CITY COUNCIL
CITY OF NEW YORK

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TRANSCRIPT OF THE MINUTES

Of the

COMMITTEE ON AGING

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HELD AT: Council Chambers - City Hall

B E F O R E: MARGARET S. CHIN

Chairperson

COUNCIL MEMBERS: Diana Ayala

Chaim M. Deutsch Ruben Diaz, Sr. Daniel Dromm Mathieu Eugene Deborah L. Rose Mark Treyger Paul A. Vallone

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

Donna Corrado, Commissioner
New York City Department for the Aging

Sasha Fishman Associate Commissioner Budget and Fiscal Operations New York City Department for the Aging

Fran Winter, Deputy Commissioner for Programs New York City Department for the Aging

Andrea Ciaffani (sp?), Live On New York

Molly Krakowski, Jewish Association for Services for the Aged, JASA

Rachel McCullough, Director, Organizing at Jews for Racial and Economic Justice, and Campaign Director, New York Caring Majority

Bobbie Sackman, NY Caring Majority Coalition and Radical Age Movement

Chris Widelo, Associate State Director, AARP NY

Rachel Sherrows, Associate Director City Meals on Wheels

Ahsia Badi, Senior Policy Associate New York Academy of Medicine

Katie Foley, Director of Public Affairs Self-Help Community Services

Liza Schwartzwald, United Neighborhood Houses

Kevin Douglas, United Neighborhood Houses

Zakia Haywood, Director of Community Services New York Road Runners

Barbara Brown, New York Road Runners Strider & Senior

Tanya Krupat, Osborne Association

Pakhi Kane, Deputy Executive Director Stanley Isaac's Neighborhood Center

Jeanette Estima, Senior Policy Analyst, FPWA

Jo-Ann Yoo, Executive Director Asiana-American Federation

Lachman Kalasuri, India Home

Suzanne Howell (sic), Visiting Neighbors

Bonnie Lumagui, Director, Cooperative Village NORC Educational Alliance

Miranda Hoffner, Assistant Director of Accessibility Lincoln Center for the Performing Arts

Allen Pothas, Brightwood Tower Tenant Association

Ariel Sarvansky, Advocacy and Policy Advisor UJA Federation of New York

Mohammad Razvi, Executive Director and CEO Council of People's Organization

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[sound check]

3 SERGEANT-AT-ARMS: Quiet please.

CHAIRPERSON CHIN: Good morning.

AUDIENCE: Good morning.

CHAIRPERSON CHIN: I'm Council Member Margaret Chin, Chair of the Committee on Aging. [applause] No, no clapping. [laughs] If you love what we say, just do this okay. Well, welcome to the Fiscal 2019 Preliminary Budget hearing for the Committee on Aging. I am once again honored to be serving as Chair of the Committee on Aging and excited to continue building on the accomplishments of the Committee over the last four years. Today, we will hear testimony from the Department for the Aging, also referred to as DFTA, on its proposed budget for Fiscal Year 2019. General agency operations within its proposed \$344.1 million budget and performance indicators for Aging Services within the fiscal 2018 Preliminary Mayor's Management Report. Seniors are the fastest growing segment of New York City's population. There are 1.6 million adults age 60 and over in New York City, more than 90% of the city's residents. By 2030, the number of seniors will grow by nearly 50% and 1 in every 5 New

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Yorkers will be a senior. Last year I was proud to proclaim 2018 the Year of the Senior, and what a year it was. [applause]

SERGEANT-AT-ARMS: Keep it down, please.

CHAIRPERSON CHIN: The Council worked

tirelessly with the Administration to baseline nearly \$23 million into DFTA's Budget including \$10 million to right size senior center' budget; \$6.5 million to address the Home Care Waitlist; \$4 million for caregiver services; and \$1.2 million each for senior case management and weekend meals. Overall since Fiscal Year 2014, DFTA's budget has grown by 26%, but we're not done yet. I believe that every year should be the year of the senior [cheers] until all of our seniors are living in dignity, security and health. DFTA's Fiscal Year 2019 Proposed Budget is less than 1% of the city's total budget It is my goal over the next four years to increase DFTA's Budget at least 1% of the city's total budget. We need to recognize that our seniors build New York's neighborhoods. They taught our children, maintained our buildings, drove our trains, and cared for us in times of need. They are just as important to the vibrancy of our city as our youth, and we have a responsibility to

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ensure seniors live out their golden years in dignity, security and health, and that is why I'm committed to making every year the year of the senior. The city must increase its investment for senior services and ensure that no seniors is on waiting lists for vital DFTA programs such as case management and homecare. The Department for the Aging's Fiscal 2019 Preliminary Budget totals approximately \$344.1 million, a decrease of \$21.7 million or 6% when compared to the Fiscal 2018 Adopted Budget. Nearly all of the decreased can be attributed to the absence of the one-time Council funding for senior services in Fiscal 2019. Council allocated \$31.6 million to DFTA in Fiscal 2018 or 9% of the agency's overall Fiscal 2018 The majority of these Council initiatives Budget. supported core DFTA services that are inadequately funded, such as senior center services and programming, elder abuse support, quality social adult daycares and Naturally Occurring Retirement Communities. At every budget meeting over the last four years I have advocated that the Administration baseline Council funding for core services that DFTA provides instead of relying on Council funding year

