvin Harris,
MaryLynn Worlwas(SP?), and Julian Calvin Harris and
that's all.

CHAIRPERSON NURSE: Okay, thank you to everyone
who testified today and stayed and testified online.
Thank you to all the staff here including the
Sergeants, the tech folks, everyone here. This
concludes our Preliminary Budget Hearing. [GAVEL]

C E R T I F I C A T E

World Wide Dictation certifies that the foregoing transcript is a true and accurate record of the proceedings. We further certify that there is no relation to any of the parties to this action by blood or marriage, and that there is interest in the outcome of this matter.



Date April 8, 2024