

CITY COUNCIL  
CITY OF NEW YORK

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TRANSCRIPT OF THE MINUTES

Of the

COMMITTEE ON GENERAL WELFARE  
JOINTLY WITH THE COMMITTEE ON HEALTH

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April 1, 2015  
Start: 10:11 a.m.  
Recess: 1:41 p.m.

HELD AT: 250 Broadway - Committee Room  
14th Floor

B E F O R E: STEPHEN T. LEVIN  
Chairperson

COREY D. JOHNSON  
Chairperson

COUNCIL MEMBERS: Annabel Palma  
Fernando Cabrera  
Ruben Wills  
Donovan J. Richards  
Vanessa L. Gibson  
Carlos Menchaca  
Ritchie J. Torres  
Maria Del Carmen Arroyo  
Rosie Mendez  
Mathieu Eugene  
Peter A. Koo  
James G. Van Bramer  
Inez D. Barron  
Robert E. Cornegy, Jr.  
Rafael L. Espinal, Jr.

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

Evangeline Santiago-Artesona  
Supervisor and Program Specialist  
Office of Head Start  
Appearing for: Ann Linehan  
Acting Director  
Office of Head Start

Lorelei Atalie Vargas  
Deputy Commissioner  
Early Care and Education  
Administration for Children's Services

Frank Cresciullo  
Assistant Commissioner  
Bureau of Child Care  
New York City Department of Health

Kimberly Barry  
Director  
Day Care Head Start  
District Council 1707

Kim Milton  
Head Start Local 95 Executive Board  
Appearing for: Carol Cox  
President, Head Start Local 95 Executive Board

Stephanie Gendell  
Associate Executive Director  
Citizen's Committee for Children

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[sound check, pause]

[gavel]

CHAIRPERSON LEVIN: Good morning,  
everybody. I am Council Member Steve Levin, Chair of  
the Council's Committee on General Welfare, and today  
this committee jointly with the Committee on Health  
will be examining a recently review conducted by the  
Federal Office Head State of environmental health and  
safety at ACS funded Head State centers. The issues  
that we're going to discuss today involve important  
collaborations between ACS, the recipient of Head  
Start funding in New York City, and the Department of  
Health and Mental Hygiene, the agency tasked with  
ensuring the safety in each childcare center in the  
city. And I would like to thank my colleague Council  
Member Corey Johnson, Chair of the Health Committee  
for doing this hearing with us today.

Before we begin, I would like to  
acknowledge my colleagues on the General Welfare  
Committee who have joined us. Council Member Annabel  
Palma is with us, and we expect others throughout the  
morning. I would like to thank and welcome  
Evangeline Santiago-Artesona and Mary Alice Kozak  
from the Federal Office of Head Start for attending

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today. We are also joined by ACS Deputy Commissioner Lorelei Vargas; DOHMH Assistant Commissioner Frank Cresciullo, union representatives, advocates and members of the public. Thank you all for coming today.

Early Learn NYC is ACS' system of subsidized childcare, which merges childcare, HEAD Start and UPK into a single system with the goal of providing high level services to eligible children. One of the more admirable goals of Early Learn NYC is to bring quote "Head Start like services to children being served outside of the Head Start system." Although Early Learn NYC has problems, including under enrollment in an overall underfunded system, all of the essential stakeholders agree that improving the quality of care for our children is the goal. The Head Start system itself goes back to 1965 and is the pillar of the early education system in our country. It is also an important component of the Early Childhood Education system as it is currently configured here in New York City under Early Learn. Specifically today, we will be discussing the Environmental Health and Safety Review conducted by the Office of Head Start of ACS funded

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Head Start programs. The first of several monitoring review the federal government will conduct.

In December of 2014, the Office of Head Start visited each Head Start classroom within ACS' system of 74 providers and found very--many very concerning deficiency areas that involve immediate threats to the health and safety of children and staff. The issues found by the Office of Head Start are extremely problematic: Pests, pollutants, children left unattended in classrooms, and allegations of abuse and neglect that did not receive the required follow up or often any attention at all. Although we are extremely concerned about these problems, and expect to hear details about how they will be remedied, I want to know that this review focused on ACS ' oversight of centers. While the allegations of abuse and neglect are very troubling, we are here to focus on ACS' and DOMH's monitoring of these centers, not individual Head Start centers.

The deficiencies cited in the report focus on ACS' lack of oversight including the non-existence of mental health services after allegations of abuse and neglect. And the complete absence of monitoring reviews, which should have been used to

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1  
2 create system wide reforms. Although the corrective  
3 actions--although the corrective action--action  
4 process is currently ongoing over the course of  
5 today's hearing, the committee expects to learn from  
6 the Administration how they will correct the many  
7 deficiencies found in the report. Further, ACS and  
8 DOHMH should have been collaborating to prevent the  
9 problems that were found by the Office of Head Start.  
10 And today we expect to hear a plan from ACS laid out  
11 in clear--clear terms on how they will begin to do  
12 so.

13 Before I turn it over to my co-chair  
14 today, Council Member Corey Johnson, Chair of the  
15 Health Committee, I would like to thank my  
16 Legislative Director, Matt Ojala; General Welfare  
17 Staff Tonya Cyrus, Brittany Morrissey, and Andrea  
18 Vazquez, and Health Committee staff Dan Hafetz,  
19 Crystal Pond, and Crilhien Francisco for their work  
20 on today's hearing. Council Member Johnson will now  
21 give his opening statement.

22 CHAIRPERSON JOHNSON: Thank you, Council  
23 Member Levin. Good morning everyone. I'm Council  
24 Member Corey Johnson, Chair of the Council's  
25 Committee on Health. I want to thank my friend and

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colleague, Council Member Steven Levin for partnering  
with me today on this important oversight hearing.

Today's hearing entitled Examining Health and Safety  
at ACS funded Head Start programs is an opportunity  
to examine a recent review by the Federal Office of  
Head Start. The reviewed identified deficiencies in  
Head Start programs overseen by ACS and DOHMH. Some  
of these identified deficiencies are quite alarming:

Dangerous physical conditions like asbestos on  
exposed pipes, and appalling allegations of abuse and  
neglect. These raise serious questions about the  
health and safety of our children in these programs.

For those of you who--for those you who--for those of  
you who are familiar with the program, Head Start is  
the gold standard for Early Childhood interventions.

Head Start is a federal program that promotes the  
school readiness of children ages 0 to 5 from low-  
income families--from low-income families through  
centers in their local community. Launched during  
the War on Poverty in the 1960s, Head Start is one of  
the best studied educational programs in the country.

With proven results of positively impact in the  
outcomes of participating children. With

approximately 13,000 children enrolled in City funded

Head Start programs [coughs], this is a resource desperately needed by children and many low-income New Yorkers. I know this Administration is committed to meaningfully expanding Early Childhood Education opportunities, and takes these issues very seriously. But I am deeply concerned by the findings in this report. I'm troubled by the idea that City sponsored Head Start programs are anything less than stellar. Of course, mistakes are made, and every program faces challenges. But, we can't take lightly any questions relating to systematic problems.

We will hear from ACS and DOHMH today about how these programs are overseen. With over 73 organizations in contract with the City to provide Head Start services, there is question that ACS and DOHMH have a very challenging job. Not to mention the vast responsibility DOHMH has in overseeing the rest of the child care system. ACS as the super grantee for federal Head Start programs and DOHMH as the licensing and inspecting entity have oversight around 200 Head Start centers. We want to explore how these two city agencies currently coordinate their efforts, and if there are opportunities for better collaboration. And while ACS may still be in the



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process of its corrective action review, we want to use today as an opportunity to hear about their progress. Finally, I want to echo Council Member that this hearing today about ACS--is about ACS and DOHMH's oversight of these programs. The National Office of Head Start's review focused on ACS' oversight of these programs. Accordingly, our focus is on ACS and DOHMH as well. We are here today to criticize any individual Head Start program, but rather look at the system as a whole to ensure proper surveillance going forward. I'd like to welcome Evangeline Santiago-Artesona, and Mary Alice Kozak from the Federal Office of Head Start, as well as representatives from ACS, DOHMH, advocates, providers, and members of the public. Before I close, I want to acknowledge my colleagues on the Health Committee who are with us. None are here yet, but they will be here. There are multiple committee hearings going on at the same time right now.

I also want to thank my Legislative Director Luis Cholden-Brown; Health Committee Counsel Dan Hafetz; Policy Analyst for the Health Committee, Crystal Pond; Crilhien Francisco, the Finance Analyst for the Health Committee, and the staff of the

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Committee on General Welfare, Andrea Vazquez; Tonya  
Cyrus, and Brittany Morrissey for their work in  
preparing for today's hearing. Thank you very much.  
Before I turn it over to Chair Levin, I want to say  
that actually, I have to run across the street to  
City Hall to a hearing, but I will be back in a few  
minutes, and I will be here throughout this hearing.  
I 'm not leaving because it's not important. I have  
to go in and do something. So I look forward to  
participating with all of you, Chair Levin.

CHAIRPERSON LEVIN: Thank you, Chair  
Johnson, and at this time, we would like to welcome  
representatives from the Office of Head Start Region  
2, Evangeline Santiago-Artesona and Mary Alice Kozak  
to provide testimony to this committee. If you  
wouldn't mind coming up. Thank you.

[pause]

CHAIRPERSON LEVIN: We've been joined by  
Council Member Ruben Wills of Queens.

EVANGELINE SANTIAGO-ARTESONA: Good  
morning.

CHAIRPERSON LEVIN: Good morning. Thank  
you so much for joining us.

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EVANGELINE SANTIAGO-ARTESONA: You're welcome. Good morning New York City Council Committee and good morning everyone. My name is Evangeline Santiago-Artesona. I'm a Supervisor and Program Specialist for the Office of Head Start, and I'm here to read the statement of our Acting Director of the Office of Head Start, Ann Linehan because she was unable to be here. As the Acting Director of the Office of Head Start, a component of the Administration for Children and Families, U.S. Department of Health and Human Services, I am submitting the following statement regarding the results of the Federal Monitoring Review of the Administration for Children and Services Head Start Program. Our task is responsible for the federal funding and oversight of Head Start and Early Head Start programs.

Before addressing the specifics of the ACS Review, we believe a description of the Federal Review Process will be helpful. Prior to October 2014, the Office of Head Start conducted a review of every Head Start grantee every third year. The Office of Head Start would send in a team of reviewers that would spend generally a week or in the

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case of super grantee like ACS, which contracts with numerous delegate agencies to develop Head Start services. The team will be on site for up to three weeks. Review teams were multi-disciplinary and will review all aspects of the grantees' administration of the Head Start program including, for example, fiscal governance, health, safety and education areas.

Effective October 2014, the Office of Head Start revised its monitoring system to better align it with the statutory mandated Designation Renewal System.

One major impact of the Designation Renewal System is that the grantee no longer receives automatic funding year after year. Under the Designation Renewal System, all grant awards have finance project period of five years. As a result, the Office of Head Start transitioned from reviewing grantees once every three years to a series of monitoring events that occurred over the first three years of the grantee's five-year grant. In the fourth year of a grantee's five-year grant, Office of Head Start must determine if the grantee is eligible for a renewed five-year grant, or if the grantee will be required to compete for funding. Grantees found to be lower performing

because they meet one of several specific conditions must compete for future funding.

As part of the Revised Monitoring System that became effective October 2014, the Office of Head Start began conducting an Environmental Health and Safety Review in the first year of a grantee's five-year grant. Regarding the results of ACS's Environmental Health and Safety Review during the first two weeks in December, 2014, Environmental Health and Safety reviewers visited 196 centers, and 1,031 classrooms and playgrounds. It is important to note that in the former monitoring system, Office of Head Start would visit a sample of Head Start centers and classrooms. Under the new Environmental Health and Safety Protocol, every Head Start center and classroom is visited.

The official Monitoring Report was issued to ACS on January 20, 2015. However, due to the serious nature of the findings, the Office of Head Start communicated with ACS. While the review was ongoing to ACS, will be aware of the preliminary findings, and begin to take immediate actions. Because of the Environmental Health and Safety Review, ACS was designated as an agency with nine

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areas of deficiency, and three areas of non-compliance. A deficiency means a violation of Head Start rules that is particularly serious. A non-compliance is a violation of a less serious nature. Deficiencies fell into two major categories: Violation of federal requirements, which pose a threat to the health and safety of children and staff, and failure to perform substantial requirements related to Early Childhood Development and Health Services.

ACS has corrected two of the nine deficiencies. At the time of the review, two centers were not licensed, and 26 centers did not have current child care licensees as required. ACS has corrected this deficiency. All centers are licensed. ACS also corrected the deficiency related to criminal record checks. Criminal record checks have been completed on all staff, and ACS has instituted a process to ensure that no future Head Start staff are employed prior to the completion of the criminal record check. Therefore, OHS has determined these deficiencies have been corrected.

OHS will conduct at least two more on-site follow-up visits to determine if the remaining

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seven deficiencies have been fully corrected. OHS determines the amount of time referred as to the corrective action period that ACS has to remedy its deficiencies. The corrective action period expires on April 25th of 2015. However, ACS must submit a request for an extension, an explanation of their circumstances granting an extension of OHS consideration. Absent OHS' approval of an extension, shortly after April 25th, the Office of Head Start will conduct a follow-up review to determine if the following six deficiencies have been corrected:

First, ACS did not ensure premises were kept free from pests; unsafe heating system; pollutants; hazardous materials and conditions. Five centers had evidence of rodents and roaches. Three centers had unsafe heating systems. Five centers had pollutants including asbestos, mold, and one center had hazardous material.

Second, ACS did not ensure indoor and outdoor premises were cleaned daily, and kept free of undesirable and hazardous conditions. Six centers had classroom furnishings that were in poor repair or dirty. Fifteen centers had unsafe outdoor play

areas, and approximately 15 centers had classrooms with toxic substances within reach of children.

Third, ACS did not ensure that the children were not left alone or unsupervised while under their care. There were four instances where a child was left alone and unsupervised.

Fourth, ACS did not consult with or involve the mental health professional, delegate programs or parents or staff on how to implement program practices in response to the mental health concerns of individual children or groups of children. Promote wellness by providing group and individual staff and parent education, or assist in providing special help for children with a typical behavior or development. There were several serious allegations of child maltreatment reported in the 12 months prior to the review. ACS reacted to most allegations by determining if the allegations were sustained or unfounded. ACS failed to take the immediate preventive measures required to ensure environments were mentally and emotionally healthy for all children regardless of the outcome of the investigation.



Fifth, ACS failed to establish an effective reporting system to control program quality and maintain program accountability. ACS investigated several incidents of child maltreatment that were determined to be unfounded. But, then specific to this report to establish the reasons for the outcome were not available and ACS did not develop reports to improve program quality. In addition, ACS did not ensure its delegates consistently followed the established measures for reporting cases of suspected or known child abuse and neglect. The incidents of alleged child maltreatment were not reported as required by State Law. The details and outcomes of which are contained in the Monitoring Report.

Sixth, ACS did not have an effective ongoing monitoring system to identify delegate agencies that were not in compliance with federal requirement. The lack of an effective ongoing monitoring system contributed to the volume and gravity [sic] of the health and safety finding. An effective monitoring system would have identified the health and safety issues. And would have verified

that the delegates took immediate actions to correct the violations.

Once OHS has made the determination regarding the determination of these six deficiencies, the Office of Head Start will issue a formal follow-up report to OCS. If any of the six deficiencies are determined to be uncorrected, the Office of Head Start will proceed with a notice of its intent to terminate ACS' Head Start grant. While Head Start grantee usually successfully address deficiencies, OHS does terminate grants from time to time.

The seventh deficiency was that ACS did not ensure that all Head Start centers had at least 35 square feet of usable indoor space per child. Fifty-two settings did not have adequate usable space as required. For this particular deficiency, the Office of Head Start purposely extended the corrective action period for this deficiency until July 25th of 2015. This decision was made so that no child currently enrolled will lose its Head Start slot this school year. Office of Head Start will follow the same process for the final follow-up visit in early August to determine if this deficiency has

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1 been corrected. During the August follow-up visit,  
2 Office of Head Start will also determine if the three  
3 non-compliances cited in the report of January 20,  
4 2015 were corrected. Non-compliances are findings  
5 that are far less serious than deficiencies, and are  
6 easily addressed by the grantee. However, it is  
7 important to know that non-compliance left  
8 uncorrected eventually becomes a deficiency. So it  
9 is important that non-compliances are corrected. In  
10 the event that the Office of Head Start does not  
11 notify ACS of its intent to terminate ACS' current  
12 grant, ACS will have the right to appeal this  
13 decision to the Departmental Appeals Board of the  
14 U.S. Department of Health and Human Services.

15  
16 We want to reassure the Council and the  
17 community should ACS Head Start grant ultimately be  
18 terminated, it is our goal to avoid any disruption to  
19 the extent possible to services for involved  
20 children. If ACS is successful in correcting all  
21 findings, ACS will still be required to compete for  
22 renewed funding at the end of the current five-year  
23 grant since the Designation Renewal System requires  
24 any grantee with a deficiency to compete for renewed  
25 funding.

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1  
2           In closing, the Office of Head Start  
3 appreciates the interest the Council has shown in its  
4 Head Start Program, and we share the goal of wanting  
5 the highest quality Head Start Programs for all  
6 children. The Office of Head Start has been ongoing  
7 communication with ACS since ACS became aware of the  
8 serious issue last December. We will continue to  
9 provide technical assistance to ACS through the  
10 corrective action process to fulfill our commitment  
11 to ensure safe settings and high quality services for  
12 all the children and staff in New York City's Head  
13 Start facilities. I thank you all for your time, and  
14 if you have any questions, please contact Ann Linehan  
15 at the Office of Head Start. We also provided a copy  
16 of the statement. So there I guess the official has  
17 been offered. [sic] Okay? Thank you.

18           CHAIRPERSON LEVIN: And thank you very  
19 much for your testimony. We're certainly grateful  
20 that you are here today to speak to this issued, and  
21 to provide an update as to where the--the status is  
22 on the corrective action, as well giving us kind of a  
23 fuller picture that helps us--helps further explain  
24 the findings in the report, and gives us a clearer  
25 understanding. So, again, we thank you very much

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your willingness to be here and provide this  
testimony to this committee today. Thank you.

[background comments]

CHAIRPERSON LEVIN: Okay. At this time,  
we would like to call up representatives from the  
Administration for Children Services Lorelei Vargas,  
Deputy Commissioner, and from--from the Department of  
Health and Mental Hygiene, Frank Cresciullo,  
Assistant Commissioner of Child Care.

[pause]

CHAIRPERSON LEVIN: Sorry. Oh, we've--  
sorry, we've also been joined by Council Member  
Carlos Menchaca of Brooklyn.

[pause]

DEPUTY COMMISSIONER VARGAS: Good  
morning, Chairs Levin and Johnson.

CHAIRPERSON LEVIN: Sorry, Deputy  
Commissioner if you would hold on one second, we do  
have to swear you in.

DEPUTY COMMISSIONER VARGAS: Okay.

CHAIRPERSON LEVIN: So do you--do you  
affirm to tell the truth--if you could all raise your  
right hand, please. Do you affirm to tell the truth,  
the whole truth, and nothing but the truth in your

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testimony before this committee, and to respond  
honestly to council member's questions?

DEPUTY COMMISSIONER VARGAS: I do.

CHAIRPERSON LEVIN: Okay. Thank you.

Deputy Commissioner, you may go ahead.

DEPUTY COMMISSIONER VARGAS: Good  
morning, Chairs Levin and Johnson, and members of the  
General Welfare and Health--and Health Committees.  
My name is Lorelei Atalie Vargas, and I'm the Deputy  
Commissioner for Early Care and Education at the  
Administration for Children's Services. Thank you  
for the opportunity to discuss the recent federal  
audit of ACS' Head Start sites, and to update the  
Council on ACS' ongoing efforts to provide quality,  
safe Head Start services to young children throughout  
New York City. ACS' Division of Early Care and  
Education provides over \$1 billion in funding to  
subsidize Early Care and Education programs each  
year. Fiscal Year 15 approximately \$470 million  
funds child care vouchers, and another \$538 million  
fund our contracted system Early Learn NYC. Several  
funding streams support Early Learn NYC including  
Head Start dollars, State Child care block grants and  
Universal Pre-Kindergarten dollars as well as city

tax levy and privately raised dollars. ACS receives approximately \$129 million of Head Start funding each year, which support 73 Early Learn programs that offer almost 13,000 seats at 191 centers throughout the city.

The latest figures show that enrollment in Head Start funded Early Learn centers is approximately 91%, which is slightly higher than the 88% enrollment rate across all 350 Early Learn centers. Early Childhood programs play a critical role in supporting young children's development, learning and preparation for school. Head Start funding and programming allows New York City to provide Early Education services, and positive learning experiences to eligible three and four-year-old children. Which helps these youngsters gain the confidence and skills they need to succeed in kindergarten, first grade, and beyond.

ACX--ACS works in partnership with the Department of Health and Mental Hygiene in several areas to provide safe learning environments in our Head Start programs throughout the city. As you will hear in their testimony, DOHMH conducts inspections of Head Start sites where a variety of factors such

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as staff qualifications and clearances, supervision, child safety and environment are assessed. ECE and DOHMH leadership meet quarterly, and ECE and DOHMH staff meet monthly to discuss issues that are raised during the inspection process, as well, as any licensing issues. We're also working to enhance information sharing between our agencies, and have created a process by which DOHMH will provide monthly lists culled from the internal systems of any violations found at Head Start sites. We also work in partnership with the Fire Department and the Department of Buildings, which in addition to DOHMH each have a role in the license renewal process. There is no priority ACS takes more seriously than the safety of New York City children. The City has a rigorous inspection protocol to constantly monitor Head Start sites. But whenever an issue is brought to our attention--whenever an issue is brought to our attention either by a parent or a sister agency in government, we respond aggressively partnering with other city agencies when necessary to correct it.