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over year to fill the gaps in the agency's budget. This year is no different, and I call on DFTA to make this Year of the Senior memorable by working with us to dramatically increase baselined funding for core DFTA services. This Fiscal Year I'm also calling for the Administration to ensure that we have Universal Free Lunch for seniors. We are a city that must fight poverty and hunger. That is so overlooked among our oldest-elder population. Every senior center had the right to ask for donations to supplement food costs and additional programs. However, when seniors go to the centers from a delicious meal, often times the first thing they seen a volunteer giving out tickets for the meal, and simultaneously asking for a donation. The centers that rely on this funding to provide nutritious meal it can be seen coercive and seniors on a tight budget should never coerced to pay for a needed meal. must also meet to add \$10 million over two years to achieve a full \$20 million model budget for senior centers. This will allow adequate funding for senior center space, transportation programming and staffing by Fiscal 2021. It will also set the bar for the next neighborhood senior center RFP, Request for Proposal,

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which I hope will include additional new needs to funding immigrant centers that the Council currently supports. Finally, I want to ensure that social adult daycares in particular those not supported with city funding are clean, regularly inspected and not competing unfairly with our neighborhood senior centers. Before I invite the Commission to testify, I'd like thank the Committee staff for their work in preparing for this hearing. We have Daniel Kroop the Finance Analyst; Dohini Sompura, our Unit Head Counsel and Counsel Caitlin Fahey, and Policy Analyst Emily Rooney and now we will have out counsel swear in the panel and welcome Commissioner Corrado.

LEGAL COUNSEL: Can you raise your right hands. Do you swear to tell the truth, the whole truth and nothing but the truth and answer honestly to Council Members' questions?

COMMISSIONER CORRADO: Yes I do.

LEGAL COUNSEL: Thank you.

COMMISSIONER CORRADO: Good morning

Chairperson Chin, members of the Aging Committee, our senior constituents. [laughter] I am Donna Corrado,

Commissioner of the New York City Department for the Aging, and I am joined this morning by Sasha Fishman

our Associate Commissioner for Budget and Fiscal
Operations and Fran Winter, Deputy Commissioner for
Programs. Thank you for this opportunity to discuss
DFTA's Preliminary Budget for Fiscal Year 19. The
Fiscal Year 19 Preliminary Budget projects \$344
million in funding, which includes allocations of
\$147 million to support senior centers; \$38 million
for home delivered meals; \$37 million for case
management; \$30 million to support home care for
homebound seniors who are not Medicaid eligible; \$7
million for NORC programs, and \$8 million for
caregiver services. The Administration has made a
major commitment to aging services including an
increase of more than 50% in baselined city tax levy
funding between the last year of the prior
administration and this fiscal Preliminary Budget.
That's an overall increase of \$78 million in
baselined funding. So, we listened and heeded your
call for more baselined funding in the
Administration's Budget. This increase benefits most
of DFTA's programs including senior centers, elder
about abuse programs, caregivers and homecare
services. This year, the Administration increased
funding for home sharing by \$1.4 million. This

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program matches adult guests in need of housing with homeowners or leaseholders with space to spare. This year's budget builds on the significant increases in last year's Fiscal Year 18 some of which includes the following: \$7.3 million was provided to stabilize the staffing and case management programs. We are happy to report as a result retention of case management has increased. More competitive salaries have helped reduce high turnover rates, improve service delivery, and ensured continuity and quality of care. The vacancy rate has declined from 8% in January 2017 to about 4% in January 2018. More onethird of all case management staff or 38% have held their positions for three years or longer. That's an infusion-through and infusion of \$1.5 million, DFTA funded case management agencies hired 11 new case managers and six supervisors to address the case management waitlist. \$1.5 million was awarded to expand multi-disciplinary teams, which are comprised of professionals from diverse disciplines including representation from DA's offices, the NYPD, APS, medical centers, financial institutions, and a myriad of community based organizations who jointly provide comprehensive assessments and consultations on abuse

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This expansion from the program's current two borough, two borough portfolio of Manhattan and Brooklyn to all five boroughs is vastly strengthening the city's ability to address complex elder abuse matters in a coordinated fashion. This is essential to resolving interrelated social, financial, criminal and legal challenges found in the majority of our cases. \$225,000 was allocated for PROTECT, which stands for Providing Options to Elderly Clients Together. This program developed by DFTA and Weill Cornell Medical Center mitigates the impact of depression and anxiety among elder abuse victims. Trained professionals help victims address their mental health issues and to cope-help them cope with abusive situations. In coordination with the Mayor's Office to Combat Domestic Violence, DFTA will work with our providers to identify and serve these victims of elderly abuse. In recognition of the contributions and challenges of unpaid caregivers, the Administration designated \$4 million to provide respite and supplemental services. This allocation will augment funding received by DFTA from the Federal Title III-E Family Caregiver Support Program. I would be remiss not to mention our appreciation for