This past December as part of their ongoing monitoring of federally supported programs, the Office of Head Start conducted a review of 73



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Head Start funded Early Learn contractors in New York City. HHS staff visited 191 centers to make sure programs met all regulatory and safety standards. The audit took place of a ten-day span in December 2014 under a new review format adopted by the Federal Head Start Office last year. As of last year, the Head Start Office has begun conducting annual thematic reviews allowing more intensive focus one issue at a time. This recent audit focused specifically on health and safety. According to the audit, the ACS contract programs received a total of 212 findings related to health and safety. These findings were in the following areas: Background checks of provider staff; licensing of centers; maltreatment allegations against center staff; facilities issues; transportation, and over-enrollment and over-enrollment and space concerns.

First, we must point out that while the audit revealed concerns, none posed an immediate risk to any child in these Head Start programs. If such a risk had existed, we would have worked with DOHMH to close the programs immediately. Second, many of the issues identified by the audit were previously picked up by our own rigorous inspections, and were in the

process of being fixed at the time of the HHS review.

Third, some of the most common citations were the result of issues around staff clearances and site permitting. Those issues were quickly identified and resolved, and we're communicating more clearly with programs to ensure that they fully understand proper clearance and licensing procedures. The audit required specific findings to be handled within specific timeframes from 10 days to within 180 days, depending upon the seriousness of the finding. ACS developed action plans for each citation to ensure it is corrected within the necessary time period. All the issues cited in the report were either addressed immediately or are being resolved through enforcement of a corrective action plan. None of the citations issued in the Evaluation necessitated a site to be suspended or closed. To date, ACS has resolved 100% of the 18 violations that the Office of Head Start required us to address immediately, which were related to background checks. We've also resolved 100% of the 28 violations mandated to be resolved by a deadline of March 25th, which were related to state licensing. By April 25th, we're required to resolve a total of 102 violations. As of March 25th--and as

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of March 25th, we've already resolved 86 of them.

Four violations related to vehicle safety equipment

and bus monitoring training will be remedied by May

21st. The remaining 60 violations, which relate to

issues about class size and about classroom

measurements that did not meet the requisite 35

square feet per child as prescribed in the Head Start

regulations are on schedule to meet the completion

deadline of July 25th.

The findings that HHS required us to

address immediately involved programs hiring staff

before obtaining the results of their background

check. Of 73 Head Start programs audited, six were

cited for hiring a total of 18 staff members before

their background checks cleared. For context, Early

Learn Programs employ a total of 3,800 staff. Each

of the 18 employees in question underwent background

checks prior to being hired, and began employment

under close supervision of a fully cleared staff

member while a final review of state databases

occurred. We're happy to report, however, that the

outstanding background checks were completed within

the 10 days as required under the audit. To prevent

future misunderstandings, ACS has made clear to our

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Head Start providers that staff are not permitted to  
being employment until all clearances are received.

And we've re-issued our policy to reiterate this  
mandate. We've also provided additional training for  
our programs, and have developed a vacancy trackers  
for each Early Learn agency, which requires each  
agency to report on a monthly basis regarding  
vacancies and any clearances needed to fill those  
vacancies.

The Audit also resulted in findings that  
28 of the audited sites were operating without a  
license. Upon receiving the Audit, ACS confirmed  
with DOHMH that each one of the 28 sites was either  
currently licensed or what is called expired in  
renewal status. Which means that license renewal was  
pending paperwork and/or FDNY clearance. ACS  
coordinate with DOHMH and the FDNY to expedite permit  
issuance, and we've successfully resolved all of the  
28 violations within the required time frame. ACS  
regards every allegation of child abuse and  
maltreatment with utmost seriousness. Our Division  
of Child Protection thoroughly investigates all  
reports made to the State Central Registry. The Head  
Start Audit revealed a number of findings regarding

the treatment of some of or children by staff members at a few of the Head Start sites. The findings of the audit covered a range of allegations including inadequate supervision, inappropriate punishments and deficiencies in the reporting incidents--in the reporting incidents. Some allegations of mistreatment were ultimate deemed unfounded after investigation. Regrettably, this was no always the case. In those instances where maltreatment was found, the employees were terminated and additional-- and additional training was provided to the program staff. ACS does not tolerate any form of abuse or maltreatment of any child in our agency's care. ECE's training and quality assurance team has begun providing intensive training for program staff. We're also requiring all programs to spend two professional days in September prior to the start of the school year to address standards of conduct, supervision, safety and reporting allegations of abuse and neglect.

ACS' Media Campaign, which encourages the public to report allegations of abuse and maltreatment is being expanded to target the Early Care and Education community. Additionally, the

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Early Care--the Early Education and Child Welfare Divisions with ACS are improving internal tracking systems, and communication among divisions to ensure that the Early Care and Education Division is able to provide the necessary support and supervision to providers, children and families.

The Office of Head Start has granted ACS until April 25th to remedy facilities issues cited in their report. These types of issues are defined by OHS as threats to the health and safety of children. And fall under the category of safe and clean facilities, healthy--healthy learning environments and playground safety. The cause for citations in these areas vary widely ranging from issues such as cleaning substances within the reach of children, the presence of rodents and/or garbage to water damage to exposed wood stables and broken windows. ACS' Facilities team examined the affected Head Start sites, and made some of the immediate fixes. But other remedies require more time to effectuate. Of the 102 citations in these areas, only 16 remain outstanding, 10 of which pertain to playground safety issues, which could not be immediately addressed due to inclement weather conditions.

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ECE is taking additional internal measures to proactively address the concerns generated by the audit with an eye towards preventing these concerns from arising again in the future. Our plans include the creation of a new position in ECE to oversee Head Start service, increasing the number of visits to each site from once per year to a minimum five times per year or more if necessary by a Program Specialist who will monitor and work closely with our Head Start programs to ensure high quality services. And improving the technology and supports available to our team as they provide ongoing training and technical assistance to the City's Head Start programs.

We're also working on establishing better coordination and communication with our partners at NYCHA, DCAS, FDNY, DOHMH and DOI. ACS is committed to ensuring the availability of quality Early education services to all children throughout the city in environments that are safe and conducive to learning. We continue to work with our Head Start providers to achieve these goals, and I'm confident that together we will alleviate the concerns that were raised in the course of this most recent federal

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audit. I thank you again for the opportunity to update the Council about our agency's work to address these issues. And I look forward to partnering with all of you as we continue to refine our system. Thank you for this time this morning, and I welcome your questions.

ASSISTANT COMMISSIONER CRESCIULLO: Okay. Good morning. [coughs] Good morning, Chairman Levin and members of the committee. My name is Frank Cresciullo. I am the Assistant Commission for the Bureau of Child Care at the New York City Health Department. On behalf of Commissioner Bassett, I thank you for the opportunity to testify today. The Bureau of Child Care permits and inspects nearly 12,000 child care providers in New York City. This includes more than 2,200 group child care programs, which serve children under age six in child care centers. 7,600 family day care, which offer home-based care from up to 12 children. 1,500 after school programs and nearly 600 camps. Group child care and summer camp services are regulated under the New York City Health Code, while family day care and after school programs are regulated under the New York State Office of Children and Family Services.



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Which has authorized the city to inspect these  
programs for compliance with its regulations.

The Department believes that all children  
in child care should receive high quality age and  
developmentally--developmentally appropriate  
programming. This should occur in a safe and clean  
setting from providers who maintain the necessary  
permits, licenses and certifications. To that end,  
the Bureau issues permits to child care services, and  
conducts unannounced initial and follow-up  
inspections to check for compliance with health and  
safety regulations. We inspect every child care  
program at least once a year, and when violations are  
cited conduct follow-up inspections until we see that  
the conditions have been corrected. We issued  
notices of violations subject to fines imposed at the  
OATH Health Tribunal, and conduct enforcements  
actions including emergency closures and permit  
revocations where necessary to protect children.

The Department works very closely with  
its sister agencies, in particular the Administration  
for Children's Services, which has contracts with  
free child care programs, including those under the  
Federal Head Start Program. In addition to monthly

standing meetings, the Department staff confers routinely with our counterparts at ACS. For example, the Department alerts ACS immediately if we initiate a suspension action against an ACS contracted center. So they may plan for the replacement of Children. ACS also has access to the Bureau's Inspection Database so they can review results of the Department's inspections.

A federal audit of the City's Head Start Program [coughs] found several serious violations. The Department staff has been working closely with ACS at the sites mentioned to address concerns as quickly as possible. When the Department finds a Head Start location or any child care facility operating with significant risks that cannot be correct at the time of the inspection, we close that site immediately and help parents locate alternative care. It's important to note that while we are working to help these programs address deficiencies, we have not found cause for closing any of the centers identified in the audit. The audit raised two primary concerns. That there were programs operating with expired permits, and that there were programs observed with unsanitary or unsafe

conditions. With regard to the first issue, the City's Health Code allows child care centers to continue operating for a period of time with expired permits so long as the program is working towards renewal. Permit renewal typically requires submission of substantial paperwork, payment of prior penalties, and frequently re-inspection of other--by other agencies. The Department closely tracks the ongoing submission of this information by programs. So that we're able to report what steps remain before a permit may be renewed. We are also pleased to report that working in collaboration with ACS, the 28 Head Start programs identified by the audit as having expired permits have all been renewed.

The audit also noted many unsanitary conditions at Head Start locations related to pest conditions. The Health Code requires that child care facilities use integrated pest management to keep their facilities free of rodents, insects and other pests, and to eliminate conditions conducive to pests. These efforts can include filling gaps, cracks and holes in walls and ceilings, storing food in pest containers, clearing away clutter and fixing leaks to eliminate sources of water. When necessary

to control pests, the child care provider is required to obtain the services of a pest management professional licensed by the New York State Department of Environmental Conservation who can provide extermination services. The child care provider is also directed to request only the use of the least toxic methods and substances to control infestations. Health Department inspections include checks for pests and conditions conducive to pests. Our staff receive extensive training not only in identifying these conditions, but also in teaching child care progress to address and prevent pest problems. Pest conditions can change rapidly over time, and at any given moment a child care center may be confronted with a pest problem. But the pest conditions described in the audit are unacceptable. As a result, the Department has created additional educational materials tailored to the child care setting to help programs control pests. These materials will be distributed to all sites throughout the city.

The Bureau emphasizes the importance of quality child care to both the sites we inspect and the families who utilize them. We recently started a

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Performance Improvement Program to provide enhanced technical assistance to programs that repeated under-under-perform as compared to citywide averages. And to increase transparency, the Department launched Child Care Connected late last month. This website and messaging service includes features, which allows parents to search for and compare child care programs across the city, review inspection histories. And sign up to receive email or text messaging updates about their child care center including when new inspection results are posted. We want to encourage parents to sign up and play an active role in holding child care centers to the highest standards. Thank you for this morning's important discussion on the health and safety of child care programs in our city and the opportunity to testify before you. I'd be happy to answer any questions you may have.

CHAIRPERSON LEVIN: Thank you very much, Commissioner. Thank you all for your testimony. I want to also welcome Council Member Donovan Richards, who is with us as well this morning. So I'm going to start with a couple of questions, and then turn it over to my colleagues. So, Commissioner Vargas, I wanted to--I wanted to point out this report and for

everyone that's here today, and everybody that's watching online, I want you to take the opportunity to get a copy of the Federal Office of Head Start Report and read it for yourselves. And, get to know it and understand not only the specific violations that it speaks to, but an overall overarching theme throughout the report. And one thing that our colleagues from the Office of Head Start pointed out that I want to make sure that we all understand is the severity of the findings themselves. Because when you hear them in context of how they're found, or the types of findings, you'll see that there were-- For example, of all of the findings--let's see there's--there were 21 total areas that were reviewed by the Office of Head Start. There were zero strength designations. SO on the--on the report you have different compliance measures. They go--the best one is the strength and that's defined as a new or a unique way of reaching the community. The second is compliant. No findings. Meets requirements of compliance measures. The third is concern, an area or areas of performance, which needs improvement or technical assistance. These items should be discussed with the Regional Office and do

not include time frames. Non-compliance, which is a finding that indicates the agency is out of compliance with federal requirements, including but not limited to the Head Start Act or one or more of the performance standards in an area or areas of performance--of program performance. But does not constitute a deficiency. Non-compliance requires a written timeline, a correct--correction and possible technical assistance or guidance from their program specialists. And if not corrected within the specified timeline can become a deficiency. And then there's deficiency and immediate deficiency. That was explained by our colleagues at the Office of Head Start. For this review there were zero findings of strength. There were six found to be compliant. Three found to be areas of concern, three as non-compliant, one as a deficiency, seven were found to be immediate deficiencies. So the most severe, and I'll read what the definition of an immediate deficiency is.

Deficiencies identified during the review that involve the threat of health and safety to children and staff, which require that the grantee take immediate correction action. The Office of Head

1 Start interprets quote "immediate corrective action  
2 as specified in the Act as those situations that must  
3 be resolved at the point of discovery or after 30  
4 days from when the notice of deficiency is given."  
5 So Commissioner Vargas, you said in your testimony  
6 that quote, "First, we must point out that while the  
7 audit reveals concerns, non pose immediate risk to  
8 any child in these Head Start programs." However,  
9 seven of the findings were identified as immediate  
10 deficiencies that were quote, "Involved the threat of  
11 health and safety to the children and staff, which  
12 require the grantee to take immediate correction  
13 action." That sounds to me like an immediate risk to  
14 children in the Head Start programs. So can you  
15 clarify your statement in your testimony?

17 DEPUTY COMMISSIONER VARGAS: Sure. So--  
18 so my statement in my testimony comes from the  
19 understanding as we looked at all of those immediate  
20 deficiencies knowing that those issues were being  
21 addressed. Many of which were being addressed during  
22 the audit. Some we were beginning to address even  
23 prior to the audit. And so here's an example. One  
24 example is the licensing. And as Mr. Cresciullo  
25 just--just noted, in New York City you can operate a



1 child care center in expired renewal status. And so,  
2 there's--there are elements that go into bringing you  
3 to that status that make sure that no one is in  
4 danger. Certainly make sure that the children are  
5 not in immediate danger. So we've been operating  
6 within that, you know, framework. So that's an  
7 example of how we feel when we look at the  
8 deficiencies, the immediate deficiencies. You know,  
9 we didn't feel when we received the report that there  
10 was imminent danger. Certainly, there were items  
11 that were very troubling. Items that we were already  
12 managing. So essentially, my statement comes from  
13 the place of knowing that we have--we were in  
14 process, you know, addressing many of those issues.

15 CHAIRPERSON LEVIN: Okay. Were--just  
16 speaking on the permitting issue because when I read  
17 this report, the issues that are of immediate  
18 deficiency that you're already--you already have  
19 corrected, which is on--on the reporting, the  
20 criminal reporting background reports and the  
21 permitting. So I just want to speak maybe to the  
22 permitting issue then first. Are there--is every  
23 Head Start center required to be permitted. You said  
24  
25

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not under city law. Under Federal Head Start Law,  
are they required to be permitted?

DEPUTY COMMISSIONER VARGAS: That's  
correct.

CHAIRPERSON LEVIN: And is ACS required  
to ensure that you delegate agencies are in  
compliance with--

DEPUTY COMMISSIONER VARGAS:  
[interposing] That's correct.

CHAIRPERSON LEVIN: --the Federal Head  
Start Law?

DEPUTY COMMISSIONER VARGAS: Yes.

CHAIRPERSON LEVIN: And so if they--if  
there are 28 licenses that have now-- Since the  
report was--was issued here in January, if there are  
28 that have been able to be licensed from January to  
today, how come they weren't licensed prior to? How  
could that--and how could ACS have allowed those  
delegate agencies to be out of compliance with  
Federal Head Start Law?

DEPUTY COMMISSIONER VARGAS: I'm going to  
actually turn it over to Frank Cresciullo to talk a  
little bit about the process of licensing.

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CHAIRPERSON LEVIN: Okay. Because what concerns me, just to be clear on this. If it's--if it's--if it's so easy that they could all be licensed, 28 of them in this expedited process since the report came out, then how come--how come there are 28 that had either no license or lapsed licenses and couldn't overcome those bureaucratic areas before hand?

ASSISTANT COMMISSIONER CRESCIULLO: Okay. [coughs] And let me just give you a little background on expired in renewal status, and previous Head Start reviews. And this is not to say that it's okay. But during previous reviews, we provided ACS a letter explaining the status of expired in renewal, which is, in fact, a permitting status. It's an operational status. And we provided that letter for the Federal reviewers, and they've accepted that status in the past. I assume at some point there was a policy change for this review. And, you know, we were cited for expired in renewal status. You should also understand that during the period that a program is expired in renewal, we're working weekly with that program. We're communicating weekly with that program, and letting them know what's outstanding.

Often, there are some very minor sort of things that are outstanding. Updated insurance documents that we need. It's not the same that they don't have insurance. We just don't have proof of insurance.

CHAIRPERSON LEVIN: [interposing] I'm sorry. I want to--I just want to interject here for a second.

ASSISTANT COMMISSIONER CRESCIULLO: Sure.

CHAIRPERSON LEVIN: Because you said that there was maybe a change in rules. I don't--I want to just read to you from--from the report, and I believe this is quoting from the Federal Head Start Law or Rules. "In cases where these licensing standards are less comprehensive or less stringent than the Head Start Regulations--" This is, I'm sorry, going back here. "The facilities used by Early Head Start and Head Start grantee and delegate agencies for regularly scheduled center based and combination programs option classroom activities or home-based group socialization activities must comply with State or local requirements concerning licensing. In cases where these license standards are less comprehensive, or less stringent than the Head Start Regulations--so those would be the Federal

Regulations--grantee and delegate agencies are required to assure that their facilities are in compliance with the Head Start Program Standards related to the health and safety as found in 45 CFR 1304.53(a) Physical Environmental Facilities."

So is there confusion as to whether or not you ought to be in compliance with those Federal Head Start?

ASSISTANT COMMISSIONER CRESCIULLO: No, we ought to be in compliance. My only point was that in the past expire in renewal wasn't accepted. Permitting status--

CHAIRPERSON LEVIN: [interposing] As an exception to the Federal Head Start Law?

ASSISTANT COMMISSIONER CRESCIULLO: We were never cited in the past for that--that permitting status. Again, it's not to say that all of these programs citywide should be in expired in renewal status. The other point I was making is that we do work hand-in-hand with these programs while they're expired in renewal. If there's anything that causes them to be expired in renewal that is an immediate health concern, we would suspend the permit.

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CHAIRPERSON LEVIN: But the fact that they  
were--

ASSISTANT COMMISSIONER CRESCIULLO: I'm  
sorry.

CHAIRPERSON LEVIN: I'm sorry, we'll--the  
fact that they were unlicensed themselves is the  
cause of this immediate--found to be an immediate  
deficiency of the Head Start grant that you receive  
or that ACS receives.

ASSISTANT COMMISSIONER CRESCIULLO: It  
was found, yeah, to be an deficiency.

CHAIRPERSON LEVIN: Okay. I'm sure that  
some of my colleagues are going to follow up on that  
line of questions. I want to before I turn it over  
to my colleagues, I want to quote directly from the  
report that we have here. And this is--this speaks  
to and it's something that I find--I want to quote  
from the report itself. And I think that this speaks  
to the overarching issue here, and it's something I  
do not feel was adequately addressed in the  
testimony. In addition to that I do want to also put  
on the record that I am disappointed that  
Commissioner Carrion is not here herself because I

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believe this is--as an important issue as this while we understand and appreciate you being Deputy Commissioner, we also believe it's important for the Commissioner. So I hope that you will relay this to her as well.

This is from page 17 of the report, and this is in the section that is regarding the immediate deficiency found in the program performance standards for operation of Head Start programs by grantee and delegate agencies having to do with health emergency procedures. Establishing a method for handling cases of suspected or known child abuse and neglect. Reporting systems. Generating periodic reports of financial status, and generating official reports through federal, state and local authorities. And this is--this is addressing these specific concerns, but this is a theme that we see running throughout this report. So I'm just going to read this paragraph to you because I want you to react to this.

"The grantee did not control quality at its delegate agencies. A number of significant issues were identified in the quality of delegate agency facilities, but there was no evidence of

reporting to improve quality or hold delegate agencies accountable for making and sustaining program improvement. Delegate agencies were not held to a standard relating to submitted--submitting accurate program reports, specifically facility reports. And the grantee had no concrete method for ensuring quality. An analysis of the findings of the current report found that 42% of the grantee's delegate agencies had areas of deficiency. However, NYC ACS had no system for ensure that delegate agencies met federal, state, and local requirements."

What that says to me is that there is no overall system in place at ACS structurally to ensure quality at the delegate agencies. How do you seek to address what to me looks like a very structural, large scale system wide deficiency?

DEPUTY COMMISSIONER VARGAS: So we've already begun to address that. It is a system deficiency. You're absolutely right. We--we are looking at our organization structure, and we have a couple of proposals that we've put together to change that structure. So that we can better provide support, technical assistance, monitoring and oversight of our programs. We met several weeks ago



1 with Adia Brown from the Federal Office of Head Start  
2 and several members of our regional office, Region 2,  
3 to discuss some of the challenges that we face in  
4 addressing quality. And we were very transparent  
5 around those challenges, and they--we had a very good  
6 collaborative conversation around what we can put in  
7 place, what might order in order to begin addressing  
8 those--those issues. We have increased the number of  
9 tracking tools that we're looking. We are looking at  
10 adding staff around analysis so that we can better  
11 understand and capture trends. We're working more  
12 closely and collaboratively with some of our sister  
13 agencies such a DOHMH. We've talked about  
14 information sharing, particularly around DOHMH's  
15 CCATS systems that racks violations. And so, as I  
16 mentioned in the testimony one of the--one of the  
17 things that has come out of this is that we will be  
18 receiving a monthly report from that system. That  
19 gives us, you know, a listing of the violations in  
20 our centers. We will be hiring an Executive Director  
21 of Head Start, someone who will be--

23 CHAIRPERSON LEVIN: [interposing] That  
24 position has not up to this been has been present.  
25 Because the report also mentions several times that

1 the Head Start Director was not able to produce this,  
2 that or the other. Who were--who were they  
3 specifically referring to there?  
4

5 DEPUTY COMMISSIONER VARGAS: So the way  
6 that--that ECE is structured, there's an Associate  
7 Commissioner who oversees Program Development. And  
8 under that Associate Commissioner, there are two  
9 Assistant Commissioner. One Assistant Commissioner  
10 left in--in October and--and her, you know, her  
11 position the person that we've hired is going through  
12 the vetting process right now. But that person left  
13 in October, and that person oversees all of the team  
14 leaders who oversee the program specialists who go  
15 out to the programs. Then, the other Assistant  
16 Commissioner oversees Program Development and  
17 Operations, and essentially oversees Quality  
18 Assurance and Training. That Assistant Commissioner  
19 was--was our lead in working with the Office of Head  
20 Start along with our former Associate Commissioner.

21 CHAIRPERSON LEVIN: When it says that  
22 the--that the Head Start Director, who is that  
23 specifically referring to?

24 DEPUTY COMMISSIONER VARGAS: That would  
25 be the Assistant Commissioner.

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CHAIRPERSON LEVIN: Who is--that's a position that's currently field or is that another one?

DEPUTY COMMISSIONER VARGAS: That's correct and so in the--in the Head Start Grant, that person's name is listed as the Head Start Director. However, that person has--has, you know, oversight over all of Early Learn as well as, you know, including Head Start.

CHAIRPERSON LEVIN: And who is that individual?

DEPUTY COMMISSIONER VARGAS: Eileen Guzman.

CHAIRPERSON LEVIN: Okay. And how long has--has she been in that position?

DEPUTY COMMISSIONER VARGAS: Nine years.

CHAIRPERSON LEVIN: Nine years. Okay.

DEPUTY COMMISSIONER VARGAS: And so, we're moving to actually create a dedicated position, an Executive Director, which would be an Assistant Commissioner level position of Head Start to provide oversight. You know, direct oversight of all of our Head Start programs to have a very dedicated and focused position around that.

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CHAIRPERSON LEVIN: Just one last question, and then I'm going to turn it over to my colleagues. There's one other part of the report here that I wanted to bring to your attention because and this had to do with the--the monitoring that DOHMH does. It says--and if you'll bear with me for a moment here--that--that there is--I'm sorry. Just bear with me for a moment.

[pause]

CHAIRPERSON LEVIN: I'll have to come back to that one when I find it, but I will start with questions from Council Member Ruben Wills.

COMMISSIONER WILLS: Thank you, Mr. Chairs. Earlier I was saying that you could have stayed in your line of questioning. We didn't mind. Good afternoon. I wanted first to express my disappointment along with the Chairs that the Commissioner is not here to answer the questions. This is what she is paid to do, and she should be here when something so important comes up. So I have a few questions. One, how long were sites without the proper licensing? When you found out that they were without the license that they needed, how long were they without these licenses? Not from the time

that you corrected it, but you found out. Prior to that, how long was the complete time that they were without proper licensing?

ASSISTANT COMMISSIONER CRESCIULLO: So I don't know specifically on each site. However, we issue a two-year permit. Four months prior to the permit expiration, all of these sites are notified that their permit is coming up for renewal. They're automatically sent or electronically sent a renewal application. And they're immediately assigned a case manager. On average once a program goes into expired into renewal status, they--it normally takes them about 60 days to receive their new permit. But again, I don't know specifically how long each one of these sites were expired.

COUNCIL MEMBER WILLS: So you're saying that four months before the actual license expires, you have a case worker assigned to it. So the caseworkers fell down on the job with this?

ASSISTANT COMMISSIONER CRESCIULLO: No, no, not all. This is not and it shouldn't read as or interpreted as backlog at Health on these cases. What I was saying is that four months prior to the expiration all of the programs always have case

managers and inspectors assigned to them. But four months prior, they're sent a renewal application. The case manager then starts reaching out to the program to let them know you're coming up for renewal. Let's get our documents in. Send me whatever you need to send us so far as your safety plan and your staffing so that we can review and renew. Some programs have difficulty making the time frame. We think four months prior notice is adequate to renew programs. But like I said, some just missed their--their renewal date.

COUNCIL MEMBER WILLIS: Some?

ASSISTANT COMMISSIONER CRESCIULLO: Yes.

COUNCIL MEMBER WILLIS: This is a considerable amount. This is not some.

ASSISTANT COMMISSIONER CRESCIULLO: Yeah, I mean overall we have about--just about 2,300 child care centers and a certain percentage do slip in to expired in renewal.

COUNCIL MEMBER WILLIS: So at any give time, you can have a percentage of day cares that are not licensed for a minimum of 60 days?

ASSISTANT COMMISSIONER CRESCIULLO: Yes, but I wouldn't categorize it as not licensed. As I

said before, expired in renewal is an operating  
permit status.

COUNCIL MEMBER WILLS: Your testimony  
says that DOHMH can direct inspections at Head Start  
sites where a variety of factors such as staff  
qualifications, clearances, supervision, child  
safety, and the environments are assessed. ECE and  
DOHMH leadership meet quarter and ECE and DOHMH staff  
meets monthly to discuss issues that are raised  
during the inspection process. If they meet monthly  
to discuss these issues and so many issues were  
brought up as deficiencies, what happened with those  
meetings? Where did we fall apart?

ASSISTANT COMMISSIONER CRESCIULLO: Well,  
typically those meetings involve procedural changes,  
a change to the Health Code. We--it's not typically--  
we don't spend our time talking about specific  
individual programs that are expired in renewal. We  
talk about problematic programs. We talk about  
programs that might have a high incidence of  
citation. But again, expired in renewal was never  
really an issue.

COUNCIL MEMBER WILLS: [interposing] See-

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ASSISTANT COMMISSIONER CRESCIULLO: Yes.

COUNCIL MEMBER WILLIS: --I'm not just talking about the expired in renewal, I'm talking about all of the deficiencies. Because there are day cares that have rolled into roaches and different things like that in the day cares. And the Deputy testified that some of the deficiencies you already addressed even before you go the Federal Report. There is an issue there. How many of these programs were you already addressing, and how long before you got the report or the audit happened where you dealing with it. Because in the timeframe that they gave you, you seemed to have fixed a lot. So how long was it that these programs were out of order, and why didn't--why weren't they fixed in that timeframe. Were they only fixed because the feds came in?

ASSISTANT COMMISSIONER CRESCIULLO: No.

Not at all. So our--again, we go out on these programs annually. There's about 27--2,300 programs. We conduct about 6,500 inspections of those child care centers every year. My staff go out and they find a deficiency. That turns into a cited violation. Depending on the severity level of the



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violation, programs are given X amount of time to fix the violation. My staff automatically go out on compliance visits to ensure that those violations were corrected. Some of these violations were sort of point in time, and if we didn't observe it while we were there, it wasn't cited. When the federal reviewers went in, they cited and observed those violations. So these were not violations that DOH knew about or was in our database as open cited violations.

COUNCIL MEMBER WILLIS: So how could you say that you were fixing them before the report was done or the auditors went in, and now you're saying--

ASSISTANT COMMISSIONER CRESCIULLO:  
[interposing] Well--

COUNCIL MEMBER WILLIS: You have to clarify that for me. I don't understand that.

ASSISTANT COMMISSIONER CRESCIULLO: Sure.

COUNCIL MEMBER WILLIS: Or would you like her to clarify it?

ASSISTANT COMMISSIONER CRESCIULLO: Well, partly ACS, but when ACS became aware of the findings of the report, they responded immediately to the deficiencies.

DEPUTY COMMISSIONER VARGAS: But also as--as we're going through and, you know, providing monitoring as we have staff go out and we find things, it's a combination of both DOHMH but also the facilities team at ACS who will go out and address issues. You know, we're constantly monitoring the physical facilities of our--of our programs. And so, we're going out and addressing those issues on an ongoing basis.

COUNCIL MEMBER WILLIS: Is it that you don't have enough inspectors? I'm trying to figure out why--where was the lapse in inspection from the point they came in, the auditors came in and the point that the city had already had this. If you're saying you were already addressing some of these issues, then when did you start addressing them? When did you find out about them? Like what is the time frame--

DEPUTY COMMISSIONER VARGAS:  
[interposing] I'll give you--

COUNCIL MEMBER WILLIS: Yeah, you give me a couple of examples?

DEPUTY COMMISSIONER VARGAS: So, I'll  
give you an example. A mouse, since we're all in New  
York City right--

COUNCIL MEMBER WILLIS: [interposing]  
They can come in at any time. Yeah, I understand.

DEPUTY COMMISSIONER VARGAS: --and we're  
familiar. Yes, a mouse--

COUNCIL MEMBER WILLIS: [interposing] It's  
a mole thing.

DEPUTY COMMISSIONER VARGAS: --doesn't  
sit on a table and, you know, all day waiting for  
somebody to show up. So it's a--that is somewhat a  
point in time situation. When a program reports that  
they have some kind of infestation, we immediately,  
whether they report it to DOHMH or they've reported  
it to a program specialist who's gone our. Or a  
program specialist has observed that there's an  
issue. That information is immediately, you know,  
sent over to DOHMH and to our Facilities team so that  
we can begin to address it.

COUNCIL MEMBER WILLIS: So when a program  
reports, that's self-reporting you're relying on?

DEPUTY COMMISSIONER VARGAS: That's  
either self-reporting or one of our program

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specialists will go out to the program and actually see something that concerns them. Sometimes a parent might reach out to us and say hey this is going on. We're concerned about it, and we immediately respond to those issues.

COUNCIL MEMBER WILLIS: Okay, there is one them that we're dealing with, which says it's related to the issues of class sizes and classroom measurements. The classroom measurements did the requisite 35 square feet per child as prescribed in the Head Start regulations. And are on schedule to meet the completion deadline of July 25th. How are you going to fix that? Because space is finite, right? So if a program only has this amount of space in a building, how are we fixing it to deal with the over-crowding.

DEPUTY COMMISSIONER VARGAS: So, you know the first thing that we ask the Office of Head Start to do is to come back out and re-measure with us, with our staff, with our Facilities staff because some of the measurements that they report we ask for more detail on that. And some of the measurements that they report are way off some of the measurements that we have. So we've asked them to come back, and

re-measure, and they've agreed to do that. Once we get those re-measurements, we asked for also an extension into July so we could minimize the disruption in the program. And our goal is, you know, through attrition we would essentially be, you know, minimizing the number of children affected by the changes in space if we have to reduce seats.

COUNCIL MEMBER WILLIS: Explain to me how that would work through attrition.

DEPUTY COMMISSIONER VARGAS: So, you know, Head Start is threes and fours--

COUNCIL MEMBER WILLIS: [interposing]  
Right.

DEPUTY COMMISSIONER VARGAS: --and so, you know, fours would be going off to kindergarten or--

COUNCIL MEMBER WILLIS: [interposing]  
Universal Pre-K?

DEPUTY COMMISSIONER VARGAS: No, kindergarten.

COUNCIL MEMBER WILLIS: Oh, kindergarten.  
Right.

DEPUTY COMMISSIONER VARGAS: And then threes would go into fours class--fours classrooms.

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1 So it's a transition time in the summer. Also during  
2 the summer months, you know, enrollment tends to  
3 decline a little bit because parents have other forms  
4 of taking care of their children. So, we--we always  
5 like to--you know, if we have to downsize a program,  
6 or change the, you know, the capacity in a program  
7 for whatever reasons, we typically like to do it in  
8 the summer months when it's least disruptive to, you  
9 know to the population that's being served.  
10

11 COUNCIL MEMBER WILLIS: So that's how you  
12 would fix it is by the extension, and then hopefully  
13 in the summertime when you re-measure it, you'll be  
14 able to have the children move up.

15 DEPUTY COMMISSIONER VARGAS: That's  
16 correct.

17 COUNCIL MEMBER WILLIS: Because a lot--  
18 some of the Head Start programs also take Universal  
19 Pre-K.

20 DEPUTY COMMISSIONER VARGAS: That's  
21 correct.

22 COUNCIL MEMBER WILLIS: So the space is  
23 already there for that also. So it's not like the  
24 program can produce more space, physical space.  
25

DEPUTY COMMISSIONER VARGAS: That's correct.

COUNCIL MEMBER WILLS: So you're counting on just the children moving into kindergarten?

DEPUTY COMMISSIONER VARGAS: Well, you know, in each situation, we'll take it case-by-case, and each situation if there isn't capacity and there's, you know, a very--a very large number of threes, usually in--in our programs the threes--the three size classrooms somewhat mirror the four size classrooms. So you don't have, you know, 12 three classrooms and then four, four classrooms. Because the idea is that you would move your children up, right. So, you know, essentially what we would do--and then some kids leave, right. Some kids move. Some kids, you know, decide or maybe mom decides they're going to go to Universal Pre-K at the local school because they have a sibling there. So, they're--

COUNCIL MEMBER WILLS: [interposing] I don't think we can really count on that because Universal Pre-K--

DEPUTY COMMISSIONER VARGAS: [interposing] Well, but that's--that's--I understand--

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COUNCIL MEMBER WILLIS: [interposing]  
Right.

DEPUTY COMMISSIONER VARGAS: --but that's  
some of the--some of the assumptions based on the  
data that we have that, you know, that go into  
pushing this change to July. And then in cases where  
we-- You know, a particular program can't fit the  
number of children, we will work to identify the, you  
know, the nearest vacancy for--for the children who  
maybe can't fit in the classrooms that are  
identified.

COUNCIL MEMBER WILLIS: How much money  
does the Department currently have budgeted to  
enhance its oversight?

[background comments, pause]

COUNCIL MEMBER WILLIS: [off mic] That's  
not valid, right? [sic]

DEPUTY COMMISSIONER VARGAS: I don't have  
that number for you right now, but I can get back to  
you with it.

COUNCIL MEMBER WILLIS: All right, thank  
you, Mr. Chair.

CHAIRPERSON LEVIN: Thank you very much,  
Council Member Willis. A quick follow up on Council



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Member Wills' question about the space issue. New York City Health Code actually is more restrictive than the federal code.

ASSISTANT COMMISSIONER CRESCIULLO: Less restrictive.

CHAIRPERSON LEVIN: Less restrictive in terms of allowing for 30 feet per child as opposed to 35.

DEPUTY COMMISSIONER VARGAS: Square feet, yes.

CHAIRPERSON LEVIN: Square feet. Is that--are you going to be complying with the--the Federal Code or the--or the State--the City Code?

DEPUTY COMMISSIONER VARGAS: No, we have to comply with the Federal Code.

[pause]

CHAIRPERSON LEVIN: Are they all in compliance with the Health Code currently?

ASSISTANT COMMISSIONER CRESCIULLO: They are, yes.

CHAIRPERSON LEVIN: Oh, they are. Okay, so every--so where they're--where they're--excuse me. Where they're not in compliance with the Federal

Code, they're above 30 square feet per child though currently, all of them?

DEPUTY COMMISSIONER VARGAS: Yes, they have to be--Sorry, Frank. [laughs]

ASSISTANT COMMISSIONER CRESCIULLO:  
That's okay.

DEPUTY COMMISSIONER VARGAS: They have to be in compliance in order to get licensed.

CHAIRPERSON LEVIN: Okay, even if they don't--even if they didn't currently have a license before?

DEPUTY COMMISSIONER VARGAS: They're in expired but renewal, yes. Some of the basics that are in place for expired and renewal includes square footage.

CHAIRPERSON LEVIN: Okay. So, in--the question I was looking for before going to the last page of the report said the grantees inadequate monitoring of its delegates was also reflected in the conditions of the delegates' facilities and equipment. During the review, 1,031 settings were observed, and of those, 189 were found to be unsafe. The majority of the issues--and this is the sentence I want to ask you about--the majority of the issues

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identified were never found during the grantee's four times per year monitoring visits. How is that the Office of Head Start found all of these violations, and they say in their report that those issues identified were never found during the grantee's four times a year monitoring visits. How is that possible.

DEPUTY COMMISSIONER VARGAS: [off mic] Do you want to talk about the visits?

ASSISTANT COMMISSIONER CRESCIULLO: [off mic] Oh, sure. [coughs] [on mic] So, again if we just put expired on the side for a second, the point I was making before is, you know, we're not at these programs 24/7, of course.

CHAIRPERSON LEVIN: [interposing] You're there four times a years.

ASSISTANT COMMISSIONER CRESCIULLO: We're not the grantee. So ACS is the grantee. We're the regulators. We do a high number of inspections every year. Like I said, about 6,500 to 7,000 for the 2,300 sites, but we're not there 24/7. A lot of the things that were cited were that could occur right after we walk outside the door. They're in compliance while we're there. They get a clean bill

of health. We leave. Somebody comes in two months later and they find an issue.

CHAIRPERSON LEVIN: And--and I--well, as Council Member Wills said things like mold don't grow over night.

ASSISTANT COMMISSIONER CRESCIULLO: No, no, but, but--

CHAIRPERSON LEVIN: [interposing] There are--there are--there--189 of the facilities were found to be unsafe or the settings were found to be unsafe. That's not--that's not a small number. That's 20% of the overall program.

ASSISTANT COMMISSIONER CRESCIULLO: I'm not minimizing any of this. Like I said, yes, of course a mold condition is a mold condition. That's something that might be observed over the course of the months. But a lot of the things that were cited could have happened after we left. We didn't observe it, so you have that--

CHAIRPERSON LEVIN: [interposing] So, you--you're--you're there how often?

ASSISTANT COMMISSIONER CRESCIULLO: So we do annual inspections and our annual inspection consists of at least two visits. It's a public

health and sanitary visit, which looks at the physical space as far as the four walls, the windows, things like mold and wires. And we have an Early Childhood educator who goes out, and they concern themselves with curriculum, qualifications, and clearances.

CHAIRPERSON LEVIN: Okay, but we're just talking about facilities here so--

ASSISTANT COMMISSIONER CRESCIULLO:  
[interposing] Right.

CHAIRPERSON LEVIN: So then and ACS is out there, when they say four times per year monitoring visits, that's ACS as the grantee?

DEPUTY COMMISSIONER VARGAS: That's correct.

CHAIRPERSON LEVIN: And there's--and that and ACS is looking at physical conditions then as well?

DEPUTY COMMISSIONER VARGAS: So let me-- so this goes back to the reorganization and--and, you know, how we're looking at the program specialists who go out to these sites. So the way that that's currently structured is there's a team leader. And that team leader has three program specialists. One

1 is focused on education. One is focused on family  
2 engagement, and one is focused on health. There's a  
3 gap there because, you know, what happens is no one  
4 is coming in to look at whether or not there's, you  
5 know on that team--

6  
7 CHAIRPERSON LEVIN: [interposing] The  
8 health--the health--the one that's looking at health  
9 is not doing that?

10 DEPUTY COMMISSIONER VARGAS: Well,  
11 they're looking at things like mental health.  
12 They're looking at things like--

13 CHAIRPERSON LEVIN: [interposing] Well,  
14 we'll get to mental health.

15 DEPUTY COMMISSIONER VARGAS: --physical  
16 health.

17 CHAIRPERSON LEVIN: We'll get to mental  
18 health later.

19 DEPUTY COMMISSIONER VARGAS: Yes.

20 CHAIRPERSON LEVIN: Okay.

21 DEPUTY COMMISSIONER VARGAS: Yes. But,  
22 you know, one of the--one of the--one of the issues  
23 that we found is that, you know, while you have this  
24 team approach, and I think in concept it sounds like  
25

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a great idea. I think in practice, the teams go out  
a little less often than we expect them to go out.

CHAIRPERSON LEVIN: They're not out four  
times a year?

DEPUTY COMMISSIONER VARGAS: They're out--  
they're--they're out four times a year, and for  
programs that are in, you know, that require  
heightened monitoring, they're out there more often.  
I personally--

CHAIRPERSON LEVIN: [interposing] A  
minimum of four times a year.

DEPUTY COMMISSIONER VARGAS: Minimum four  
times a year. I personally don't think that's  
enough. So, you know, so--

CHAIRPERSON LEVIN: [interposing] Be that  
as it may, this is--this is--we're just speaking to  
my question. There--of the 189 settings found to be  
unsafe, they--they say were never found during the  
grantee's four times per year. Never. Never.

DEPUTY COMMISSIONER VARGAS:  
[interposing] Well, I--

CHAIRPERSON LEVIN: Zero.

DEPUTY COMMISSIONER VARGAS: I  
respectfully disagree with that statement. The

1 reality is there were issues that we were addressing  
2 both prior to the review, during the review time.  
3 We--we went out and did a very extensive facility  
4 review. And, you know, had identified issues and  
5 were addressing those issues.  
6

7 CHAIRPERSON LEVIN: Okay, I'm going to  
8 turn it over to my colleagues again, but in terms of  
9 specifics, I mean what the report is saying, the  
10 grantees' ongoing monitoring procedures for its  
11 delegate agencies did not ensure program goals,  
12 objectives and standards were met. It has to do with  
13 the overall structure, and so far respectfully have  
14 not seen anything very specific to say here's our new  
15 system. This is how--this is our brand new system  
16 for how we are going to do ongoing monitoring,  
17 ongoing prevention. What I'm looking for and what  
18 this committee is looking for is a systematic  
19 approach to this. Not just tying in on the strength  
20 that we're hiring a director. But how are we  
21 developing systems and what specifically are those  
22 systems, and how are we paying for those systems?  
23 And where are the best practices? What other cities  
24 are doing it well. How--because New York is the  
25 largest grantee, I would imagine, in the entire



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country. So we--so we're--we have the--the largest hurdle, but there have to be other cities that are doing this better throughout the country. They really do. I want to acknowledge my colleagues Robert Cornegy, Inez Barron, and Fernando Cabrera as well, and I'm going to turn it over to Council Member Donovan Richards.

COUNCIL MEMBER RICHARDS: Thank you.

CHAIRPERSON LEVIN: If you want to respond, you can respond.

ASSISTANT COMMISSIONER CRESCIULLO: Can I?

CHAIRPERSON LEVIN: Yes.