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the ongoing support of the City Council. This year the Council has contributed over \$30 million to DFTA programs. This level of support makes a significant difference in the quality and quantity of services that we and our community-base providers provide. is through this Administration's commitment coupled by the Council's support that DFTA has been able to meet the demands and the needs of an ever-growing population of older New Yorkers. Over the past year, DFTA has made investments to become even more efficient in our contracting and procurement. These improvements include streamlining our business processes and creating additional staff lines to manage the volume of procurement and budget actions that we encounter each year. As a result of building our increased capacity DFTA has made significant improvements. At this time of year last year, DFTA had only 11% of discretionary contracts registered. Today, 64% of discretionary awards with submitted budgets have had their contracts registered. This represents an approximate 500% improvement from Fiscal Year 17, and we continue to improve and hope to achieve an even higher rate next year. excited to announce that in line with the

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Administration's broader vision of promoting fairness and equity, the \$10 million in baselined funds made available in Fiscal Year 18, a significant investment in the DFTA senior center network will increase to \$20 million by Fiscal Year 21. These funds were designated to help create parity in our senior center budgets and allow for enhanced staffing and programming. DFTA is distributing the funds in accordance with a model budget developed with input from OMB, from our network of providers and other stakeholders. The key goal of the model budget has been to achieve a more equitable distribution of available funds among centers by creating a floor whereby centers will receive funding to address fixed costs associated with staffing and programming that exists regardless of a center's size. The model budget reflects that a requisite amount of funds are needed to provide threshold levels of quality programming and to pay competitive wages to attract and retain high quality staff. As mentioned earlier, the administration increased funding for home sharing by \$1.4 million. Plans are already underway to expand the successful home sharing program thereby increasing the number of affordable housing options

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in the city, particularly those serving older adults. The program matches individuals needing an available place to live or guests with homeowners or leaseholders who have extra space in their home. They're known as hosts. One of the two parties involved either the guest or the host must be a senior in order to participate. There is also an extensive screening and vetting process done by social workers, which is essential to the success of these matches. In addition to negotiating the terms of the living arrangements, social workers conduct follow up and provide ongoing support. increased funding, DFTA hopes to ramp up the program with the goal of 4,000 placements over the next five years. For the remainder of the testimony, I'd like to take the opportunity to briefly update the committee on a number of DFTA's ongoing initiatives. Local Law 97 of 2016 required DFTA to conduct a survey of unpaid caregivers. DFTA worked closely with city and state agencies with AARP and other nonprofits assisting caregivers. The survey findings and recommendations were provided to the City Council as required under the law. These recommendations reflected the top identified needs, which include

leveraging and expanding awareness about existing
resources for caregivers; encouraging New Yorkers to
identify as caregivers; educating caregivers about
best practices and techniques for providing care;
helping caregivers access affordable transportation;
supporting legislation that benefits unpaid
caregivers; continuing a working group focused on
caregiving; and communicating affordable housing
efforts and opportunities for caregivers. Local Law
9 of 2015 required all social adult daycare programs
operated within New Yorkers to register with DFTA.
As of March 13, 2018, there are 348 active registered
programs. Of these, 143 are in Brooklyn, 131 are in
Queens, 33 are in Manhattan, 26 are in the Bronx, and
15 are in Staten Island. In addition, I am pleased
to share with the committee that in partnership
NYSOFA, OMIG, which is the Office of Medicaid
Inspector General, DOHMH and the New York State Adult
Day Services Association, DFTA is launching a series
of trainings from competence and quality units of the
managed long-term care companies operating in New
York City, and it's these MLTCs, as we call them,
that really contract with the Social Adult Day
Program network in New York City So it's important

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that they're educated and they're trained about what those expectations are, and the first training will take place this afternoon, and we will discuss our role, DFTA's role as the designated Social Adult Daycare Ombuds Office followed by presentations from the other participating agencies. So, this is a full court press on how to educate the MLTCs and to hold the Social Adult Day Programs accountable in New York City. Age-Friendly New York City, as you know, brings together the public and private sectors to develop initiatives to ensure New York City is a city for all ages. With our partners at the New York Academy of Medicine, DFTA has coordinated the work of Age-Friendly New York City over the past ten years. In 2017, the initiative was updated to include nearly 90 programs spanning health and social services, housing, public spaces and transportation, public safety and civic and community participation. have brought copies of the update Age-Friendly New York City Report with us this morning to share with you. As you know, Mayor Bill de Blasio and First Lady McCray released Thrive New York City, a mental health roadmap for all. Among its suit of groundbreaking initiatives were two programs that