ASSISTANT COMMISSIONER CRESCIULLO: Just very quickly. There are three--three things that are happening now that speak directly to your comments. Number one, Health will be providing ACS with real time data on cited violations, and the observations that we've made in the field or in our inspections. We're providing that. It's developed. We'll start providing it to them monthly. Two, we'll be providing ACS with a coming--

CHAIRPERSON LEVIN: Monthly or real time?

[laughter]

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ASSISTANT COMMISSIONER CRESCIULLO: I'm  
sorry.

CHAIRPERSON LEVIN: Monthly or real time.  
Real time to me does not mean monthly.

ASSISTANT COMMISSIONER CRESCIULLO:  
Initially, I do have that. Initially, it's going to  
be monthly, but we are giving them access to that  
direct report and that will update, you know, every  
24 hours. So we'll be in real time. Just these  
things take, you know, time to develop. Two, we'll  
be providing them with a coming due report that will  
give them a six-month look in advance of all of the--  
all of their contracted sites, not just the Head  
Start sites that are coming due for renewal. So they  
can also start working with the programs to come into  
compliance and get renewed on time. We think that  
will go a long way towards addressing expired and  
renewal status. We're also going to be emphasizing  
the programs that this is their responsibility to get  
the documents to us so that we can renew them on  
time. We're tightening up our relationship with the  
Fire Department so we can make sure that their  
inspections are also happening in a timely manner.  
In addition, we have a new initiative at Health

1 called the Program Improvement Initiative. What this  
2 new system does, and we've staffed up for it, is it  
3 identifies in four different categories performance  
4 levels for all programs across the entire city. It  
5 places them into performance--into four different  
6 performance levels. Very good performers versus very  
7 not so good performers at the top. And what we're  
8 doing is we're taking resources and we're providing  
9 them with technical assistance at the top level of  
10 the under-performers in the city. And we're  
11 providing them with extensive TA on site to help them  
12 improve their performance. We'll be identifying any  
13 ACS sites that are in those--that top category, and  
14 working with ACS to help them to improve also. So  
15 there are things happening by way of plans and  
16 improving the system that will cause us to  
17 collaborate or share information in real time  
18 eventually. And I think improve the quality of all  
19 these programs going forward.  
20

21 CHAIRPERSON LEVIN: Okay, There are other  
22 issues, though, that speaks to it in terms of mental  
23 health, in terms of reports of child abuse and  
24 neglect and for health and safety. So it's not just  
25 on the specific issue of for instance permitting.

1 That's an area that the Office of Head Start just  
2 said in their testimony you're already in compliance.  
3 So while that's, I mean that's to me honestly that  
4 looks like the low hanging fruit. There are still  
5 the five areas of immediate deficiencies that have to  
6 be addressed. Those are the more challenging areas  
7 in my opinion. Council Member Donovan Richards.

9 COUNCIL MEMBER RICHARDS: Thank you, Mr.  
10 Chairman and I want to thank you for your leadership.  
11 And I also want to echo what you said and certainly  
12 what Council Member Wills said that I am disappointed  
13 that the Commissioner is not here in particular for  
14 this hearing. I wanted to start off, and I guess  
15 I'll start off with the Department of Health. So how  
16 many inspectors do you guys have on staff currently  
17 to go out to the other sites?

18 ASSISTANT COMMISSIONER CRESCIULLO: So,  
19 we--we have a little over 200 staff, 100 of which are  
20 assigned to field operations and the inspections.  
21 Now, that includes also the state regulated  
22 facilities, as well as the after school programs and  
23 the camps.

24 COUNCIL MEMBER RICHARDS: So how many are  
25 designated just for Head Starts and day cares?

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ASSISTANT COMMISSIONER CRESCIULLO: Well,  
it's child care centers.

COUNCIL MEMBER RICHARDS: Child care  
centers.

ASSISTANT COMMISSIONER CRESCIULLO: We  
don't really look at funding stream. We treat them  
all equally, and we apply the health code. So we  
have approximately 35 staff that conduct field  
inspections over the course of a year.

COUNCIL MEMBER RICHARDS: So 35 staff?

ASSISTANT COMMISSIONER CRESCIULLO:  
Approximately.

COUNCIL MEMBER RICHARDS: Approximately,  
that go out to child care centers to inspect out of  
how many centers?

ASSISTANT COMMISSIONER CRESCIULLO:  
There's 20--a little south of 20 centers.

COUNCIL MEMBER RICHARDS: So would you  
say--do you believe that that's enough staffing 35  
staff members, inspectors for 2,300 centers.

ASSISTANT COMMISSIONER CRESCIULLO:  
Right, as I said previously we conduct about 6,500  
inspections a year with those staff. Of course, if

there's a need to inspect more we would need more  
resources.

COUNCIL MEMBER RICHARDS: So I think and  
I'm going to bring up two examples on why I think  
that there's a need for in particular more staffing.  
Now one of these in particular centers that was in I  
guess in the Head--the Head Start, the Federal Report  
is Rockaway Head Start in the Rockaways. And they  
called frantically to my office around a month ago or  
probably a few weeks ago to speak of their sense of  
being threatened--threatened with being shut down in  
particular because their playground had some sort of  
violations or were inadequate. And, you know, it--we  
didn't know where to begin. Now, I will--I will go  
to ACS for a second on this. So before I was  
elected, I worked for the previous council member.  
And we had put some money into a cap--some capital  
money, in particular into these particular  
playgrounds to be fixed. And I'm talking about  
around two or three years. Two or three fiscal years  
ago. So I'm really taken aback when you speak of in  
particular the weather was halting these projects  
from moving forward. So I want to know who's  
tracking on Council dollars when it comes to capital

projects. And, you know, can we expect better reporting to us. And I guess that's a question for the Deputy Commissioner.

DEPUTY COMMISSIONER VARGAS: That program actually is not an ACS program.

COUNCIL MEMBER RICHARDS: So Rockaway Head Start is not a ACS program?

DEPUTY COMMISSIONER VARGAS: That's correct. They have a direct--a direct grant with the Federal Office of Head Start.

COUNCIL MEMBER RICHARDS: Okay and DOH-- so DOH--

DEPUTY COMMISSIONER VARGAS: I'm sorry.

[background comment]

DEPUTY COMMISSIONER VARGAS: Oh, I'm sorry, they have discretionary dollars from the Council.

COUNCIL MEMBER RICHARDS: Okay, okay. So they're not in this particular--so DOH coming in to tell them a few weeks ago that they should be shut down. Who do they report to on this issues. Who is supposed to fix this issue?

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ASSISTANT COMMISSIONER CRESCIULLO: So  
let me just say, we don't threaten programs. We  
don't--we don't threaten programs. We don't--

COUNCIL MEMBER RICHARDS: [interposing]  
That's the way they called the office.

ASSISTANT COMMISSIONER CRESCIULLO: There  
may have been a discussion about observations that we  
were making that we felt were unsafe and--and we  
requested immediate correction.

COUNCIL MEMBER RICHARDS: So who would  
fix those issues? It would be NYCHA or would it or--  
?

ASSISTANT COMMISSIONER CRESCIULLO: Is  
it--are they in a NYCHA building?

COUNCIL MEMBER RICHARDS: Yes, they are.

ASSISTANT COMMISSIONER CRESCIULLO:  
Right. So when we site, we hold programs accountable  
for the correction. But we do work with NYCHA if we  
know it's one of their facilities. So they would  
work with us, and we would contact NYCHA and see if  
we could get the repairs made.

COUNCIL MEMBER RICHARDS: So the other  
question I guess I would have for ACS in terms since  
we put the capital dollars to you, are you saying we



1 should remove those capital dollars to fix that issue  
2 and put it into NYCHA? And that--and I'm getting  
3 into this because it's like pulling teeth trying to  
4 get answer from you guys. We've been calling on in  
5 particular the capital dollars that were allocated  
6 for at least two months. And we have not been able  
7 to get and answer--a clear answer from you guys on  
8 this issue. And then secondly, I want to go into one  
9 more sentiment. I'm not--I don't--it doesn't--I know  
10 it doesn't fall onto the Head Start program, but in  
11 particular Red Fern has a daycare in particular where  
12 water had been leaking. And we've been, you know, in  
13 touch with NYCHA for--for many--at least for a month  
14 or two and we cannot get a clear answer, you know, on  
15 who's responsibility in particular these locations  
16 are under. And it's very unfair. The Director is  
17 dealing with mold. Our children are, you know, in  
18 the--in the classrooms, but in the interest--in the  
19 entrance of the building and in particular because of  
20 Hurricane Sandy we're still dealing with obviously  
21 the effects of that. And I know you guys worked with  
22 United Way to do some great things for centers in the  
23 Rockaways, but I wanted to get-- You don't have to  
24 give me an answer now, but I need to know, you know,

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or have a point of contact who will be consistent  
with my office in particular on these issues.

DEPUTY COMMISSIONER VARGAS: You can  
contact me directly--

COUNCIL MEMBER RICHARDS: [interposing]  
Okay.

DEPUTY COMMISSIONER VARGAS: --and I'd be  
happy to talk with you about it after the hearing.

COUNCIL MEMBER RICHARDS: Okay. And I--  
I just want to say that I do still find it very hard  
to believe that you guys are really doing adequate  
monitoring of DOH and that you're getting out to four  
sites a year because I believe, you know based on the  
call we got a few weeks ago something with this  
report came out. And all of a sudden, you know,  
obviously things were discovered. And like I said, I  
know for a fact that that in particular even though  
it's not a Head Start site, so I'm going to reprove  
you guys. But, or at I should say at the moment, but  
I--but I am going to say that, you know, we put in  
capital dollars at least three years ago because we  
saw the issue and ourselves, and it wasn't brought to  
our attention based on, you know, DOH.

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ASSISTANT COMMISSIONER CRESCIULLO: We're  
happy to follow up on this. Do you know the address?

COUNCIL MEMBER RICHARDS: 7115, 7115  
Beach Channel Drive.

ASSISTANT COMMISSIONER CRESCIULLO: Yes.  
Okay.

COUNCIL MEMBER RICHARDS: Thank you.

COUNCIL MEMBER MENCHACA: Thank you. I  
also want to thank the Chair, and wanted to say a  
couple things and just add my disappointment that the  
Commissioner is here--not here as well. We're  
looking forward to having those direct conversations.  
There are a lot of district issues that we can focus  
on. But the other--the other kind of piece is  
relating to those teams that go out on a yearly basis  
four times a year. And one of the things that maybe  
I can focus on is the family engagement component,  
and how did you--how did you label that team? Is it  
community engagement or family engagement.

DEPUTY COMMISSIONER VARGAS: So each team  
has a team leader, three program specialists. One  
focuses on health, one on education, and the other  
one on family engagement.

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COUNCIL MEMBER MENCHACA: On family engagement. Got it. So let's talk about the family engagement component. How are you engaging families that don't speak English, and specifically trying to figure out, and as Chair of the Immigration Committee really trying to figure out how that engagement happens. And if you can give us some kind of data or even if it's--even if it's just a kind of glance at how those parents are engaging you. And were they working with you to kind of identify some of the for example pest control issues or some of the other category of issues that are--are--are at the tasks of those teams.

DEPUTY COMMISSIONER VARGAS: So we engage families in a number of ways. We have a parent council that meets pretty regularly, and we can share more of that information with you. I unfortunately don't have it here. But we can certainly share the minutes of those meetings. We do a lot of training with parents. We're very sensitive to the needs of families that do not speak English, and we rely heavily on our programs to come and tell us hey, you know, can we translate this document? I have this

type of population here. We respond, you know,  
pretty quickly to those needs.

COUNCIL MEMBER MENCHACA: On that, and I  
know that we were talking about Federal Guidelines  
versus Local Laws. We have a very strong local law  
here that kind of requires the translation and  
essentially access for parents. Can you talk to us a  
little bit about how you reconcile both the Federal  
Guidelines for Head Start, Local Laws for head--for  
head--for head--for the City and making sure that  
you-- Because it sounds like you're-you're reacting  
to sort of the local program issues, but wondering if  
you have kind of citywide policy for access for non-  
English speaking parents?

DEPUTY COMMISSIONER VARGAS:  
Unfortunately, I don't have the citywide policy with  
me, and I don't have the data within ECE with me.  
But I'd be more than happy to get in touch with your  
office afterwards and discuss that.

COUNCIL MEMBER MENCHACA: Is this  
something you see as a--as another deficiency for the  
program to help think about how health--how your  
monetary health and safety in these centers. Is this  
something that you see as a--as a deficiency as well?

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DEPUTY COMMISSIONER VARGAS: You know, as  
a--as a native Spanish speaker, I'm sensitive to  
these issues.

COUNCIL MEMBER MENCHACA: Uh-huh.

DEPUTY COMMISSIONER VARGAS: The programs  
that I've gone out to visit many of the programs that  
are in communities with different populations, and  
different language needs when there's a pretty large  
number of families. So for example, you know, if we  
have a program in Washington Heights and a large  
Latino population many of the staff in those centers  
are bilingual. And so, the communication is  
facilitated that way. I think it certainly becomes  
a little bit more challenging for us, and this is  
where we rely on the programs to, you know, to help  
us when, you know, there's maybe one Mandarin speaker  
in that program. And, you know, it requires a level  
of translation. And so, that's where we would  
respond, you know, fairly--fairly quickly. I don't  
see it, though, as a barrier per se to health and  
safety. It's something that we're definitely aware  
of. And as I said before, I'd be more than happy to  
share with you more specifics when I have that in  
front of me.

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COUNCIL MEMBER MENCHACA: Great and we'll definitely be following up. I think there's a larger conversation about the capacities for communities to engage our agencies through topics like health and safety and other--other big pieces. And so we're-- we're really looking at the deficiencies around communities being--communities being able to communicate on these topics. And as someone who--who went through Head Start, this is where I learned how to speak English for example. My parents or my mom was a non-English speaker as well, a third grade education. This is really felt not only in my district where I'm kind of looking at the Head Start programs. This is the Brooklyn Chinese-American Association. This is--this is the life for--for the community programs in my district. And so, I'm really hoping that we can kind of address that issue. And I know this is just one report out of several that are coming, and so I'm hoping we can come back to that question and really think about it not just as its own question But how it relates to every piece that we're trying to address on the deficiencies that we just spoke about today.

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DEPUTY COMMISSIONER VARGAS: We would  
certainly welcome that conversation.

COUNCIL MEMBER MENCHACA: Great. Thank  
you so much.

CHAIRPERSON LEVIN: Thank you, Council  
Member Menchaca. Council Member Annabel Palma.

COUNCIL MEMBER PALMA: Thank you, Mr.  
Chair. Thank you both for your testimony. I, you  
know, my colleagues have expressed the disappointment  
that they feel in the Commissioner not being here. I  
think I am more disturbed with the findings that we--  
this report highlights, and what we're dealing with.  
And having gone--I haven't thoroughly looked through--  
through the report or the overviews of the findings.  
But, you know, in just scanning through them, I am  
almost certain that these--most of these centers are  
based in low-income, you know, minority communities.  
The ones that most of us represent throughout the  
city. So it's really disturbing to me that, you  
know, in 2015 we have to be discussing centers that  
are filled with mold and asbestos and the city not  
doing that they properly needed to do to monitor  
these issues. I am looking forward to making sure  
that, you know, this City Council can be extremely



1 helpful in developing policies moving forward with  
2 this Administrations. That would make--that would  
3 ensure that the centers that our children are  
4 attending are, you know, in the best shape, are of  
5 quality and free of any hazardous, you know, issues  
6 for them. As a parent, I think God that my son is  
7 25, but I would be disturbed if I had a little one  
8 that I needed to send into day care this time and age  
9 knowing that, you know, these issues exist.

11 I want to--and I keep turning off this  
12 mic. I want to ask in terms of the rodent  
13 infestation, is there an ongoing program in place  
14 that monitors rodent infestation, pest infestation to  
15 enable less--less of these incidents to happen? I  
16 know in my office a long, long time ago we found--we  
17 found a mouse. We have an ongoing exterminator come  
18 into the office to, you know, try to remedy these  
19 issues. Is there something in place for the centers  
20 to be able to do the same, to--I mean we're not--not  
21 ever going to eradicate, right, the rodent or pest  
22 infestation in New York City. But we definitely need  
23 to know that there are measures in place to be able  
24 to monitor them more adequately.

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ASSISTANT COMMISSIONER CRESCIULLO:

[coughs] All right, so as I said previously, there are a number of regulations in the Health Code that speak to pest control. In addition, the Department is putting out new guidelines specific to child care centers on how to control pest. And also want to become aware of it when the programs need help controlling pests. We do have a Bureau of Pest Control. We normally list them when the--the pest condition is outside of the facility and coming into the facility. That's where their resources are better, you know, spent. So, you know, again as we become aware of it, we do have resources to provide, and we will be providing additional guidelines so--

COUNCIL MEMBER PALMA: [interposing] With these new guidelines are--they're going to be internal trainings for the staff at the centers to be able for themselves internally to put a program in place to ensure that at least within their space they're able to control or minimize the infestation.

ASSISTANT COMMISSIONER CRESCIULLO:

Right. So as I said, out staff are very experienced in sort of pest control preventative measures identifying issues that might be causing pest

1 infestations. We normally do the technical  
2 assistance on site when we find a condition. We  
3 haven't gone at least at the very child care training  
4 on all of this. But it's something we could  
5 consider.  
6

7 COUNCIL MEMBER PALMA: I appreciate that  
8 the staff is well trained. I think that, you know,  
9 implementing proactive measures will definitely be a  
10 help in mitigating the issues that we--we have found  
11 before. I also--I'm sorry. I'm going to call you  
12 Frank--

13 ASSISTANT COMMISSIONER CRESCIULLO:  
14 [interposing] That's fine.

15 COUNCIL MEMBER PALMA: --because I don't  
16 want to butcher your last name. So Deputy  
17 Commissioner Frank [laughter] you mentioned--  
18 [laughs] I just don't want to butcher your name.

19 ASSISTANT COMMISSIONER CRESCIULLO: You  
20 gave me a promotion. Thank you.

21 COUNCIL MEMBER PALMA: [laughter] So  
22 you--you mentioned that if the old--if your  
23 department, the Department of Health cites for  
24 violations, the centers are responsible for any costs  
25 incurred to remedy a corrective action?

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ASSISTANT COMMISSIONER CRESCIULLO: Well,  
generally yes unless, of course, there's a contract  
in place with maybe, you know, public funding and  
then I would assume that there are some dollars  
available for corrective action.

DEPUTY COMMISSIONER VARGAS: Yeah,  
there's--it really depends on whether or not the  
program has site control. If the program has site  
control, then they would be primarily responsible for  
those fixes. In programs that are city leased  
facilities, ACS takes the responsibilities. Our  
Facilities team takes the responsibility to make the  
fixes. In NYCHA facilities, NYCHA, you know, takes  
the responsibility to make the fixes. So it really  
depends on who kind of owns the space.

COUNCIL MEMBER PALMA: In the case with  
this--with this report, how many of them have--are  
site control centers versus ACS contracted centers or  
NYCHA centers?

DEPUTY COMMISSIONER VARGAS: We estimate--  
my team here estimates about 20% are--are ACS  
controlled.

COUNCIL MEMBER PALMA: And I'm asking  
because I, you know, in the feedback and the

1 responses that we're getting from both of you, it was  
2 mentioned that if the violation is given or  
3 identified by DOH, then the centers are responsible.  
4 But in this case, it was mentioned throughout the  
5 testimonies that these centers when your inspectors  
6 went out, they didn't identify any violations. So  
7 who is going to be responsible for the cost incurred  
8 to make sure these corrective actions are remedied?  
9

10 DEPUTY COMMISSIONER VARGAS: Well, again,  
11 you know, ACS has already invested a fair amount of  
12 dollars in spaces that are both city leased  
13 facilities and site controlled just to make sure.  
14 Because in some cases some of our providers can't get  
15 the landlords to--to step up and do the work that  
16 needs to be done. In some cases, the time that it  
17 takes for some of the landlords to respond is an  
18 unusually long period of time. And so, in order to,  
19 you know, address the immediate health and safety  
20 concerns, our Facilities team goes in and makes those  
21 fixes.

22 COUNCIL MEMBER PALMA: And so the--the  
23 centers and the providers are not going to be  
24 responsible for paying back any cost of these  
25 corrective actions?

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DEPUTY COMMISSIONER VARGAS: No, at this point the, you know, the investments that we've made have been investments that we've made in the--in the quality of the programs.

COUNCIL MEMBER PALMA: Okay. Thank you, Mr. Chair. thank you.

CHAIRPERSON LEVIN: Council Member Fernando Cabrera.

COUNCIL MEMBER CABRERA: Thank you so much, Mr. Chairman. Let me just start off with a question that was just asked. Does--does the landlord eventually gets charged. You know, just like when HPD comes in and does emergency repairs, eventually it's passed onto the landlord. Does the landlord end up paying because otherwise most of the landlords would say, oh, you're going to end up doing it anyway. Therefore, it's a form of enabling. Do you know what happens?

DEPUTY COMMISSIONER VARGAS: I--I think it depends on the situation. I'm not entirely clear on what that process is, but I can look into and get back to you.

COUNCIL MEMBER CABRERA: Let me encourage you to make sure that the landlords pay for it

1 because otherwise they're going to say that the  
2 system that essentially once the landlords do talk to  
3 each other, they're going to say, you know,  
4 eventually ACS-- We'll dry our feet. ACS is going to  
5 end up doing it.  
6

7 DEPUTY COMMISSIONER VARGAS: I know the  
8 Commissioner has been very committed to making sure  
9 that whatever investments are made are deducted from  
10 the lease expenditures in the cit leased facilities.

11 COUNCIL MEMBER CABRERA: Okay. That's  
12 very good. In terms of--I wanted to ask you do you  
13 have like a software system that you use to track  
14 corrective action plans?

15 DEPUTY COMMISSIONER VARGAS: We have  
16 several software systems, and this is part of the fix  
17 that we are working on internally. We do not have at  
18 ACS one main system where all information on  
19 programs, children we serve is collected.

20 COUNCIL MEMBER CABRERA: Why? Would--  
21 would it be more-- That's a good question. Would it  
22 be more youthful to have once centralized integrated  
23 comprehensive systemized--

24 DEPUTY COMMISSIONER VARGAS:  
25 [interposing] Absolutely.

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COUNCIL MEMBER CABRERA: --system. Okay.

DEPUTY COMMISSIONER VARGAS: And as somebody who has a background in data and research, it's one of the first things that I moved to scope out, and begin to push through the procurement process. Because we need one system where we can begin to manage all of this information flow. That is one of the challenges that we face is a lack of the technical system where my program staff can go into one place, gather the information that they need. Where I can if I'm looking at a particular program go into one place. Right now, that doesn't exist, and so we're working on putting that in place.

COUNCIL MEMBER CABRERA: And when do you anticipate that you will have this all-inclusive--

DEPUTY COMMISSIONER VARGAS:  
[interposing] System?

COUNCIL MEMBER CABRERA: --system?

DEPUTY COMMISSIONER VARGAS: So we are in the early stages of the procurement process.

COUNCIL MEMBER CABRERA: Okay.

DEPUTY COMMISSIONER VARGAS: I'm about four months into my tenure here, and my understanding is that it can--it can be a prolonged--the



procurement process can take a fair amount of time.

Although I will say that the Commissioner recognizes the--the need and the immediacy of this issue. And so, we've been working very closely to make sure that we can move as quickly as possible.

COUNCIL MEMBER CABRERA: Well, let me commend you for starting. I know we're coming hard on you guys today, but whenever you do something well, you should--it should be noted. And I'm glad that the initiative was taken. I'm looking forward to hear how this is going to work. But in terms of what you do have right now, the-- So if--if you have an inspector or whoever goes and evaluates these programs--evaluators. And they don't do their job, is there like within your software program, and they don't put their case notes. I'm not entirely sure how they--what's the process in place. Is there like an alarm system that turns on to let the supervisors know that there's a lack of follow up?

DEPUTY COMMISSIONER VARGAS: Currently, there is not.

COUNCIL MEMBER CABRERA: Okay.

DEPUTY COMMISSIONER VARGAS: That's, you know, part of the specs of the new system would be,

1           you know, to put some checks and balances into our  
2           tracking system so that-- And also, you know, to  
3           really kind of improve our quality assurance  
4           approach. So that we are taking random samples of  
5           different cases, and taking a look and seeing where  
6           things are missing if information is being entered  
7           correctly. And looking at trends over time, and  
8           identifying where do our staff need more training to  
9           be able to do their job more effectively. And where  
10          do the programs need more training to be able to  
11          provide the service, you know, of the level of  
12          quality that we expect.

14                   COUNCIL MEMBER CABRERA: I'll tell you  
15          that I think it's a breath of fresh air for some of  
16          us who here dealing with the previous administration.  
17          All we had were smoke screens, and excuses. You're  
18          acknowledging this is what we need to do. This is  
19          what we're going to do. These are the areas of  
20          deficiency. So I really appreciate that. Just a  
21          couple of quick--two more quick questions. And that  
22          is in terms of your visits, are there--do you have a  
23          standardized way of-of doing the inspections? How  
24          does this work?

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2

ASSISTANT COMMISSIONER CRESCIULLO: Sure.

3

So we have--we have a central database called CCATS,

4

it's the Child Care Activity Tracking System. And we

5

also have a handheld inspection system that

6

complements CCATS.

7

COUNCIL MEMBER CABRERA: Very good.

8

ASSISTANT COMMISSIONER CRESCIULLO: And

9

so our staff in the field are driven through the

10

inspection by the software in the handheld, and there

11

are certain check points where they have to make

12

certain decisions. And have to confirm that certain

13

areas of the program were reviewed, and looked at

14

before they can go further and close out the

15

inspection. But it's a completely automated system

16

whereby staff can sink into our CCATS system field.

17

So we're getting a lot of real time data. And then

18

the entire system then informs the website. So

19

parents can go on and see, you know, performance

20

levels of certain programs. Yes, we do.

21

COUNCIL MEMBER CABRERA: Yeah, the reason

22

I was scratching my head was because you did mention-

23

-and I recognize that there could be times that you

24

come and do an inspection and two weeks later there's

25

a deficiency and so forth. But I'm just wondering is

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1 there any other variable in place here? Could it be-  
2 -could it be an error? Could it be that, you know,  
3 something was overlooked?  
4

5 DEPUTY COMMISSIONER VARGAS: Sure.

6 COUNCIL MEMBER CABRERA: How do we--how  
7 do we put a check on that as well?

8 ASSISTANT COMMISSIONER CRESCIULLO: Well,  
9 I can tell you how we do it. I mean, of course, you  
10 have staff with different experiences, with different  
11 backgrounds. We have newer staff who may not be  
12 completely familiar with all the requirements of the  
13 Health Code. We do a lot of training with those  
14 staff. We give them an orientation, and we also do a  
15 lot of analysis of performance measures with our  
16 staff.

17 COUNCIL MEMBER CABRERA: Okay.

18 ASSISTANT COMMISSIONER CRESCIULLO: So we  
19 look at things like citation rates. Like attempted  
20 visits to make sure that all our staff are actually  
21 going to the sites that they're supposed to be at.  
22 We look at time on site, and we break it out into a  
23 graph, and we look at the outliers. So if we have a  
24 staff member with a very high rate of attempts, we  
25

call them in and have a discussion. And we try to figure out why. Often that corrects the temporary.

COUNCIL MEMBER CABRERA: So that GPS system--I'm sure it has a GPS--is able to determine how long the inspector was there--

ASSISTANT COMMISSIONER CRESCIULLO:  
[interposing] Yes.

COUNCIL MEMBER CABRERA: --on a particular site--

ASSISTANT COMMISSIONER CRESCIULLO:  
[interposing] Right.

COUNCIL MEMBER CABRERA: --for us to use?

ASSISTANT COMMISSIONER CRESCIULLO: Yes, it--it picks up--it starts tracking from the start of the inspection to the end.

COUNCIL MEMBER CABRERA: Okay. Now, let me move to the last question. I was going to follow up with something there, but it was mentioned that obviously you do four visits a year that in your opinion you felt it should be more. To do more, you're going to use more staff? Is that--is that the issue here, or reorganization? What would be--

DEPUTY COMMISSIONER VARGAS: I think it's going to require a little of both.

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COUNCIL MEMBER CABRERA: Okay.

DEPUTY COMMISSIONER VARGAS: So the first step is going to be a reorganization. So we are kind of dismantling the teams as we know them, and we are going to-- You know, right now each team carries a caseload of 50 programs. And so, we are going to be changing that.

COUNCIL MEMBER CABRERA: Okay.

DEPUTY COMMISSIONER VARGAS: I really believe as we think about Early Childhood and attachments, I believe that attachment between a program specialist and a program is important as well. And so, we're changing that ratio so that one program specialist is responsible for no more than 11 programs.

COUNCIL MEMBER CABRERA: That's great.

DEPUTY COMMISSIONER VARGAS: And that they have direct relationships. You know, they need to know those programs. They need to know the directors, the staff, they need to know the policy committees. And so, I believe that changing that ratio will go a long way to making sure that we're providing the best monitoring, the best technical assistance and support to these programs.

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COUNCIL MEMBER CABRERA: I want to ask,  
when is that going to start, the changeover?

DEPUTY COMMISSIONER VARGAS: We are--  
we're in the process of putting the plan together  
for, you know, for training. We've got to go through  
Labor Relations to, you know, address the, you know  
some of the shifts that will take place. So, I'd  
like to have it--get it started, you know, in July of  
2015 to have--

COUNCIL MEMBER CABRERA: [interposing]  
Fantastic.

DEPUTY COMMISSIONER VARGAS: --all the  
pieces in place. But, that's my--

COUNCIL MEMBER CABRERA: [interposing]  
Goal.

DEPUTY COMMISSIONER VARGAS: --that's my  
goal.

COUNCIL MEMBER CABRERA: Again, I commend  
you. That's a tremendous--I mean that's a tremendous  
ratio change that is going to be taking place. And I  
love the word that you used, relationship. You  
mentioned that that--this is the very last question.  
You mentioned something that just caught my mind.  
That the lease experience, inspectors coming in they

1 might not catch or might not know a certain Health  
2 Code. but in your software, and that's what I was  
3 really getting at--in your software doesn't it--is  
4 there like a checking system that just keeps checking  
5 yes or no type of system--

7 ASSISTANT COMMISSIONER CRESCIULLO:

8 [interposing] Right.

9 COUNCIL MEMBER CABRERA: --that can go  
10 over all the Health Codes.

11 ASSISTANT COMMISSIONER CRESCIULLO:

12 Right.

13 COUNCIL MEMBER CABRERA: That way they  
14 don't have to try to remember them.

15 ASSISTANT COMMISSIONER CRESCIULLO: And  
16 my own point is that the result of inspection and to  
17 some extent is dependent upon the experience of the  
18 individual program. Right, the person going to the  
19 program to inspect and their background, and we do--  
20 we have been hiring so we do have some new staff.  
21 And there is a bit of a learning curve, and even  
22 though we give them orientation and training, we also  
23 send them out with supervisors. You might see  
24 differences in their inspections versus someone who's  
25 been with us for 20 years.



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2 COUNCIL MEMBER CABRERA: [interposing]

3 But I mean--

4 ASSISTANT COMMISSIONER CRESCIULLO: But,  
5 yes, the software does have--

6 COUNCIL MEMBER CABRERA: [interposing]

7 Okay.

8 ASSISTANT COMMISSIONER CRESCIULLO: --it  
9 does break up our Health Code into categories.

10 COUNCIL MEMBER CABRERA: Okay.

11 ASSISTANT COMMISSIONER CRESCIULLO: It  
12 assigns those categories to specific parts of a  
13 program, and it does walk them through it, yes.

14 COUNCIL MEMBER CABRERA: Okay, yeah,  
15 because it's either more or no more. I mean there is  
16 either infestation or there's no infestation. Okay.  
17 Thank you so much, Mr. Chair. Thank you for the  
18 extended time.

19 CHAIRPERSON LEVIN: Okay. Thank you  
20 Council Member Cabrera, and thank you to Council  
21 Member Palma for her questions as well. [coughing]  
22 Commissioner, I just want to ask a couple of final  
23 questions around what Council Member Cabrera was  
24 asking. With the data system that you were speaking  
25 of putting into procurement at this point in time, is

1 that being developed with the Office of Head Start?  
2 Because obviously they've--they have--they're  
3 overseeing this--the corrective action plans  
4 ultimately. Is that--is that being done in  
5 conjunction to make sure that whatever is being  
6 developed is to their standards? And, can you  
7 explain that process or eliminate that a little bit?  
8

9 DEPUTY COMMISSIONER VARGAS: So the--the  
10 goal is not to actually develop a system, but to  
11 purchase a system. There are many kind of case  
12 management systems that currently exist. And so,  
13 part of the procurement process is to really take a  
14 look at the options that are out there. And  
15 determine which option best fits the needs given, you  
16 know, all of the other systems that we need to talk  
17 to and pull data from.

18 CHAIRPERSON LEVIN: Are you discussing  
19 with the Office of Head Start what you're looking at  
20 purchasing so that it's--to ensure that it's in  
21 compliance with--with whatever corrective action  
22 plans broadly they are instituting.

23 DEPUTY COMMISSIONER VARGAS: So as  
24 you're--as you're aware, we, you know, at this stage  
25 of the procurement process, you know, we haven't

1 identified, you know, particular programs. We know  
2 that there are, you know, several programs that are  
3 out there. My goal is to one, reach out to my  
4 counterpart in Chicago and L.A. and see what they're  
5 using as we move through this process as a--as a way  
6 to determine what's working in some of these larger  
7 cities and what isn't. And also to work closely with  
8 the Regional Office. We did discuss this with--  
9 during the progress review that we had several weeks  
10 back with representatives of Head Start.

12 CHAIRPERSON LEVIN: Okay, so you're going  
13 to be--they're going to be--I mean they're going to  
14 be involved in this process of the--in this--  
15 specifically the--the procurement of the system? Are  
16 they going to be involved in that or are they going  
17 to be--have a--are they going to opine on the matter,  
18 or are they or is it--?

19 DEPUTY COMMISSIONER VARGAS: I think we  
20 will definitely want them to--

21 CHAIRPERSON LEVIN: [interposing] To come  
22 on board? [sic]

23 DEPUTY COMMISSIONER VARGAS: --to opine  
24 on the--on whatever recommendation they might have  
25

around systems that they've seen work in large cities.

CHAIRPERSON LEVIN: And that--this will be for just the Head Start system or more broadly the Early Learn NYC system in all cities?

DEPUTY COMMISSIONER VARGAS: We need it for the entire Early Learn system.

CHAIRPERSON LEVIN: Okay. With regard to the head count, so you said that you're going to be reducing the caseload. Can you say that again for the record from--?

DEPUTY COMMISSIONER VARGAS: So from this team approach that has a team of three responsible for 50 programs--

CHAIRPERSON LEVIN: [interposing] Right.

DEPUTY COMMISSIONER VARGAS: --to one-- one program specialist that functions as a generalist working with 11 programs.

CHAIRPERSON LEVIN: Okay. Is that going to be an increase in the head count of specialists then? Because if you're going from three for 50 to one to eleven, that seems like that would be an increase in overall head count. Is that correct?

DEPUTY COMMISSIONER VARGAS: Yes.

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CHAIRPERSON LEVIN: Is that head count increase reflected in the Preliminary Budget as put forward by ACS this year?

DEPUTY COMMISSIONER VARGAS: No, it's not.

CHAIRPERSON LEVIN: Is it going to be reflected in the Executive Budget put forward by ACS?

DEPUTY COMMISSIONER VARGAS: We don't know.

CHAIRPERSON LEVIN: How--how would you pay for this--that head count without an increase in funding?

[pause]

DEPUTY COMMISSIONER VARGAS: We'll have to explore it further.

CHAIRPERSON LEVIN: Okay, I hope that it's--it's--may I recommend that that head count be accurately reflected in the Executive Budget that's put out next month--for this month. I'm going to turn it over to Council Member Inez Barron for questions.

COUNCIL MEMBER BARRON: Thank you to the Chairs for hosting this very important hearing, and thank you to the panelists for coming. And as my

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1 colleagues have said, it's an affront as far as I'm  
2 concerned that the Commissioner is not here. Baring  
3 the fact that there may have been some serious  
4 illness that prevented her from coming. The  
5 Commissioner needed to have been here. I have  
6 several questions. You talked about the team that  
7 goes to the sites to do inspections. You have a team  
8 from the Department of Health and there is also a  
9 team from ACS. Is there any coordination between the  
10 timing of these visits so that they might be spaced.  
11 So that there might not be an opportunity for a gap  
12 of time to occur when something would pop up that  
13 might be able to be remediated? So do you coordinate  
14 your visits so that you can space them out?

15  
16 ASSISTANT COMMISSIONER CRESCIULLO:

17 [coughs] The short answer is that we--

18 COUNCIL MEMBER BARRON: [interposing]

19 Because you said that the--one of the team members  
20 looks at the physical from the ACS. One looks at  
21 the--

22 DEPUTY COMMISSIONER VARGAS:

23 [interposing] I said--I said education, health and  
24 family engagement.

25

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COUNCIL MEMBER BARRON: Education,  
health, and family engagement, yes.

DEPUTY COMMISSIONER VARGAS: Education,  
health and family engagement, yes.

ASSISTANT COMMISSIONER CRESCIULLO: So  
the short answer is no we don't currently engage in  
that. You know, thinking out on it, it may be very  
difficult for us to coordinate with ACS who is where  
when. Maybe for annual inspections. That's  
something that we can consider. Annual inspections  
being part of DOH. But, you know, we also respond to  
these sites because of complaints, critical  
incidents. If it involves and ACS site, as I said  
before, we do inform them and let them know that  
we're at the site because of a critical incident or  
if we're conducting a suspension. So, you know, like  
I said, currently, we don't coordinate our visits.

COUNCIL MEMBER BARRON: And as you talked  
about the citations that were noted in the report,  
there were 18 persons working that had not completed  
the background checks. Do the directors of the  
centers know that you should not hire someone until  
or is that new policy. Or, was it a standard policy

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that you could hire people? Because we're talking  
about the safety of our children.

ASSISTANT COMMISSIONER CRESCIULLO:

Right, and so I mean in this area I believe the--the  
Head Start Regs are more stringent than the Health  
Code, and also State Regulation. I believe the  
Health Code, the State Regulation allow a new staff  
member to work at a program while their clearances  
are being processed, as long as that individual is  
assigned to a staff member who is fully cleared. So,  
in other words, the director of these programs their  
responsibility is the submission of fingerprints and  
the SCR clearances.

COUNCIL MEMBER BARRON: And is that still  
the policy that they can be hired--

ASSISTANT COMMISSIONER CRESCIULLO:

[interposing] Yes.

COUNCIL MEMBER BARRON: --without having  
final--

ASSISTANT COMMISSIONER CRESCIULLO:

[interposing] That's the--

COUNCIL MEMBER BARRON: --clearance?



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ASSISTANT COMMISSIONER CRESCIULLO: Yes,  
that's the Health Code Regulation and the State  
Regulation. Yes.

COUNCIL MEMBER BARRON: So then we're  
going to continue to have this citing if we--

DEPUTY COMMISSIONER VARGAS:  
[interposing] Well, let me--let me add to that.

COUNCIL MEMBER BARRON: Okay.

DEPUTY COMMISSIONER VARGAS: Because  
that's the--that's the City Health Code--

COUNCIL MEMBER BARRON: [interposing]  
Right.

DEPUTY COMMISSIONER VARGAS: --Regulation.  
However, in the Early Learn contracts, which all of  
these programs have, it states that they have to  
subscribe to the Head Start regulation, which is that  
they cannot start until they are cleared and they  
receive the clearance.

COUNCIL MEMBER BARRON: So did they know  
that--

DEPUTY COMMISSIONER VARGAS: [interposing]  
Yes.

COUNCIL MEMBER BARRON: --and if they did  
know that, how did that happen?

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DEPUTY COMMISSIONER VARGAS: Yes, it is--  
so it is in their contract. So, you know, we would  
assume that when we award a contract, the--the  
awardee reads the contract--

COUNCIL MEMBER BARRON: [interposing] So  
we can't make that assumption because it's not  
happening. So how are we going to make sure that  
going forward--

DEPUTY COMMISSIONER VARGAS:  
[interposing] So--

COUNCIL MEMBER BARRON: --that doesn't  
happen?

DEPUTY COMMISSIONER VARGAS: --we have  
done--we've reiterated the policy to all of our  
programs. So we've re-sent it out. We've done  
trainings on it. We've met with all of our program  
directors to talk about all of the deficiencies, and  
we've spent some time on this one. And we've  
highlighted for them that there is this difference  
between what the city allows and what--what Early  
Learn allows and that they're--

COUNCIL MEMBER BARRON: [interposing] So  
would they be required to certify to you that a new  
employee has, in fact--

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2 DEPUTY COMMISSIONER VARGAS:

3 [interposing] Yes.

4 COUNCIL MEMBER BARRON: --completed all  
5 of that. Okay.

6 DEPUTY COMMISSIONER VARGAS: So--so let  
7 me just clarify. I said yes maybe a little too  
8 quickly, but what we've put in place is a vacancy  
9 tracker--

10 COUNCIL MEMBER BARRON: [interposing] Uh-  
11 huh.

12 DEPUTY COMMISSIONER VARGAS: --where  
13 monthly programs have to send to us this vacancy  
14 tracker letting us know where their vacancies are.  
15 We also require that the board chair of those  
16 programs sign off. So that there's a level of  
17 accountability within the program. And then, our  
18 program specialists use that to follow up with the  
19 programs. One, to remind them, and two, to provide  
20 any assistance in, you know, in the processing that  
21 takes place.

22 COUNCIL MEMBER BARRON: So the program  
23 specialists then should be the one then I would think  
24 to say okay, this--this person has cleared it. I  
25 mean--I mean--

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DEPUTY COMMISSIONER VARGAS:

[interposing] No, the clearance comes back to the individual in the program. Correct?

ASSISTANT COMMISSIONER CRESCIULLO: Yes.

COUNCIL MEMBER BARRON: So how do you know that, in fact, the person has been cleared? I understand you're saying your training them. You're telling them. You're making sure they know, but what guarantees do we have that this won't happen again? How do we know that the person, the last person hired that that vacancy tracker has brought into the position has, in fact, fulfilled that requirement?

DEPUTY COMMISSIONER VARGAS: They do submit their clearances to us. The programs submit-- are required to submit their clearances to us.

COUNCIL MEMBER BARRON: I'm still missing something here. They're required to submit them, but they haven't because there would not have been this-- You wouldn't have been cited if they had done that.

DEPUTY COMMISSIONER VARGAS: Correct.

COUNCIL MEMBER BARRON: So how can we make sure--

DEPUTY COMMISSIONER VARGAS:

[interposing] So this is part of our new attempt to

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1  
2 monitor this in a different way. So, part of the new  
3 attempt is increase training, the vacancy tracker and  
4 making sure in the communication between the program  
5 specialist, and the programs that we are receiving  
6 those clearances and logging those clearances for all  
7 of our programs.

8 COUNCIL MEMBER BARRON: So you'll log  
9 them in that okay this last person has submitted  
10 their clearance?

11 DEPUTY COMMISSIONER VARGAS: That's  
12 correct.

13 COUNCIL MEMBER BARRON: Okay. In terms  
14 of the--the citings, what's the timeline? If you get  
15 a notice--if someone calls you, if a director calls  
16 you and notices that there's unsafe furniture and  
17 reports it to your agency, what's the timeline for  
18 that to be corrected? How long does that generally  
19 take?

20 DEPUTY COMMISSIONER VARGAS: So, I think  
21 there--Maybe I'll let Commissioner Frank go first and  
22 talk about the timeline with facility related issues  
23 that DOHMH addresses.