iocused on geriatric mental health. One endeavored
to embed mental health practitioners in 25 senior
centers across the city, and the other combat social
isolation among older adults. This spring geriatric
mental health services are available in all of the 25
centers as promised; four in the Bronx, six in
Manhattan, six in Queens, 8 in Brooklyn and one in
Staten Island. Each month more than 1,500 seniors
avail themselves of these services. The Friendly
Visiting Program, which was designed to combat social
isolation matches volunteers with homebound seniors
for weekly visits. Since the program's inception,
volunteers have made 17,174 visits to senior in their
home, and have spent a total of 27,200 hours with
seniors. Thank you for this opportunity to testify
about DFTA's Preliminary Budget. I look forward to
continuing the partnership with the City Council and
serving older New Yorker, and I am pleased to answer
any questions you have, and I welcome the other
committee members that have joined us. Thank you.

Commissioner, and I wanted to welcome Council Member
Vallone from Queens, Council Member Rose from Staten
Island, Council Member Dromm from Queens, and Council

CHAIRPERSON CHIN: Thank you,

Member Deutsch from Brooklyn. Welcome. I'm going to
start off with a couple of questions, and then I'm
going to defer to my colleagues to ask some
questions, too. So, Commissioner, as I said earlier
in my opening remarks that, you know, DFTA's Budget
is still less than 1%, if you drill it down, actually
it's less than half of 1%. So, you know, we commend
the \$23 million that the Council has successfully
negotiated with the Administration to baseline last
year, but what is DFTA's long-term strategy in
addressing the needs of seniors in the city,
especially, which programs would the agency
prioritize to expand or to create? Do you believe
seniors' needs are met by DFTA's current service
portfolio, and what type of expansion does DFTA need
to keep pace with the growing population of seniors
in New York? This is more for you to really
projecting ahead, and see what we can continue to
work on in the next couple of years.

COMMISSIONER CORRADO: Sure. The

Administration has invested \$78 million since this

Administration alone. So, that's a significant

increase and unlike the Department of Sanitation and

other city services, these are non-mandated services,

some specifics--

but then then again, that doesn't mean that they're
not essential services to help seniors remain in the
community. So, long-term care services and supports
have really grown over the last four years, and
they're commensurate with the changing demographics.
So, naturally, as the demographic shifts, our long-
term plans and goals are to strengthen, to deliver
much more efficiently and in a better way, and always
expend the services that are available, and whatever
it is that we do because we do have a wide array of
long-term care services and supports in the DFTA
Portfolio. Through our network of community-based
organizations that provide these services will
continue to grow and expand, and more importantly to
modernize to meet the needs of a growing population.
We need to build capacity to serve a growing
population, but within the \$78 million that we have
now, we're able to provide a tremendous array of
services, and we've expanded it every year in this
administration, and we continue to do that good work
CHAIRPERSON CHIN: But, can you give me

COMMISSIONER CORRADO: [interposing]
There ae some specifics.

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CHAIRPERSON CHIN: --like with Council's ensuring some of the new program because when we met and you were talking--

COMMISSIONER CORRADO: [interposing] For-

COMMISSIONER CORRADO: [interposing]
Right.

CHAIRPERSON CHIN: --about the needs for more senior centers that serves immigrant population-

COMMISSIONER CORRADO: Right.

CHAIRPERSON CHIN: --and they are really—it's all over the city.

COMMISSIONER CORRADO: It's all over the city, and as you know, not only does—does the model senior center infusion of \$20 million by Fiscal Year 21 go a long way in strengthening the current portfolio that we have, and our—our ability to serve seniors more effectively, and I thinks that the—the key word here. Every senior center now has a fighting chance, and an opportunity to provide excellent services, and we couldn't say that a few years ago necessarily because there was such

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disparity in the levels of funding. So, that is going to go a long way, and also in Fiscal Year 2021, as you mentioned in your testimony, that we will be RFP'ing for senior centers. So, part of the planning process is to look at where our senior center portfolio currently exists because it really hasn't been looked at in a good 20 years to see where the changing demographics are, where those immigrant groups are now that are overflowing at our senior centers, where we need to build capacity. For example, in some areas where there's been a change, and there's been some gentrification, and now the demographic is essentially a younger population, but still there's remnants of older planning efforts where there's five and six senior centers within a five-block radius. So, we're going to have to really examine that, reshuffle the deck. We have an extensive senior center portfolio. As you know, we have 249 senior centers throughout the city, and we will look at the changing demographics and when we issue the RFP, it very well-very well may be that we will change those community districts and those catchment areas for those senior centers, but that's an extensive planning process. We're looking to the

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future and that's an ongoing effort that we've already started through our Planning Department.

CHAIRPERSON CHIN: Well, just one point when you were talking about in your testimony, you do mention that there are over 300 social adult daycares that registered with the Department for the Aging.

COMMISSIONER CORRADO: Yes.