24 ASSISTANT COMMISSIONER CRESCIULLO:  
25 Right. So violations fall into three categories.

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1 You have your minor violations, your critical  
2 violations, and your public health hazards. So the  
3 public health hazards have to be either fixed or  
4 mitigated within 24 hours. If they can't be fixed or  
5 mitigated within 24 hours, we suspend the permit.  
6 Critical violations have to be fixed within 14 days,  
7 and the minor violations with 30 days. We conduct  
8 compliance visits to go out to make sure for the  
9 critical and public health hazards that programs are-  
10 -really for the critical because we know what's  
11 happening with public health hazards for the  
12 criticals to make sure they're in compliance.

14 COUNCIL MEMBER BARRON: And what would be  
15 an example of a public health hazard, which would  
16 required being remediated within 24 hours?

17 DEPUTY COMMISSIONER VARGAS: It ranges so  
18 you could have a like condition. You can have  
19 uncleared staff. You could have inappropriate staff  
20 to child ratio, things of that nature.

21 COUNCIL MEMBER BARRON: Okay. And back to  
22 the question of the evaluations that are done during  
23 the site visits. You indicated that the readings or  
24 the evaluations of the findings might different  
25 depending upon the experience of the person that

1 conducted the visit, that conducted the visit to the  
2 site? How can we eliminate that subjectivity or that  
3 variance. Because if I go in, and I have his  
4 handheld device, and I rate it, do you get a rating  
5 by points or how is that?  
6

7 ASSISTANT COMMISSIONER CRESCIULLO: So  
8 let me speak to your first question.

9 COUNCIL MEMBER BARRON: Okay.

10 ASSISTANT COMMISSIONER CRESCIULLO: So  
11 again we do a full orientation. We test the new  
12 staff at the end to make sure that they're ready to  
13 go out to the field on their own. They do shadow an  
14 inexperienced staff member during three months,  
15 Julian [sic] six months?

16 JULIAN: [off mic] For about three  
17 months.

18 ASSISTANT COMMISSIONER CRESCIULLO: For  
19 about three months. At the end of that time again,  
20 they--they're evaluated to see if they're ready.  
21 They--during that time they interact with an  
22 experienced supervisor, and they on site walking  
23 through inspections. They're not conducting any on  
24 their own. They're participating in the inspection  
25 of the sites. So, the--the software was created to

1 try to standardize the outcome, exactly what you just  
2 raised. Standardize the outcome of our inspections.  
3 So it does walk each staff member through the  
4 inspection and the sections of the center that they  
5 should be looking at. I mean what it doesn't do is  
6 tell them that what they're looking at is a  
7 violation. So there is a bit of a learning curve.  
8 That is the only point that I was making. And I'm  
9 sure if I broke out the results of a brand new staff,  
10 new to the system versus staff who have been with us  
11 15 to 20 years, we would see differences in the  
12 citation rates.

14 COUNCIL MEMBER BARRON: And do the  
15 directors of these centers have that same criteria,  
16 that same matrix that they know they're going to be  
17 judged by? Do they know what it is that the  
18 inspectors are looking for?

19 ASSISTANT COMMISSIONER CRESCIULLO: Oh,  
20 yes. So inspectors have sort of an intake conference  
21 when they get there, and discuss, you know, what  
22 they'll be looking at. And it's depending on the  
23 type of inspector that's there. Like I said before,  
24 we have public health sanitarians who look at the  
25



physical plan to Early Childhood educators who look at curriculum and qualifications and clearances.

COUNCIL MEMBER BARRON: So prior to the inspection, is there a site that they can go to? Is there a document that they can review to know what they're going to be--what standards they're going to be held to?

ASSISTANT COMMISSIONER CRESCIULLO: There is. Every new applicant for a child care permit has to go through an orientation as a prerequisite before they can receive an application. And during that orientation, it's another three or four-hour orientation, we walk through all of the aspects of regulatory oversight.

COUNCIL MEMBER BARRON: So they can refer to that same document, that same listing?

ASSISTANT COMMISSIONER CRESCIULLO: The can. It's online. COUNCIL MEMBER BARRON: [interposing] Okay.

ASSISTANT COMMISSIONER CRESCIULLO: We also have a section for providers--

COUNCIL MEMBER BARRON: [interposing] Okay.

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ASSISTANT COMMISSIONER CRESCIULLO: --  
online that gives them a lot of information, and they  
can also find, of course, the Health Code online.

COUNCIL MEMBER BARRON: Okay, and then  
finally in terms of the space, you indicated that  
perhaps there would be some differences in their  
calculations space and your calculations of space.  
How could that happen if we're looking at a finite,  
you know, actual--actual building where would those  
differences in measurement, how would they be  
accounted for?

DEPUTY COMMISSIONER VARGAS: So one of  
the measurements, one of the--the differences in--in  
measurements this year is that the previous federal  
reviews had included cubbies for children as space.  
And we understand, currently and from this review  
that now that cubbies are no longer allowable as  
space. So that's one way that there's a difference.  
In some cases, there's a pretty big swing between our  
numbers and the--and the reviewer's numbers. Which  
is why we ask for them to come back and re-measure  
with our Facilities team. Sometimes it's just, you  
know, with some of the buildings it's a matter of,  
you know, maybe somebody starting from the window

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where there might be a heater coming out. And  
somebody starting from, you know, more of the wall  
where, you've maybe

COUNCIL MEMBER BARRON: [interposing]  
Okay.

DEPUTY COMMISSIONER VARGAS: -- already  
taken a, you know, a half a foot of space or  
something.

COUNCIL MEMBER BARRON: Okay. Thank you.  
Thank you, Mr. Chair.

CHAIRPERSON LEVIN: Thank you, Council  
Member Barron. Council Member Wills for a second  
round of questions.

COUNCIL MEMBER WILLS: Thank you very  
much, Mr. Chair. I can't--I can't really agree with  
Council Member Cabrera's assertion that it's been a  
joy to deal with ACS because every engagement I've  
had with you has been evasive, untruthful, and  
absolutely ACS circumvents city regulations and being  
misleading in its representations. And that's not a  
stab at you directly, but the agency itself has not  
dealt with me and my community I believe is truthful.  
I need to ask a couple of questions with that being  
said. The Head Start model for funding, is that per

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1 seat, per child as the Early Learn model is? We get  
2 paid for how many children are in the center or do  
3 you get paid for your capacity?

4  
5 DEPUTY COMMISSIONER VARGAS: I believe we  
6 get paid for capacity. So we have--the capacity  
7 right now is 12,766 seats, and the grant is \$129  
8 million.

9 COUNCIL MEMBER WILLS: So each center if  
10 their capacity is 100 children, and they only have--I  
11 know that you said they were like at 97% of  
12 enrollment, and they only have 90 children?

13 DEPUTY COMMISSIONER VARGAS: Ninety-one  
14 percent.

15 COUNCIL MEMBER WILLS: They get paid for  
16 the whole 100 children?

17 DEPUTY COMMISSIONER VARGAS: I'm sorry.  
18 Say that again.

19 COUNCIL MEMBER WILLS: The center itself  
20 if the Head Start Center has 100 children--

21 DEPUTY COMMISSIONER VARGAS:  
22 [interposing] Yes.

23 COUNCIL MEMBER WILLS: --and they only  
24 have 90 children enrolled, what do they get paid for  
25

the 90 children or the 100% capacity--the 100  
children capacity?

DEPUTY COMMISSIONER VARGAS: Yes, so they  
get paid by enrollments. So they get paid for the 90  
children.

COUNCIL MEMBER WILLS: Okay, with that  
being said, we--I'm sure you're aware that these  
centers are struggling to pay because of the  
enrollment amount. And there are a couple of things  
that we're going to go into, but there was a question  
that was asked by Council Member Barron as far as the  
programs themselves understanding what's in the  
contract. You said that it was in the contract for  
them to have certain things done. If there is a--a  
provider from ACS that is given a contract, is that  
provider responsible for knowing everything in that  
contract as well as city regulations that go along  
with that contract? Is that provider held  
responsible for that, or does ACS come in and then  
try to fix it for the provider?

DEPUTY COMMISSIONER VARGAS: Well, we  
certainly try. You know, we allow that from time to  
time people make mistakes.

COUNCIL MEMBER WILLS: Right.

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DEPUTY COMMISSIONER VARGAS: And we certainly try [coughs] to work with our providers to provide the technical assistance and support that they need so that they can do a quality job.

COUNCIL MEMBER WILLIS: When does ACS step in and do it for them?

DEPUTY COMMISSIONER VARGAS: I'm not sure what you're asking.

COUNCIL MEMBER WILLIS: If the provider makes a mistake and they don't do something that is in accordance to City regulations or to the contract, when does ACS step in and say, we will now use the weight of the agency to fix this?

DEPUTY COMMISSIONER VARGAS: So there's-- there's a couple of processes that go into that. It's a little bit more nuanced. You know, and we have a heightened monitoring level that, you know, I talked about a little bit earlier. Where programs that, you know, are struggling that have violations or aren't quite getting something or aren't quite doing what they need to be doing. And, you know, we've--we've given them some time to correct, and we've provided some technical assistance, continue to struggle, we will place them in heightened

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1 monitoring. And that allows for our team to do more  
2 intensive work with them. Every time we go out and  
3 we do a site visit, we writ it up in a program report  
4 that gets shared. If there are violations that are  
5 found, we note the violation. We note the Head Start  
6 standard that goes along, you know, that it violates.  
7 We note the timeframe that they have to correct it  
8 in, and also, you know, provide the technical  
9 assistance, list the technical assistance that will  
10 provide them. And then, we work closely with them  
11 to--to make that happen. So, you know, for the most  
12 part, we haven't had to step in and do things for our  
13 programs. We really try to be as supportive as  
14 possible knowing that they're providing really an  
15 invaluable service to the community.

17 COUNCIL MEMBER WILLS: Okay. When we  
18 open up the Afro-American day care centers in the  
19 district, we had to have a joint task force or, if  
20 you will, a group--a working group from DOB, ACS,  
21 DOHMH and DCAS. They all came out and worked with  
22 the organization. But anything that we needed to  
23 have done even though there was a firm deadline that  
24 had to be fixed, no agency especially ACS or DOHMH  
25 actually stepped up and spoke to DOB and said, Hey,

1 this, this and the other thing. My staff had to go  
2 back and figure things out on our own with the  
3 agencies. Is there any--is there ever a time where  
4 ACS would actually step and say, hey, DOHMH this  
5 license needs to be done and these are certain things  
6 that can be done to make sure that the licensee is in  
7 compliance, but not-- Open, but not totally in  
8 compliance or something like that--

10 DEPUTY COMMISSIONER VARGAS:

11 [interposing] We are--We are--

12 COUNCIL MEMBER WILLS: --or DOB?

13 DEPUTY COMMISSIONER VARGAS: That's, you  
14 know, I think that's--that's a great example because  
15 it's one of the areas now where I feel like we have  
16 much better improved coordination and communication  
17 with DOHMH around these issues. [ringing phone] So  
18 that we can work. When we know that the site license  
19 is up for renewal, you know, we can work in advance  
20 with the program to make sure that the program, you  
21 know, does what it needs to do in order to be  
22 prepared to have the renewal and not to delay that.

23 COUNCIL MEMBER WILLS: There's at least  
24 three different times when OHS has made mention on  
25 one page actually in their report of funding for



1 this--the grant. There is a possibility that this  
2 grant could be in jeopardy. And what I'm asking you  
3 is even if these deficiencies are fixed, we now  
4 because of the deficiencies have to reapply for the  
5 funding. So with that being said, it would--you  
6 could draw the conclusion that ACS--and I don't want  
7 to go into what--which administration is there for  
8 it. But ACS as an agency has put us in jeopardy of  
9 losing the funding from the federal government for  
10 this.

12 DEPUTY COMMISSIONER VARGAS: Well, I  
13 think as Ms. Santiago stated in her testimony earlier  
14 this morning, the new model that the Office of Head  
15 Start is using requires all grantees after the five-  
16 year period to reapply for the grant.

17 [pause]

18 COUNCIL MEMBER WILLS: No, it says a--it  
19 says DRS requires any grantee with a deficiency to  
20 compete for renewed funding. It doesn't say every  
21 grantee. It's with a deficiency, and we look at the  
22 one, two, three, fifth paragraph on page four.

23 DEPUTY COMMISSIONER VARGAS: That's  
24 correct. So--

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COUNCIL MEMBER WILL: [interposing] So,  
because we have deficiencies we have to apply and go  
back to the funding?

DEPUTY COMMISSIONER VARGAS: That's  
correct--

COUNCIL MEMBER WILL: [interposing] Okay.

DEPUTY COMMISSIONER VARGAS: --after the  
five year--

COUNCIL MEMBER WILL: [interposing] So my  
question is--

DEPUTY COMMISSIONER VARGAS: --grand is  
up.

COUNCIL MEMBER WILL: So then my  
statement is saying, or what I'm saying is because of  
this, then the conclusion can be drawn that ACS has,  
and I said that I'm not picking on any particular  
administration. But ACS has put us in jeopardy for  
this funding.

DEPUTY COMMISSIONER VARGAS: Our goal is  
that the fixes that we're putting in place to address  
these issues, and to address kind of, you know,  
broader issues across the Early Learn system will  
help to strengthen the system that we're currently

running. So that we can continue to provide high  
quality services to the children who need them.

COUNCIL MEMBER WILLS: All right, the--  
the report also said that ACS's Head Start grant  
ultimately if it was terminated, it was not the  
federal--it was no OHS' goal--it is their goal to  
avoid any destruction to the extent possible to  
services to unload children. If this grant was  
terminated because of the deficiencies, or because of  
some other issue highlighted in the Federal Report,  
what is the plan for ACS to actually go forward and  
make sure that there are no disruptions? Because  
without the money there has to be disruption. Are  
we--are we even looking at that as a possibility, or  
are we just assuming that we're going to get it no  
matter what?

DEPUTY COMMISSIONER VARGAS: I don't  
think that anybody assumes that we will get anything  
no matter what. What we are doing is working really  
hard to make sure that we make all of the necessary  
improvements to our system. So that the next audit,  
you know, we are coming at it from a stronger  
position. And the audit after that we're even  
stronger. That's the goal and so an analysis, we have

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1 not done an analysis at this point to assess how  
2 many--you know, where we would place the children who  
3 would lose their seats. We're really focused on  
4 really improving the quality of our system. So that  
5 our providers can improve their quality. And we're  
6 working closely with the Office of Head Start, and  
7 collaborating with them pretty much every step of the  
8 way. We've had, you know, conversations--may  
9 conversations, and several meetings with  
10 representatives of the Office of Head Start just to  
11 make sure that as we move through this process, as we  
12 strengthen our system, we're getting their feedback  
13 on a regular basis.

15 COUNCIL MEMBER WILLIS: But their feedback  
16 says that the controls, that the Chair spoke to  
17 needing to be put in place. I mean the Chair spoke  
18 to you about these controls. They hadn't been put in  
19 place yet. So how much is that really doing for us?

20 DEPUTY COMMISSIONER VARGAS: I'm not sure  
21 how you want me to answer that question.

22 COUNCIL MEMBER WILLIS: [interposing]  
23 Okay.

24 DEPUTY COMMISSIONER VARGAS: We're  
25 working--

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COUNCIL MEMBER WILLIS: [interposing]  
That's all right.

DEPUTY COMMISSIONER VARGAS: We are  
working--

COUNCIL MEMBER WILLIS: [interposing] I  
appreciate the honesty, that's okay.

DEPUTY COMMISSIONER VARGAS: Well, no, I  
mean let me just say this.

COUNCIL MEMBER WILLIS: Uh-huh.

DEPUTY COMMISSIONER VARGAS: You know,  
there's been a lot of work that's gone on to address  
the issues that were brought to light by this report.  
And so, you know, the goal here is to continue to  
work at that level to address the systemic issues  
that we face so that we come--

COUNCIL MEMBER WILLIS: [interposing]  
That's--that's what I was looking for.

DEPUTY COMMISSIONER VARGAS: So that we  
come to a stronger--you know, we end up in a stronger  
place.

COUNCIL MEMBER WILLIS: [interposing]  
That's what I was looking for. There is no  
admission--

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DEPUTY COMMISSIONER VARGAS:

[interposing] The Commissioner wants that. The Mayor wants that.

COUNCIL MEMBER WILLS: Yeah, but there's no admission in any agency that there are systemic problems. And that's what I was looking for, and I appreciate that. Out of the 18 people that were found--the 18 employees that were hired without having their criminal background checks being done, or completed. Were any of those 18 found not to be able to work in the centers. Or, the 18 were found they were okay, they could work there once the background check and stuff was completed?

DEPUTY COMMISSIONER VARGAS: Yeah, I believe all 18 of them were found--were fine--were cleared.

COUNCIL MEMBER WILLS: Okay. Thank you, Mr. Chair. Thank you.

CHAIRPERSON LEVIN: Thank you, Council Member Wills. So, Commissioners, I have some--some additional questions, if that's all right. We have the room for--there's nobody here after us. So, we have the room for as long as we want it.

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ASSISTANT COMMISSIONER CRESCIULLO: Okay.

[laughs]

CHAIRPERSON LEVIN: I want to acknowledge Council Members Vanessa Gibson and Mathieu Eugene, who have joined us as well. [coughs] I want to again go back to these kind of broader systemic issues. You know, when I was reading the excerpt from page 17 of the OHS Report, I left off at--I just read the paragraph. You know, kind of saying how-- how many of the grantee delegate agencies have areas of deficiency. And that there's no system for ensuring the delegate agencies meet federal, state and local requirements or they met, federal, state and local requirements. The next paragraph actually, I think it's--it's important to read this into the record, as well, because it casts the issue in even starker relief. The lack of program account-- quote, "The lack of program accountability and quality control was of serious consequence to young children. The ineffectiveness of the grantee in managing the quality of its delegate agencies put children at significant risk. And several children were placed in dangerous facilities with staff accused of harming children. The grantee failed to establish an

1 effective reporting system to control program  
2 quality, and maintain program accountability. And  
3 the grantee failure to ensure delegate agencies  
4 followed the established--sorry--and the grantee--  
5 And the grantee's failure to ensure delegate agencies  
6 followed the established procedures for handling  
7 suspected child abuse and neglect. Therefore, it is  
8 not in compliance with the regulation."

10 I just want to go back to that point in  
11 your testimony. You said, "None posed an immediate  
12 risk." They're saying broadly the ineffectiveness of  
13 the grantee in managing the quality of its delegate  
14 agencies put children at significant risk. Do you  
15 agree with that finding? Do you agree that--do you  
16 agree that the ineffectiveness of the grantee in  
17 managing the quality of its delegate agencies put  
18 children at significant risk? Do you agree with that  
19 statement?

20 DEPUTY COMMISSIONER VARGAS: Whenever ACS  
21 finds out that a child has been put in harm's way, we  
22 react swiftly, definitively to address the issue.

23 CHAIRPERSON LEVIN: But they're not--

24 DEPUTY COMMISSIONER VARGAS: And so--  
25



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CHAIRPERSON LEVIN: --they're not  
speaking to--

DEPUTY COMMISSIONER VARGAS:  
[interposing] And so--

CHAIRPERSON LEVIN: --ACS' reaction to--

DEPUTY COMMISSIONER VARGAS:  
[interposing] And--and so, in each of those cases--  
I'm sorry. I'll just finish.

CHAIRPERSON LEVIN: All right. Okay.

DEPUTY COMMISSIONER VARGAS: And so, in  
each of those cases, there was a process that was  
followed. What lapsed during the review was the  
documentation of that process.

CHAIRPERSON LEVIN: Well, let me speak to  
that then. There were--and I'm going to quote again  
from the report. This is further up on page 17,  
first paragraph addressing a specific issue where on  
December 12, 2014, an OHS reviewer witnessed a child  
being forcibly grabbed by the teacher. However, the  
ACS monitor accompanying the reviewer determined that  
there was no evidence of child abuse and, therefore,  
did not report the incident. There are other issues  
here that are brought up when ACS did not do follow  
up. It would say that there was a corrective action

1 that was instituted, but in any of those instances,  
2 there was no--there was no follow up. [coughs]  
3 That's a source of concern. Can you describe what  
4 the follow-up procedure whenever there's a report?  
5 Let's say for instance, a child being left  
6 unattended, or an allegation. And--and, you know, a  
7 lot of these, there's, you know, these--a call to the  
8 SCR. That's an allegation. It's not necessarily a  
9 founded allegation. It could be an unfounded  
10 allegation, but what--what the report speaks to is  
11 ACS' failure to have a proper procedure and protocol  
12 without the system for follow up. That's what it  
13 speaks to repeatedly. Can you address that?

14  
15 DEPUTY COMMISSIONER VARGAS: So I can say  
16 first in the example that you were citing, the  
17 director of that program called the SCR twice. And  
18 SCR did not accept that--that complaint.

19 CHAIRPERSON LEVIN: So the ACS monitor  
20 called that in themselves?

21 DEPUTY COMMISSIONER VARGAS: I believe  
22 the director called it in.

23 CHAIRPERSON LEVIN: The director of--

24 DEPUTY COMMISSIONER VARGAS: Of the  
25 program.

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CHAIRPERSON LEVIN: Of the program?

3

DEPUTY COMMISSIONER VARGAS: Correct.

4

CHAIRPERSON LEVIN: Okay, but not the ACS

5

monitor?

6

DEPUTY COMMISSIONER VARGAS: Correct.

7

CHAIRPERSON LEVIN: Okay.

8

DEPUTY COMMISSIONER VARGAS: So, you

9

know, we have put several things in place, but

10

essentially all--

11

CHAIRPERSON LEVIN: [interposing] Before

12

you go--before you speak to what's been put into

13

place, can you speak to what was in place--

14

DEPUTY COMMISSIONER VARGAS:

15

[interposing] Yes.

16

CHAIRPERSON LEVIN: --at the time.

17

DEPUTY COMMISSIONER VARGAS: Yes.

18

ASSISTANT COMMISSIONER CRESCIULLO: [off

19

mic] Do you want me to take it?

20

DEPUTY COMMISSIONER VARGAS: Sure

21

ASSISTANT COMMISSIONER CRESCIULLO: If I

22

may, let me break out how the current system works,

23

and the communication between ACS and DOH around CPS

24

reports. So the Health Code requires, of course,

25

that clearance take place. The Health Code also

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requires the report to DOH of any sort of incident that places a child at risk within 24 hours. The director and staff of these programs also are mandated reporters. So if they observe something where a child comes to them, and makes an allegation of abuse or maltreatment, they're required to report to the SCR. Once the report is filed to the SCR, ACS's Office of Special Investigations receives that report. We have and have had a protocol in place since 2008 with ACS and OSI that requires the exchange of all information on CPS reports all to the extent that the law allows us to receive the information. So, typically, ACS, OSI receives this child abuse maltreatment report. They send it to DOH. They send us the intake report, and when possible we do joint visits to the facility. It's not always possible because ACS would normally speak to the parent, and the child first. We're going directly to the center. But, if we can, we do joint interviews on site. One, to minimize any questioning of the child so they don't have to be questioned multiple times. And also just to bring more efficiencies to the enter system. So once ACS makes its determination on the abuse and maltreatment

1 report, we get the finding of that report. And if  
2 there--if it's an indication or even if it's  
3 unfounded, and ACS determines that a corrective  
4 action plan is needed, DOH assists with obtaining  
5 that corrective action plan, implementation of the  
6 corrective action plan. Because they don't have the  
7 jurisdiction to do that. So, there is ongoing  
8 conversations during--

10 CHAIRPERSON LEVIN: [interposing] Right.  
11 Sorry, I just want to interject here. My question is  
12 when that corrective action plan is put into place,  
13 we see repeatedly in this report that there was no  
14 follow up. That there was--that there would be a  
15 correction action plan. They would be meeting with  
16 the center. Here's your corrective action plan, and  
17 then a follow-up meeting after that. That's what we  
18 started feeling in this report.

19 ASSISTANT COMMISSIONER CRESCIULLO: Okay.

20 CHAIRPERSON LEVIN: Is that--is that--do  
21 you-- First, do you agree with that characterization?  
22 And if you dispute it, specifically how do you  
23 dispute it? And then what is the process for follow-  
24 ups on the corrective action plans prior to this  
25 report coming out? What was--what was the process

for follow ups in the November 2014. That's an ACS question. That's not really a DOH question.

ASSISTANT COMMISSIONER CRESCIULLO:

Right, but I can tell you what DOH does. So we receive the finding by ACS. We require the corrective action plan from the program. We go on-site to make sure that the tenets of the correction plan are implemented, and followed before we close out the CPS complaint.

CHAIRPERSON LEVIN: Okay, can you?

DEPUTY COMMISSIONER VARGAS: Yes, so part of our follow up is really to have the--the program specialists and the team go out and, you know, provide the support that's necessary. That is the expectation of our teams. Clearly, this report has highlighted for us that that might not work the way that it was conceptualize to work. And so, you know, again I go back to changing the structure. So that, you know, when something like this happens, there's one person that the program reaches out to and works with directly. And, you know, also we've improved our communication with the Office of Special Investigations. So that we've really kind of cleaned up the feedback loop, which was a bit sporadic on

1 some of these cases. And we've cleaned that up to  
2 make sure that we are receiving the real time  
3 information on--on where the case is throughout this  
4 process. So that that then informs the work that our  
5 team can do in supporting the program, supporting the  
6 children, and supporting the parents. Whoever might  
7 need to be supported at the center level.  
8

9 CHAIRPERSON LEVIN: Okay, I just want to  
10 be clear, though, that the report states that it  
11 wasn't--it wasn't as if a particular corrective  
12 action plan fell through the cracks at any given  
13 time. It just--quoting here on page 18, A review of  
14 January through November, 2014--so in an 11-month  
15 period--grantee monitoring reports regarding  
16 reporting child abuse incidents found that the  
17 grantee completed only initial visits to develop  
18 correction actions--corrective action plans with the  
19 delegates. However, the grantee never followed up to  
20 ensure correction action plan activities were  
21 completed. Never. I take never at face value that  
22 it happened zero percent of the time. Do you agree  
23 with that assessment? I just want to make clear  
24 what--what the issue is that we're dealing with in  
25 terms of status quo prior to the report. Do you

agree that--that corrective action plans were never followed up with? There was no follow up? Zero?

DEPUTY COMMISSIONER VARGAS: I haven't looked at all of our--our, you know, at all of our case files. Again, I go back to the issue of data and information being housed in different systems. So I personally have not had the time to go through, you know, all of those files, all of the program review notes to--to be able to say whether or not we never do it, or we've done it some of the time. What I've been focused on is making sure, you know, since--since I've been at ACS, making sure that we put the proper systems in place. Making sure that we get the communication that we need so that-- And making sure we're clear on our expectation of our--of our teams about what their role is, and what they need to do when they go out. And so, I can say with confidence that, you know, during--during my tenure, which, you know, this review happened about two weeks after I got there or after I arrived at ACS. But, during my tenure, you know, we have really I think developed a pretty strong system. We've been able to provide the support that our programs need. And we've been able to kind of really manage the communication, and



support needed around the--the plans that are  
provided by DOHMH.

CHAIRPERSON LEVIN: So, specifically,  
when there's a corrective action plan that is  
instituted with a particular agency or center, what  
then is the process for--for follow-up precisely. Is  
there a timeframe? When are the--when are the  
follow-up visits? What is the scope of the follow-up  
visits? How many follow-up visits will there be for  
the corrective action plan that's put in place?

DEPUTY COMMISSIONER VARGAS: So my  
understanding, you know, is that-- You know, my goal  
is that when we are able to kind of change the  
structure where we have a one-to-11 ratio, that we  
can, you know, begin to do-- You know, part of what  
we need to do is really manualize the approach. And  
so, we have an approach to what the team's role, what  
the team's expectation is. But I would like to take  
that a step further, and really manualize, you know,  
with timeframes with some structure. So that,  
there's a level of standardization across our teams  
around how we're going out and doing the support.  
Right now, you know, the teams--the teams are pretty  
well experienced. And, you know, we have directors

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of health and education and so forth who provide  
additional support to those teams.

CHAIRPERSON LEVIN: Uh-huh. Okay. I want  
to go over to the issue of mental health because that  
is an area that was found to be an immediate  
deficiency with regards-- And this is going back to  
page 13 of the--of the--of the OHS Report. The  
regulations require a regular schedule of mental  
health consultations. Over the course of the review  
period, it was found that there were any serious  
allegations of child maltreatment, as we've  
discussed. It was also found that there was no  
evidence that ACS had a mental health professional  
provide any mental health education to parents or  
staff before or after these allegations. The alleged  
incidents cited by the reviewer are very seriously  
obviously, and include events that we've spoken--you  
know incidents that we've spoken about. Can you--can  
you talk a little bit about the plan to address the  
issues around mental health that quoting from page 13  
here, "A review of an Excel spreadsheet, Head Start  
Incident Chart, submitted to the Regional Office on  
December 2nd, 2014, found the grantee reported  
incidents presenting risks or adversely affecting

1 children's mental health and wellness. However,  
2 there was no evidence"--again no evidence--"the  
3 grantee had a mental health professional to provide  
4 mental health education to parents or staff prior to  
5 these incidents being reported, or after the  
6 allegations were made." What is the plan that ACS is  
7 undertaking now to address the mental health issues  
8 that were so prominently cited here in the report?  
9

10 DEPUTY COMMISSIONER VARGAS: So, we have  
11 a couple of positions that are focused on mental  
12 health. And right now one of those positions is  
13 vacant, which is kind of the Director of Health and  
14 Mental Health, and we're in the process of-- You  
15 know, going through the process to hire that  
16 individual. However, we have put in place someone  
17 who has extensive knowledge and experience in the  
18 field of mental health to take the lead in the  
19 interim. We're collecting information from all of  
20 our sites n the mental health professionals that they  
21 have on staff, or that they have relations with to  
22 ensure that there are some localized support. We're  
23 also scheduling quarterly meetings with mental health  
24 professionals of the--of our provider agencies.  
25 We've increased the monitoring of all documentation

of work performed by mental health professionals.

We've revised standardized reports to ensure that there's comprehensive follow-up particularly around incidents. And, you know, we've overall improved our tracking and our communication with the--with the provider sites, and with our--with a mental health consultant, schedules and work and so forth.

CHAIRPERSON LEVIN: Okay, this is less of a question, though, of tracking, in my opinion, and more of a question of overall mental health services to be in compliance with the Federal Head Start Law. You know, these are programs that grantees are required to have this as per Head Start, the Federal Law. Why was ACS out of compliance with Federal Law?

[pause]

DEPUTY COMMISSIONER VARGAS: I would really want to take a look at the individual cases to give you a response on, you know, the circumstances around, you know, particular cases. My understanding was that there was, for the most part, what led to this was the missing documentation of the mental health involvement, which we were not able to produce. But upon kind of closer examination internally, we found that the mental health

professional in these cases were involved. However, we did find, you know, with all transparency that there--the thorough, you know, we had difficulty finding documentation around thorough follow up.

CHAIRPERSON LEVIN: Okay, but it says in the report, "NYC ACS did not regularly provide this type of mental health education or support program staff and parents." There was no evidence of regular mental health education to support parents and staff. That doesn't sound like an issue of missing some paperwork. It sounds like an issue of not having a system in place to provide mental health support services in the agencies--in the delegate agencies. And that interaction and the clear--clear lines of communication that are--that really ought to be in--in, you know, some type of--of chart--organizational chart that ACS is responsible for. It's ACS' responsibility to provide under the federal law to provide those mental health services to the delegate agencies. So before they ever have an allegation of child abuse, or before they ever have any indication of any type of action or behavior that--that the Head Start Law says is covered under a mental health. Before we get into any of that, there needs to be

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1  
2 some type of clear guidelines of how ACS is going to  
3 provide mental health services and guidance to staff  
4 and the parents at the centers, at the delegate  
5 agencies. And that's--so when--what I'm reading here  
6 doesn't exactly correspond to what you're saying.  
7 Because you're saying it's an issue of some kind of  
8 lost paperwork or, you know, missing documentation.  
9 What they're saying is not a structure in place to  
10 provide mental health services to the delegate  
11 agencies from the grantee.

12 DEPUTY COMMISSIONER VARGAS: So in my  
13 organizational structure, I will tell you that there  
14 is a Director of Health and Mental Health and there  
15 also--there is also a Mental Health Consultant. I  
16 would like to be able to kind to take a deeper look  
17 so that I can, you know, get back to you with a  
18 response to that.

19 CHAIRPERSON LEVIN: Okay, the other  
20 question that I have along those lines, though, is  
21 that the timeframe for correction because it was an  
22 immediate deficiency was on--was 30 days. So that  
23 would have been February. So did--has ACS been  
24 granted an extension?

25

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DEPUTY COMMISSIONER VARGAS: Yeah. So we  
got an extension for that to April 25th.

CHAIRPERSON LEVIN: Okay. Now, just as  
kind of a more technical question here, has many  
extensions has ACS requested for corrective actions,  
and how many have been granted?

DEPUTY COMMISSIONER VARGAS: All of the  
extensions that we requested were granted, and--

CHAIRPERSON LEVIN: Can you say  
specifically what those--which areas those were in?

DEPUTY COMMISSIONER VARGAS: Give me one  
second so we can--

[pause]

DEPUTY COMMISSIONER VARGAS: So, we were  
granted requests on the pest infestation, unsafe  
heating and cooling systems, pollutants, hazardous  
materials and conditions. Although, I will say that  
100% of those have been already fixed. Toxic  
substances, unsafe classroom furnishings. Also,  
unsafe classroom furnishings, inadequate supervision  
of children, mental health services, reporting  
systems, ongoing monitoring, class size and playing  
round safety. No, square footage came I think on  
July 25th.

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CHAIRPERSON JOHNSON: Thank you, Chair  
Levin. [coughs] I apologize. I was at three other  
hearings that were going on, but I appreciate your  
time and staying so long and answering these  
questions. I have a few as well. Did ACS and DOHMH  
inspections of Head Start programs look at the same  
exact things?

ASSISTANT COMMISSIONER CRESCIULLO:  
[coughs] I don't believe they do. I mean I think  
they complement each other to a great extent. Most  
likely some overlap, but we--we have two types of  
inspectors when we go out. One, public health  
sanitarians who look at the physical plant, and the  
second is Early Childhood educators who look at  
curriculum, who look at qualifications, clearances.  
So I believe there's a possibility that the ECE  
inspections may overlap a bit with the ACS visits.

CHAIRPERSON JOHNSON: That's what I'm  
interested in. I want to understand where there's  
overlap between the DOHMH inspections and the ACS  
inspections.

DEPUTY COMMISSIONER VARGAS: So when we  
go out, we have a team approach where we have a team  
of three who will go out to a site, and take a look



1 at things through the lens of education, health and  
2 family engagement. And so, work that we're doing is  
3 really, you know, primarily around looking at the  
4 quality of educational services. How families are  
5 being engaged, whether or not documentation is  
6 present in the center. SO that's some of the work  
7 that we do. That being said, we are actually, you  
8 know, moving with our Facilities team that sits in  
9 ACS through our Administration Division to have more  
10 regularly staff going out to actually look at  
11 physical spaces. And try to address items, you know,  
12 early on as quickly as possible.

14 CHAIRPERSON JOHNSON: It's helpful to  
15 understand that that is the practice and procedure in  
16 place currently. I understand that the coordination  
17 of inspections with DOHMH could potentially be  
18 challenging. However, I wanted to see if you all  
19 have explored the idea of including DOHMH as part of  
20 that team that goes out. That's looking at  
21 education, health, and family engagement.

22 ASSISTANT COMMISSIONER CRESCIULLO: We've  
23 had some discussion [coughs] not only with ACS but  
24 also with DOE who also has Early Childhood educators  
25 going out to the Universal Pre-K sites about what

we're looking at and what sections we're looking at.  
And potentially removing some of the overlap, and  
using each other's data. The discussions are really  
early on. So I can't say that there's a plan in  
place for that, but it is an ongoing discussion.

CHAIRPERSON JOHNSON: I just--it would  
seem if you had ACS and DOHMH out inspecting the  
sites at the same exact time, or if there were  
separate site inspections that were going on. When  
DOHMH is there having ACS along with them. When ACS  
is there having DOHMH there with them. That seems  
like an easier thing to accomplish potentially than  
trying to improving things through information  
sharing systems. What would the challenges be?

ASSISTANT COMMISSIONER CRESCIULLO: I can  
tell you it's extremely challenging--

CHAIRPERSON JOHNSON: Why? What are the  
challenges?

ASSISTANT COMMISSIONER CRESCIULLO:  
Having gone--having gone through this again at  
Universal Pre-K. I'll give you an example. We tried  
to schedule our--our inspections along with staff  
from DDC, Design and Construction because the other  
piece of Universal Pre-K was assessing and evaluating

1 raw space for permitting time frames. And we just  
2 ran into an awful lot of barriers to actually getting  
3 on site together. One, is that we have different  
4 time frames, and different organizational structures.  
5 So where our staff, when they start the day, where  
6 they start the day, how they get to certain  
7 locations. As you know, traveling in the city is not  
8 the easiest thing to do at times by car. But a lot  
9 of agencies use their agency cars. Our staff use,  
10 for the most part, public transportation. It sounds  
11 sort of silly at times, but we had an extremely  
12 difficult time coordinating just with one agency, DDC  
13 for the purpose of getting on site, and doing an  
14 evaluation and assessment together. It's much more  
15 difficult than it--than it seems.

17 CHAIRPERSON JOHNSON: But these sound  
18 like manageable things. I know it may be difficult  
19 given the different agency structures, and the  
20 different job titles and responsibilities. But, I  
21 think this is so important, the issues that we're  
22 talking about, that it doesn't seem like it's  
23 insurmountable. Does it seem insurmountable to you?

24 ASSISTANT COMMISSIONER CRESCIULLO: Not  
25 insurmountable, but a restructuring of two very large

agencies would take some time, and it's something we can consider.

DEPUTY COMMISSIONER VARGAS: I would also add to that that our Facilities team over at ACS is merging the Department of Health, and Head Start and our own kind of tools around facilities into one too. And we'll be doing training with our providers to just help them get a better sense of, you know, some of these physical issues. And health and safety issues just from a different lens. Many of our providers are people who are incredible with children, and love children and want to just run the best possible center. And so part of the work that we're doing is helping them, you know, recognize, you know, when a water stain--when, you know, when we need to call in a water stain because it might become mold and that's hazardous for--for children's health. So we'll be--that's the goal of that work.

CHAIRPERSON JOHNSON: What about having a case management system where both agencies at least know we're both focused on the same sites right now? You know, these are the--these are the sites that are potentially problematic.

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DEPUTY COMMISSIONER VARGAS: [off mic] Do  
you want to take that question?

ASSISTANT COMMISSIONER CRESCIULLO: Sure.  
[coughs] So let me tell you what we have now. We  
have a central database in Health called the Child  
Care Activity Tracking System, CCATS. We have given  
ACS sort of a first step towards sharing information  
in as much real time as we can get it. So that ACS  
staff have access to our inspectional activities.  
We're rebuilding CCATS, and we'll be re-launching it  
over the summer. So that you will actually be able  
to see scheduling in the system, which ACS will have-  
-

CHAIRPERSON JOHNSON: [interposing] Well,  
that's good.

ASSISTANT COMMISSIONER CRESCIULLO: --some  
access to.

CHAIRPERSON JOHNSON: That sounds good.

ASSISTANT COMMISSIONER CRESCIULLO: Yeah,  
but again, it's something that would have to happen  
in time to get real coordination. And if the goal is  
to have us all at the site as sort of a team approach  
to each program, you know, that's something that  
takes a lot of thought, and a lot of policy

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development. And actually a lot of resources because  
the overall time on site will increase dramatically.

CHAIRPERSON JOHNSON: Of the  
approximately 2,700 child care programs, which  
includes Head Start, how many are unlicensed? 2,700  
programs. How many are currently unlicensed?

ASSISTANT COMMISSIONER CRESCIULLO: Are  
you referring to expired in renewal? We don't  
consider--

CHAIRPERSON JOHNSON: [interposing] Of  
each.

ASSISTANT COMMISSIONER CRESCIULLO: --we  
don't consider--

CHAIRPERSON JOHNSON: How many are  
unlicensed and how many are operating with an expired  
licensed.

ASSISTANT COMMISSIONER CRESCIULLO: So we  
have no unlicensed programs

CHAIRPERSON JOHNSON: You have zero?

ASSISTANT COMMISSIONER CRESCIULLO: An  
unlicensed--an unlicensed program and renewal program  
would be closed within one week once we become aware  
of them. So it's really expired in renewal, which is  
an operating status.

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CHAIRPERSON JOHNSON: How many are  
expired?

ASSISTANT COMMISSIONER CRESCIULLO:  
Across the city 130 sites.

CHAIRPERSON JOHNSON: There are 130 sites  
that have expired status?

ASSISTANT COMMISSIONER CRESCIULLO:  
Expired status, yes.

CHAIRPERSON JOHNSON: And what's the time  
frame on trying to check on them and--

ASSISTANT COMMISSIONER CRESCIULLO:  
[interposing] So we--we work with these programs  
weekly. They're--they have a case manager. We reach  
out to them weekly letting them know what's  
outstanding in order for them to become renewed. If  
it's an outstanding inspection say from fire where  
you're in constant contact with the Fire Department,  
letting them know we need the inspection condition.  
If it's a follow up, that a follow up is needed. We  
work hand-in-hand with them during the renewal. If  
anything arises during the renewal process that  
indicates that it's a risk to children, we would  
suspend.

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CHAIRPERSON JOHNSON: Okay. I have some questions on site control. How many are ACS controlled?

DEPUTY COMMISSIONER VARGAS: How many Head Start or how many throughout the system?

CHAIRPERSON JOHNSON: Oh, throughout the whole system.

[pause, background comments]

DEPUTY COMMISSIONER VARGAS: Fifty.

CHAIRPERSON JOHNSON: How many are NYCHA controlled?

DEPUTY COMMISSIONER VARGAS: I want to say--

FEMALE SPEAKER: [off mic] Sixty-six.

[sic]

DEPUTY COMMISSIONER VARGAS: Yeah, I was going to say 68. So it's 67 or 68 are NYCHA controlled.

CHAIRPERSON JOHNSON: 50 ACS and 67 or 68 are NYCHA controlled. How many are controlled by agencies other than ACS or NYCHA and which agencies would those be?

DEPUTY COMMISSIONER VARGAS: The other-- the, you know, the balance and, you know, I don't



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1 have this data in front of me. I wasn't prepared to  
2 discuss site control. I apologize but my assumption  
3 would be that the balance are--are managed by the  
4 providers. So the providers hold the lease, or the  
5 providers, you know, the parent agency owns the  
6 building.  
7

8 CHAIRPERSON JOHNSON: If ACS discovers  
9 any violations, do you all have the authority to  
10 issue a notice of violation.

11 ASSISTANT COMMISSIONER CRESCIULLO: Not,  
12 that's the jurisdiction of Health.

13 CHAIRPERSON JOHNSON: So when that  
14 happens, when ACS realizes that there is an on site,  
15 you all immediately contact the Department of Health  
16 and Mental Hygiene?

17 DEPUTY COMMISSIONER VARGAS: We certainly  
18 do. I mean we, you know--

19 CHAIRPERSON JOHNSON: [interposing] And  
20 then how quickly does DOHMH come out?

21 ASSISTANT COMMISSIONER CRESCIULLO: So  
22 we--we handle any reports external from the Bureau of  
23 violations or critical incidents or serious incidents  
24 as a complaint. Our response time on complaints for  
25 the most serious is under 24 hours. We normally go

out that same time, and on the criticals, it is 24  
hours.

CHAIRPERSON JOHNSON: So some advocates  
have been suggesting that ACS and the City make a  
capital investment into a facilities fund so that  
funding would be available for maintenance and  
repairs to child care programs. What do you think of  
that idea?

DEPUTY COMMISSIONER VARGAS: You know, I  
think--I think it's a great idea. I think we, you  
know, we can certainly-- Anything that helps to  
improve the physical spaces that our children are in  
for a large part of the day I think is, you know, is  
helpful and important.