CHAIRPERSON CHIN: There's more social adult daycare program than senior centers, and in some way that shows there's such a great need out there, and so we need to really--

COMMISSIONER CORRADO: [interposing]
Right.

CHAIRPERSON CHIN: --fill that senior center or portfolio.

Social Adult Daycare Network, the 368 social adult daycares that have been registered through the Local Law that was established, and we do now have a registry. So, we know where they all are. Most of them are concentrated in Brooklyn and in Queens. They're now registered so we know who they are. Where there's a complaint we can go out and we can do whatever investigation that we have the authority to

do. It-it's sort of representing the need in one
area, and then the market demand in the other,
because, as you know, these are not DFTA funded or
DFTA supervised centers. These are centers that are
out on the private market, many of which are somehow
associated with health facilities in their-in their
neighborhoods or managed long-term companies, and
whatever. They have their own network. So, as long
as there's a demand for these services, these social
adult daycares will proliferate. Now, I'm under the
assumption that there is a tremendous need for social
adult daycare. Do we need 368? I don't know, but I
know that we do need quality programs, and the
constituents of a social adult daycare program may or
may not be the same population as our senior centers.
So, there is a little bit of overlap, and we realize
that there's some competition, but in all reality,
what it should be is that people who qualify for
social adult day program with significant cognitive
and physical impairments should go to a social adult
daycare of a quality program, and really that's
addressed and—and equipped to meet the needs of the
constituents that they're serving. So, we're making
a concerted effort at the Department for the Aging to

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educate the market providers of social adult daycare, and the market meaning MLTCs payers of social adult daycare services, what exactly constitutes the appropriate clientele, what they should expect, and what they should be purchasing in terms of quality care. So, many of these market entrepreneurs that come and want to open social adult daycare centers, they call up DFTA, and they come in and—and we meet with them because we feel it's our responsibility, at least to speak with them, see what their intentions are. And I can tell you from our experience, many of them have never even worked with a senior—

CHAIRPERSON CHIN: Yes.

COMMISSIONER CORRADO: --and to me that's pretty deplorable, and we do everything we can to discourage them from opening up something which they have no competence. We don't-can't necessarily control that, but we do our best, but the whole education piece around working with the MLTCs themselves and working with the social adult daycare programs if they're amenable to speaking to us, we would educate them. We do educate them, the first of which—the biggest initiative is actually this afternoon where we're brining together all the state

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and city agencies and we're educating them about what they should expect when they purchase that service.

CHAIRPERSON CHIN: I'm glad to hear that, and I hope that we can work with the State to really strengthen the monitoring. They have to crack down on some of these who are really abusing government funding.

COMMISSIONER CORRADO: Uh-hm.

CHAIRPERSON CHIN: So, we want to make sure that our seniors are getting the best care and not taken advantage of. Just a follow-up question on the—the model budget. We were very excited last year that the Administration that they have baselined \$10 million to support our senior centers and when we went around to the senior center, everyone was excited about that, but we need to get that money out the door. So, how many contracts have DFTA already modified, approved in terms of the contract amendments so that centers can get the money right away?

COMMISSIONER CORRADO: Okay, so, that's a very good point, and I have with me our Budget

Director Sasha Fishman, who's been working around the clock for the last several weeks to actually notify

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all or our providers out of the 249 senior centers all by 26 center will be getting an additional infusion of money. So, we're in the process. They've been notified of the funding amount and there's some budgetary work and contractual work that needs to get done. They've been notified. They have a deadline I believe in another two weeks of which that they have to return their proposals back to DFTA and we'll be sitting down with every single one of them and processing those amendments in a very timely So, we're already in the process of-of getting those amendments through, and we're committed to actually spending the whole \$10 million in baseline funding, and I'm going to stick my neck out here because we may have to work a lot of overtime in order to do that because it is late in the fiscal year. We acknowledge that. So, we have a lot of work to do, but we've already started.

CHAIRPERSON CHIN: Yeah, because for the next year we wanted to baseline more than \$10 million.

COMMISSIONER CORRADO: Uh-hm.

CHAIRPERSON CHIN: We're going to be pushing for \$15 million. So, you got of like work it

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out there so that you can get that money out the door quicker, too. So, part of the—the baselined programs that are included in the model budget, can you let us know like what baseline programs are going to be included in the—the model budget. For instance, what type of program will—well, like a midsize center with about \$40,000 of programming.

COMMISSIONER CORRADO: [interposing] Okay, so what we've done is how we've looked at the model senior center budget is we've looked at two very important areas, and one of them is the staffing component, which we call personnel, and then there's the programming aspect of it. So, there's additional monies. For example amidst-we've moved through the model budget for example, and this is a little bit of budget speak. The \$40,000 for programming will be-go towards hiring consultants for example or hiring an activities director that would actually provide the programming, and much more robust programming that they currently have, and it's important that—that DFTA look at and approve what type of program because we want more evidence based programming that are actually going to provide the health outcomes that we need them to provide, and also staffing.