CHAIRPERSON JOHNSON: Can we anticipate  
seeing anything along those lines in the agency's  
Executive Budget next month?

DEPUTY COMMISSIONER VARGAS: I can't say.

CHAIRPERSON JOHNSON: Can you check with  
the Commissioner and see if she's requesting any  
money for that type of work?

DEPUTY COMMISSIONER VARGAS: I can  
certainly speak with the Commissioner, yes.

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CHAIRPERSON JOHNSON: Thank you. And  
would it be possible to also have a facilities fund  
for repairs needed in centers located in NYCHA  
developments?

DEPUTY COMMISSIONER VARGAS: Would it be  
possible or is it--?

CHAIRPERSON JOHNSON: Is it doable if you  
guys came up with the money?

DEPUTY COMMISSIONER VARGAS: Or with a  
wish list, you know, what's on our wish list?

CHAIRPERSON JOHNSON: No, I mean if--if--  
if the money was there if you all determined and the  
city determined you wanted to put money towards this,  
can you spend that money in a NYCHA development, or  
does it have to go through NYCHA:

DEPUTY COMMISSIONER VARGAS: I think it  
would have to go--I think it would have to go through  
NYCHA. NYCHA has site control in some of our  
developments. I think in others we actually lease  
from NYCHA. So it really depends on what that  
arrangement is. You know, that being said, we have  
some programs in NYCHA facilities that are absolutely  
beautiful. And then we have programs in NYCHA  
facilities that could use some help.

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CHAIRPERSON JOHNSON: So I'm going to turn it back over to Council Member Levin, and I appreciate again the time you've been--that you've spent with us today. Do you feel like things are in a good state right now? Are you happy with the way things are?

DEPUTY COMMISSIONER VARGAS: I am. I feel like we are moving in the right direction. There is still, I think, a lot of work to be done. But I am really happy with the level of collaboration and communication that I've been a part of, and that I've been able to engage in. ACS with--not only with ACS but, you know, across the city there's been just a high level of collaboration with DOHMH, FDNY, DOI, the Mayor's Office. So it feels like we're moving. I certainly feel like we're moving in the right direction. You know, I'm thinking about your comment, "Are you happy?" There's--there's always something, you know, not to be--not to be happy about because we run a very large system. However, I think that, you know, there are definitely small victories. And I look forward to--I look forward to along with my team and the commissioner and this administration really just creating the highest quality Early

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1 Childhood system that this country has to offer. I  
2 believe New York City can do that. I believe that we  
3 are well position to do that, and I look forward to  
4 being a part of that.  
5

6 CHAIRPERSON JOHNSON: I appreciate that.  
7 I 'm not going to re-read the statement that was  
8 provided on behalf of Ann Linehan from the  
9 Administration of Children and Families at HHS, but--  
10 And I'm sure while I was away, Council Member Levin  
11 really dug down deeper into these things. But the  
12 six deficiencies are awful. They're really bad. ACS  
13 did not make sure premises were kept free from pests,  
14 unsafe heating systems, pollutants, and hazardous  
15 materials and conditions. ACS did not ensure indoor  
16 and outdoor premises were cleaned daily, and kept  
17 free of undesirable and hazardous conditions ACS did  
18 not ensure that children were left alone or  
19 unsupervised while in their care. ACS did not  
20 consult with or involve with the mental health  
21 professional, delegate program, or parents or staff  
22 and to implement program practices to respond to  
23 mental health concerns. ACS failed to establish and  
24 effective reporting system to control program  
25 quality, and maintain program accountability. And

1 the last deficiency, ACS did not have an effective  
2 ongoing monitoring system to identify delegate  
3 agencies that were not in compliance with federal  
4 requirements. I mean I would not be happy if I got  
5 those six deficiencies. I would say like we have  
6 challenges. We can do--and again, I wasn't here  
7 earlier. I'm not saying you didn't say this, we can  
8 do a hell of a lot better. There are infants to  
9 five-year-olds that are involved here. There are  
10 pests, rodents, mold, allegations of abuse. People  
11 being left unattended. Not having monitoring programs  
12 in place. Not having met-

14 DEPUTY COMMISSIONER VARGAS:

15 [interposing] We did.

16 CHAIRPERSON JOHNSON: I mean I would say,  
17 look like there have been failures. We have failed  
18 in some way. We're embarrassed by this report.  
19 We're going to do a lot better, and by April 25th,  
20 this is all going to be cleaned up, and we're going  
21 to ensure that every young child is in a center where  
22 none of this is happening. So, it's not all on you.  
23 This is a very large system, but this is a very--  
24 And I'm not saying you're not taking it seriously.  
25 You're clearly taking it very seriously. I

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1 understand you're all working hard. But this is  
2 very, very, very, very, very, very, very serious. And  
3 it would just be helpful to just say we have to  
4 improve. We have to do a lot better.

5  
6 DEPUTY COMMISSIONER VARGAS: ACS takes  
7 the health and safety of children extremely  
8 seriously.

9 CHAIRPERSON JOHNSON: [interposing] I  
10 know you do.

11 DEPUTY COMMISSIONER VARGAS: The report  
12 was not taken lightly at all.

13 CHAIRPERSON JOHNSON: [interposing] I  
14 know that. I know that.

15 DEPUTY COMMISSIONER VARGAS: So I  
16 apologize if I've give you that, you know--

17 CHAIRPERSON JOHNSON: [interposing] No, I  
18 know that. I'm just saying this is a big deal.

19 DEPUTY COMMISSIONER VARGAS: No. It  
20 absolutely is a big deal, and again I am hopeful  
21 given the work that's been done, given the systems  
22 that we are working hard to get in place in a timely  
23 manner so that we don't just fix what was cited in  
24 the report. But we address the issues across our  
25 system that led to some of those issues.

CHAIRPERSON JOHNSON: That you, Deputy Commissioner for being here. Thank you.

CHAIRPERSON LEVIN: Deputy Commissioner, I just have one further question, and then a short statement. Can you explain to us at this point what type of parental engagement ACS has done around the issues that have been found in the report, and what's the plan for parental engagement moving forward?

DEPUTY COMMISSIONER VARGAS: Absolutely. So we have had several meetings of the Policy Council, which is comprised of parents, and we have talked openly around the report. We have really had a very high level of transparency with our parents about the deficiencies that were cited in the report. And we've engaged them in helping us think about, you know, what's working and what's not working in their programs, and how we can be of further assistance.

CHAIRPERSON LEVIN: And that's--that's going to continue on? The plan for that is-- How frequent are those meetings? And then if you could also maybe just explain a little bit about on the ground the parents that are, you know, throughout the system, what type of engagement are they? Are they aware that this is out there? You know, is there--is



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there some type of communication back and forth  
between ACS, the delegate agencies, and the parents  
that have their children in those centers?

DEPUTY COMMISSIONER VARGAS: We do have a  
parent here who can speak to that if you're  
interested in hearing from her perspective. I will  
tell you that the--the council meets pretty regularly  
as per the regulations in Head Start.

CHAIRPERSON LEVIN: Can you give us just  
the membership of the council

DEPUTY COMMISSIONER VARGAS: So, there  
are--how many members.

FEMALE SPEAKER: [off mic] There are 28  
members and they meet twice a month.

DEPUTY COMMISSIONER VARGAS: 28 member  
and they meet twice a month.

CHAIRPERSON LEVIN: [off mic] And then  
they [on mic] And then they--excuse me--and then they  
communicate with parents throughout the system, their  
delegate--

DEPUTY COMMISSIONER VARGAS:  
[interposing] So they--they are representing, you  
know, programs and areas across the city.

CHAIRPERSON LEVIN: [interposing] Okay.

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DEPUTY COMMISSIONER VARGAS: They then  
take the information that we're sharing, and bring it  
back to their communities.

CHAIRPERSON LEVIN: Okay. And then  
lastly, Deputy Commissioner and Assistant  
Commissioner, thank you very much for your time and  
to your staff for their time. I guess you've been  
here testifying for close to three hours. So my  
last--my last statement is that I really want to re-  
emphasize that as part of the FY16 Budget, there are  
going to be--there have to be costs associated with  
this. And if we're going to be doing new systems,  
new tracking systems, new follow-up systems, new  
monitoring systems, site improvements all of those  
things. In order to address all of these areas of  
non-compliance and deficiency, there is going to have  
to be associated costs. And those costs have to be  
reflected in the Executive Budget. So I--I do not  
want to come back and have a hearing in May where--  
Because I asked--I asked the Commissioner a couple of  
weeks ago about it. And she said well, it's not here  
in the Preliminary Budget. There must--we must cost  
this out and figure out what it's going to cost in  
the next fiscal year and the fiscal year after that.

1 Because we don't want to be in a position where ACS  
2 is not--is not re-granted this as a super grantee.  
3 This is the backbone of our Early Education system  
4 here in New York City. This is the--this is the gold  
5 standard. This is the--this is the first and the  
6 best that we have in this country, and ACS is the  
7 largest provider of it in the country. And it is--it  
8 is very important that--that we get to a position  
9 where we're on a good footing. That's going to cost  
10 money, and that needs to be reflected in the FY16  
11 Budget. So if you could please take that back to the  
12 Commissioner that we would like to see how that--  
13 what's the plan for that. We want to see--we want to  
14 hear what OMB has to say on the matter, but it needs  
15 to be reflected in the Executive Budget so that we're  
16 not negotiating some things in a non-transparent way  
17 in late June as we adopt the FY16 Budget.

19 CHAIRPERSON JOHNSON: I second that.

20 CHAIRPERSON LEVIN: Thank you very much.  
21 Thank you to this panel for your time.

22 DEPUTY COMMISSIONER VARGAS: Thank you.

23 ASSISTANT COMMISSIONER CRESCIULLO: Thank  
24 you.

25 CHAIRPERSON LEVIN: Thank you.

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[pause]

SERGEANT-A-ARMS: Okay, so we should go?

CHAIRPERSON LEVIN: Yes. Okay, folks.

[gavel]

CHAIRPERSON LEVIN: We're going to call--  
we have two panels and we're going to call the first  
panel. Kim Milton from DC 1707 and Head Start Local  
90--Local 95. She signed in twice, and Kimberly Barry  
from 1707 as well. So you're up from 1707.

[pause, background noise, pause]

CHAIRPERSON LEVIN: And if you could just  
state your name for the record. Okay.

[pause]

CHAIRPERSON LEVIN: Do you have the  
microphone.

KIMBERLY BARRY: Yes, it's on. Good  
afternoon. My name is Kimberly Barry. I'm the  
Director of Day Care Head Start from District Council  
1707. It is my pleasure to be here today. I thank  
the General Welfare Committee and the Chair Stephen  
Levin and all the members of the committee to allow  
me to testify. Before I began--before I began my  
career with the Union, I worked in child care for 20  
years in Public Bay--Public Bay Center Day Care, and

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I remain active to the belief that our children are--  
our children, our programs and the program employees  
must receive the funding that makes our programs  
naturally superior. Our members, particularly those  
in Head Start understand the necessities of health  
and safety protocols for our children. Health and  
safety protocols protect our children, and help  
prepare them to become better students. And  
conscientious adults who will train their own  
children appropriately. While we take all programs  
deficiencies serious, we all agree there is never  
enough training and supervision for all employees and  
management. In meeting with our members on site or  
at the Union, members are encouraged to follow  
accepted protocols, attend in-service trainings, and  
not ignore or look the other way if a violation could  
occur. Our members understand they are mandated  
reports. Our Union Education Department has numerous  
classes, health and safety year-long to assist  
members including health and safety at workplace;  
health and safety for custodians; safety and food  
handling for cooks; and attend our course over two  
days on OSHA general industry training. These

classes are well attended and instruction and current  
and experienced.

One of the concerns the Union has related  
to health and safety is the retention of employees  
with credentials who have drifted to other programs  
and public because the safety and benefit levels have  
artificially lower due to Early Learn. Which has not  
transformed center based child care, as it was  
advertised back in 2012 by the Bloomberg  
Administration. These members are currently working  
on expired contracts. Head Start employees must  
remain vigilant regarding any signs of physical and  
mental about, malnourishment and other indications  
that a child is not being treated with care that we  
all expect. Head Start Employees Local 95, Day Care  
Employees Local 205 and our District Council are  
united to efforts to ensure that our children are  
safe and healthy. Anything else is disserving to all  
New Yorkers. Thank you.

CHAIRPERSON LEVIN: Thank you very much  
for your testimony. Thank you for your work.

KIMBERLY BARRY: Thank you.

KIM MILTON: [off mic] Good afternoon.

CHAIRPERSON LEVIN: Sorry.

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KIM MILTON: [on mic] My name is Kim Milton. I'm a member at large from Head Start Local 95, Executive Board. I'm speaking on behalf of my President Carol Cox who was unable to attend today because of her responsibilities as a head teacher at her center. Carol Cox wanted me to tell you that she has the utmost respect for the work of the General Welfare Committee and the Committee of Health. Local 95 will work with joint committees to answer any questions and to assist the committee in its work. Head Start is a national premier comprehensive child care program that sets the standards for our children in communities and more than a generation.

Before I joined Head Start--excuse me--before I joined the Head Start staff, I was a parent volunteer. I was encouraged to go to college. I began my career in Head Start as bus matron then as a family worker. I have been a Family Service Worker, and Assistant Health Coordinator the past three years. I received my Bachelor's of Science from Toro College particularly funded by Local, now defunded, Education Fund. It is important for the center based child care workers to have the opportunity to achieve success by having a ladder available for them. A

1 significant part of my responsibility includes  
2 scrutinizing details or children's physicals,  
3 immunizations, and dental examinations. I also check  
4 the Central Immunization Registry to verify if the  
5 applications are correct for the safety of the  
6 students and other children in the center. If  
7 there's any discrepancy noted by the physician or the  
8 dentist, I am obligated to refer to the nurse  
9 consultant or to the mental health--nurse consultant  
10 or physician, and the mental health issues as well.  
11 I have also been trained to give certain medications  
12 with the consent of parents and the physician. And  
13 if necessary, I help provide rescue medication as  
14 well.  
15

16 Local 95 has always been supportive to  
17 improvement in the administration of Head Start  
18 programs because it--because as it protects our  
19 children and families, it also protects our members.  
20 We emphasize to our members that they must be in  
21 compliance with all the health and safety regulations  
22 coming from either from the New York City  
23 Administration of Children Services; the New York  
24 City Department of Health and Mental Hygiene's  
25 Article 47 from the Head Start Performance Standards.



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1 We inform our members to attend any in-service  
2 training regarding education, health and safety, and  
3 others matters because it's in the interest of our  
4 children. And it protects our members as well as it  
5 accepts protocol as follow. From safety evaluation-  
6 evacuation plans to tooth brushing once daily, our  
7 members follow the requested-- Oh, excuse. We  
8 perform home visits, teach children to wash hands,  
9 frequently and properly. We are aware and prepared  
10 for health issues like asthma, allergies, diabetes  
11 and obesity and other illness that requires our  
12 attention with the parent's permission. I love my  
13 job. I love the children I service, and as a Head  
14 Start employee, we remain alert to the needs of all  
15 the children and their parents. And now what we all  
16 need is the city to negotiate a fair and equitable  
17 contract with us. Thank you.

19 CHAIRPERSON LEVIN: Thank you--thank you  
20 very much Ms. Milton and Ms. Barry for your  
21 testimony. Have you seen in your--in the centers  
22 that you work with a noticeable change in the last  
23 several weeks due to this report? And is there a  
24 change on the ground that you're seeing that's  
25 noticeable?

KIMBERLY BARRY: There are some changes, but it's not like major changes like it should be from seeing that report.

CHAIRPERSON LEVIN: Uh-huh.

KIMBERLY BARRY: So some of the things that were in those reports, then you should have seen a--we should have seen a drastic change--

CHAIRPERSON LEVIN: [interposing] Uh-huh.

KIMBERLY BARRY: --but we haven't seen that.

CHAIRPERSON LEVIN: So far not yet. Well, I look forward to it. I think it's very important to have your voice as part of this conversation moving forward because you're at the front lines with the children in the centers. Honestly, looking through the report myself, you know, it struck me that there's a lot of--there's a lot of rules to comply. There's a lot of federal rules, state rules, city rules, and they're all there for the benefit of our children. But it's--there's--there's a lot of liability that goes into running a Head Start center and day care or Early Care and Education center, and so a lot of responsibility. And so, I appreciate very much you taking on that

responsibility on behalf of the children of New York  
City.

KIM MILTON: Thank you.

KIMBERLY BARRY: Thank you. Thank you  
again for having us.

CHAIRPERSON LEVIN: Thank you. Have a  
wonderful day. Thank you for your testimony. And  
the last testimony Stephanie Gendell, Citizens  
Committee for Children.

[pause]

STEPHANIE GENDELL: Good afternoon. I'm  
Stephanie Gendell the Associate Executive Director at  
Citizen's Committee for Children. I don't actually  
have written testimony because I wasn't planning to  
testify today. But I have often testify, and while I  
was listening to the hearing today, I started to be  
very concerned that we're at great jeopardy of losing  
our Head Start contract going forward. And that  
there's a lot of work we need to do to ensure that  
that doesn't happen. That would be the loss of \$129  
million going into the City's Early Childhood system  
and into Early Learn. And so, I just wanted to  
mention a couple of things. One is that like you all  
were very concerned that there was no money put in to

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1 address any of these issues into the Preliminary  
2 Budget, and hope to see something in the Executive  
3 Budget that pertains both to staff within ACS and all  
4 the new redesign and monitoring. Which all sounded  
5 fine, but there's no additional money going into  
6 their budget for any of that so far. And I also  
7 think it speaks to issues around the Early Learn  
8 rate. The Head Start programs in the audit are all  
9 part of Early Learn. They actually receive a higher  
10 rate than the other Early Learn programs that are not  
11 Head Start. And we know from the prior Early Learn  
12 hearing that the rate has been insufficient, and that  
13 one of the items that providers talked about was that  
14 they're having trouble with their facilities in terms  
15 of maintenance and repair. When you see that in the  
16 Head Start Report, we've thought about whether  
17 there's a way to have some sort of capital investment  
18 of a facilities fund to help with the facilities  
19 cost. I agree with Council Member Cabrera that we  
20 don't want to let landlords off the hook. But that  
21 we need to figure out a way to do things  
22 expeditiously. And if the landlord is not going to  
23 be expeditious, then we need to make sure that we  
24 have the money to front the repairs. And that also  
25

pertains to NYCHA. I'm not sure we should be depending on NYCHA for the repairs, and maybe there's a way the City can make the NYCHA repair fund. Because I worry that we'll be waiting for a very long time for the NYCHA repairs. And in addition I think the other Early Learn rate issues play out here. We know, as you've heard--I mean as our staff who haven't had a contract since 2006. There's salary parity issues. There's training issues. And I think we need to really take a chance and look at the Executive Budget, and ensure that it really addresses all of these issues. And then the last issue I wanted to mention is the issue around the space, and how they remediate the issues around the spatial dimensions. Because if the issue is that there's too many children for the space, I'm not sure besides-- I know the issue around the cubby size, but besides them taking out the cubbies, I'm worrying about losing capacity to serve children. And so to make sure that however they decide to re-mediate the space, that we don't lose capacity to serve children even if they need to be served elsewhere to be more safe. And finally, sorry. The last thing I wanted to mention is that I think it's great that ACS is

1 talking about putting into place all sorts of new  
2 measures and oversight and looking at child abuse,  
3 you know, child abuse and neglect and how that they  
4 track all of that. It's very focused on Head Start  
5 because of the Head Start Audit, which makes sense,  
6 but they also have the whole rest of the Early Learn  
7 system. And I want to make sure that they don't  
8 focus so much attention on the Head Start that we  
9 have even less oversight on the rest of Early Learn,  
10 which is actually the larger part of this system.  
11 And we would want them to treat the whole thing  
12 systemically because we want health and safety in the  
13 entire Early Learn system. Thanks.

14  
15 CHAIRPERSON LEVIN: Thank you. You know,  
16 hopefully, you know if they're--if they're developing  
17 the systems to respond to immediate deficiencies that  
18 they have a time frame on imposed by OHS, hopefully  
19 they could use then those systems to--to cover all of  
20 the Early Learn systems in terms of non-Head Start  
21 center-based programs and non-center-based programs.

22 STEPHANIE GENDELL: Yeah, I think they  
23 have to watch that because as they described the  
24 structure, the new--there is going to be a new person  
25 overseeing Head Start.

1

2

CHAIRPERSON LEVIN: Right.

3

4

STEPHANIE GENDELL: And so, if all of the  
monitoring is under that person then we'll lose it  
for sure. [sic]

6

7

8

9

10

11

12

13

CHAIRPERSON LEVIN: Right, right. So  
that's something that we need to make sure that we  
ensure. And again, that may cost money in terms of  
additional staff lines or head count. But, that's  
something that--that has to be reflected as part of  
the 16 Budget. So certainly we'll bring that up with  
the Commissioner at the Executive Budget hearing.  
But as always, thank you, Stephanie--

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STEPHANIE GENDELL: [interposing] No  
problem.

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CHAIRPERSON LEVIN: --for your insight  
and testimony. Corey, do you have any questions for  
Stephanie?

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CHAIRPERSON JOHNSON: No. Thank you for  
being here and for being so patient for waiting to  
the end. Your collaboration and partnership with us  
is incredibly important, and a lot of the work that  
we do, we really rely upon outside experts, outside  
organizations and providers to really fill in the

blanks sometimes. So I really appreciate the fact  
that you're here.

STEPHANIE GENDELL: Thank you.

CHAIRPERSON LEVIN: And I want to thank  
my friend and Chairman, Steve Levin for carrying on  
the bulk of this hearing today while I was across the  
street. Thank you very much.

CHAIRPERSON LEVIN: And thank you to my  
friend and colleague Corey Johnson for co-chairing  
the hearing. Thank you all very much for being here,  
and at 1:41 p.m. this hearing is adjourned

[gavel]



COMMITTEE ON GENERAL WELFARE JOINTLY  
WITH THE COMMITTEE ON HEALTH

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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 17, 2015