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know, for example, in a large senior center you need an executive director or a program manager whatever the sponsoring agency should call it, but somebody who's there full time overseeing the programs, andand as and administrator, you need a social worker, you need somebody who's going to maintain the senior center and-and do some housekeeping and-and you need somebody who's over operations and over the programming aspect of it. So, the model senior center budget takes into account the two main things, it's programming and staffing. So, we've established what that floor looks like. So, you know, are we going to say you have to pay your executive director such and such? No, we're not going to do that, but if you're underpaying -- a senior center is grossly underpaying their program manager, we're going to look at their proposal and say we think that you should be paying them more in order for you to retain and-and attract qualified staff. So, we do-we are setting the floor, which we hope will not become the ceiling because we have much work to do. senior centers budget, model budget does not look at, and I think this is very important because it's not that we omitted it on purpose or we are not thinking

that front as well.

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that it needs to be addressed because it does and it will, and the next phase of the model senior center is the whole food service component, and that's being looked at as a separate exercise. So, you'll be hearing more of that. We've—we contracted with our consultants to look at the food service component. We know that there's much more work to be done on

CHAIRPERSON CHIN: so, right now the model budget does not take into consideration of food costs and the rent?

commissioner corrado: Well, it does take into consideration the rent. So, I think that there's—it's—it's a little difficult to explain without getting into the nitty gritty of the formula that we use to come up with the model senior center, but there is a mechanism currently in place to deal with the rent escalations. So, that remains the same, but when we looked at the model senior center, as I said, we focused primarily on programming and staffing, and the bottom line includes rent as it always did. How we—we just didn't set an average rent because you can't do that. That's variable in all centers, and as you know, some centers don't pay

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any rent because they're in church basements for example, and they just pay utilities, and some pay exorbitant rents. So, we have to take that out for the exercise of coming up with what the adequate staffing and programming should be for a senior center. That's does not mean that net—that the—the current rent for a particular center wasn't added back in at the end, and if there is any escalations around rent, OMB and DFTA currently has a system in place and that will be ongoing.

CHAIRPERSON CHIN: Okay. We've also been joined by Council Member Eugene. I am going to have other Council Members ask some questions, and I can come back. Council Member Vallone, you're next.

COUNCIL MEMBER VALLONE: Thank you, Madam Chair or Mighty Margaret [laughter] because she fights for our seniors. Good morning, Commissioner.

COMMISSIONER CORRADO: Good morning.

council Member Vallone: Good morning everyone out there, advocates and our seniors. You know you're in the right committee when Council Member Rose and I were looking for a light to read the reports. [laughter] So, first I went for

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that.

glasses, now I'm looking for extra light. So, it'sit's quickly approaching.

COMMISSIONER CORRADO: You need it.

COUNCIL MEMBER VALLONE: We do, we do.

So, you know, what I-I have—there's so many—there's so many topics, and there's so much that DFTA is responsible for. The Council Members and the Chair we were kind of trying to break down the different topics, but since you were just joking about the senior center budgets why don't we just continue with

COMMISSIONER CORRADO: Okay.

COUNCIL MEMBER VALLONE: So, you had said there was—you broke down the senior centers budget

(1) staffing, (2) programming and there was \$40,000 allocated?

COMMISSIONER CORRADO: No, that—I didn't say that. I guess that \$40,000 figure came from one of our demonstrations of how we arrived at what the proper staffing level is for a particular category of senior center, and it was just—

COUNCIL MEMBER VALLONE: [interposing]

And that's an increase based on last year?

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2 COMMISSIONER CORRADO: It was

illustrative, for illustrative purposes only. that's now what we were saying, but what we are saying is—is we did an extensive analysis, DFTA staff along with OMB. It was a year-long process where we actually looked at what is the adequate staffing level that we can achieve the right outcomes? So we wanted to know what is the-what is the baseline funding of which we can say a senior center has enough money to provide X number of-X amount of programming so that we can get the proper health outcomes. So I think that was just for illustrative purposes. It may be different for a very small center, and all of these model senior centers budget numbers well, came-came about by the average daily participants of the center. So, not necessarily the number of people who come and actually eat lunch because that's not necessarily how many people attend a center each day and participate in activities, but the average daily attendance. So, we have to have some way to stratify the level of funding based on some centers have 450 people some have 50. So--

COUNCIL MEMBER VALLONE: [interposing]
When was the last time a report like that was done?

1	COMMITTEE ON AGING 34
2	COMMISSIONER CORRADO: A report like
3	what?
4	COUNCIL MEMBER VALLONE: Well, you just
5	stated about reviewing the socials about the senior
6	centers and looking at the programming and the costs
7	and you said it was a very, very long time since the
8	last time
9	COMMISSIONER CORRADO: [interposing]
LO	Right.
L1	COUNCIL MEMBER VALLONE:DFTA looked at
L2	the roll. (sic)
L3	COMMISSIONER CORRADO: So, we just-we
L4	finished up that process about two weeks ago, and we
L5	_
L6	COUNCIL MEMBER VALLONE: And prior to
L7	that, when was the last time you saw that? (sic)
L8	COMMISSIONER CORRADO: Alright, it was-it
L 9	was not in my lifetime. That I know of. I don't
20	know.
21	COUNCIL MEMBER VALLONE: Well, I mean
22	it's part of our-part of our-we're happy that it was
23	done last week.

COMMISSIONER CORRADO: It was done. I really cannot say. I do not know. I don't know.

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COUNCIL MEMBER VALLONE: Well, that's what I'd like to see the difference.

COMMISSIONER CORRADO: I mean I think it's a moot point because we're doing it now, and we're moving forward. We know.

COUNCIL MEMBER VALLONE: [interposing] So we have those results?

know this anecdotally. We know this for a fact that there was a tremendous disparity in the level of funding, but yet our expectations for a center whether they were funded for \$200,000 or whether they were funded for a million dollars, we have the same expectations in terms of outcomes. So, to me and to everyone, that is a very unfair expectation. So, we're just trying to right that wrong and move forward. So, this is a about equity and fairness. If we tell you we need you to run a senior center, and we don't fund you to do that, then—and we hold you accountable, well, that's pretty unfair, and everybody sort of recognizes that.

COUNCIL MEMBER VALLONE: Alright, so what's the next step in the process? Do we have the results on that?

How does that happen?

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COMMISSIONER CORRADO: Yes, we do and we
have \$10 million in baselined funding, which we'll be
distributing. That funding was made available pre-
conclusion in Fiscal Year 18. So, we will be
distributing that \$10 million now. We have the level
of funding from every single center that's eligible
for his funding.
COUNCIL MEMBER VALLONE: [interposing]

centers, all by 26 centers will be getting additional monies for programming and staffing, and it will be phased in until 2021. So, we're in the process.

We've distributed those allocation amounts to every single eligible center at this point in time, and we're working with them to register those contracts and to process those budgets. So, that's—that's—COUNCIL MEMBER VALLONE: So, there's \$10

COMMISSIONER CORRADO: Right.

million that was allocated to do that?

COUNCIL MEMBER VALLONE: Is that

23 sufficient?

COMMISSIONER CORRADO: And \$10 million allocated over this current fiscal year, next fiscal

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year and then through 2021 we'll be phasing in all \$20 million. So, we're in the process of doing that right now.

COUNCIL MEMBER VALLONE: And have we altered the formula for the different reimbursements, because obviously some of the senior centers are getting much more than, and how do we come to the conclusion as to what's some of--

COMMISSIONER CORRADO: [interposing] So, so we differentiated that based on five categories, and as I said, it's based on average daily attendance. So, how many senior centers and then we have historical data to back that up. We looked actuals, how many people actually attended the center over the past couple of years. So we looked at that and we took out whatever anomalies and may be accounting for that as well because some centers for example shut down for extensive renovations. didn't want to penalize any particular center for some-some anomaly, and -and we base it on that. So, it's stratified, but there's not a significant difference between what it costs to run a center for example for 100 people than it does for 400 other than raw food and disposables because there are

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certain fixed costs that—that the center needs to

expand regardless of the number of people that are

actually going to the program, but we did—we did—

COUNCIL MEMBER VALLONE: [interposing] Is there a way for the centers to—to—based on that new determination if they feel it's adequate, is there a way for them to appeal or to apply for additional funding?

and then I would probably go to bat with this because I was extensively involved as was the OMB staff and very high level staff. We—we can—I feel—I have great confidence in the formulas that we used and that it was a fair and equitable process. So, you know, appealing we will certainly go back and check our formulas, and make sure didn't make a mistake, but I have 100% confidence that we did everything that we can to distribute these funds in the most fair and equitable way, and I was personally involved with that process so—

COUNCIL MEMBER VALLONE: The—the overhead costs of running a center that's not included in this.

COMMISSIONER CORRADO: It is included.

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COUNCIL MEMBER VALLONE: It is included.

So is that--?

not necessarily rent and utilities, but it is included in the fact that—that it was added back. So, it's a sort of a—a way—a way to account for those OTPS expenses, but the—the occupancy expenses were taken out for the purpose of examining what it costs to run a center in terms of adequate programming and adequate staffing. So, there is currently a process in place that looks at escalations in leases for example and occupancy costs. So, that has not changed. We've continued to do that.

council Member Vallone: So, the-DFTA seems to be-continuing being handled-more and more tings to do from other agencies. So, we're always advocating to make sure you're at full staff. Are you comfortable about your staffing levels? Is it 100% or you still have some vacancies?

COMMISSIONER CORRADO: So, we have a very low vacancy rate at Department for the Aging. So, we're—we're comfortable with that. We were able to get several staffing lines in our Procurement Division last year, which we've hired up, and we've

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seen a significant improvement in our procurement

processes, and the time that it takes for us to

process contracts. So, we thank you for you

advocacy. We've—we've staffed up in that regard, and

6 we're-we're doing a much better job as a result.

COUNCIL MEMBER VALLONE: Are we asking for any new staff to be put into DFTA?

COMMISSIONER CORRADO: Not at this time.

should. We're—we're always there to—to help. I think just the reality of what is on you on you plate, I think just as the Council is ramping up to increase our staff, I think DFTA should be doing the same. I would be happy to go to bat for you on that. I think as one of the—and I'll end with this and turn it over back to Council Members—with case management it's always an annual battle as to what a particular case manager can hold, handle and how many cases are they handling per staffer. So, do we have the ratio now of where our case management list is, what the wait list is and how many are being handled per staff.

COMMISSIONER CORRADO: So, we have established what we think the correct staffing ratio

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should be. So, we try to maintain a caseload of 65 cases per case manager, and the infusion of-of up to now \$7.3 million to add additional case mangers has significantly reduced the-the-the caseload and significantly reduced the waitlist for services, but as you know, as you reduce waitlists more people come on to the-to the roster. So, as the demographics change, it's always a dynamic process. So, we've added money in the-in the past several years to attract staff. So those-those salaries were increased, and we done a tremendous job, as I mentioned in the testimony of retaining staff. we're seeing the fruits of that labor right now. Currently, we have a thousand people on the waitlist. Actually, 1,100 but since we're still staffing up, and once we-we're fully staffed, 100% staffed, we can reduce that waitlist by another 100 or so. So, I would say that there's a real waitlist of 1,000 people on-for-on the waitlist for case management. We have a very small homecare waitlist of 200 people at this current time, and I think that that may level off and it's not so much a matter of not having the hours to distribute. It's more of an indication of our-of the home care agencies' inability to hire

long-term care staff to actually do the work, and I
think that's a challenge. It's something that's-
that's not just New York City's problem. It's a-it's
a nationwide problem, and we're now working with the
State Office for the Aging, and our other
constituents in the home care arena to address those
issues. But that is going to involve some huge
policy changes in terms of the home care industry,
and the long-term care workforce that needs to be
addressed.

COUNCIL MEMBER VALLONE: And the workforce having to deal with a borough and city as large as ours. I know in the outer boroughs we've had many complaints--

COMMISSIONER CORRADO: [interposing] Yes.

COUNCIL MEMBER VALLONE: --of staff
having difficult reaching the outer boroughs to get
there. So, that's a challenge. So, of the 1,100 on
the waitlist, what does that do with our ratio?

COMMISSIONER CORRADO: Well, actually we've been--

COUNCIL MEMBER VALLONE: [interposing]

Have we kept the 65 to 1?

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maintaining the 65 to 1 for the most part, and that really—that's how a waitlist is created, right? So, if we can bring it—if we bring it up to 70 or 75 we won't have any waitlist, but we prefer not to do that. That doesn't mean people on the waitlist are not being served. They're being served in—in other ways, but they have not had a home assessment.

That's what that means when we have somebody on the waitlist. So, if they need a home delivered meal, they request it. We—we give that provisionally, and if we can help them access other services vis-à-vis the phone, we do that as well.

COUNCIL MEMBER VALLONE: And the amount of time each person receives with their case manager, has that stayed the same? So, if someone needs an hour or two hours or three hours to go through the file, is that--

COMMISSIONER CORRADO: [interposing] So that's a—so that's variable, and it's all—it's all about managing your case mix and the acuity of the client and the level of care that they need. So, that's really the responsibility of the case management supervisory staff, and we've done I think

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a much better job of working with our case management programs to tell them what our expectation is, and tell them what we expect of them, and how better they can manage their caseloads, and how they can manage their case licks-case mix, and we've also given them some tools that they can automate some of their monitoring processes. So, we work very closely with our case management programs. Some of them know this that they're excellent. So of them are newer at geriatric case management, and they don't necessarily have those processes in place. As you know, from the disinvestment in case management prior to this administration over many, many years, that level of excellence really declined, and we're trying to get back to a place where we provide excellent care in our case management programs, that our staff are well paid, they're well trained, and they're well supported, and it's all about to me supervision, supervision, supervision.

COUNCIL MEMBER VALLONE: And it sounds

like you said you're going to be revamping up and

getting some additional, which is good because

Council Member Chin and some of the Council Members

have interagency bills pending tom make sure that

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DFTA is aware. So many of the senior issues that
come up through subsequent committees that aren't
before you, are dealing with a senior, and they
always ask has DFTA been notified? Is there a case
open, and more often than not it's a no. So, we have
bills pending

COMMISSIONER CORRADO: [interposing] So, so, welcome--

COUNCIL MEMBER VALLONE: --to make sure that you get notice of all of these files that are being altered?

COMMISSIONER CORRADO: Okay.

COUNCIL MEMBER VALLONE: And with that, I'd just to hand--

COMMISSIONER CORRADO: [interposing] So, that—that—that is a big part of our Age—Friendly Initiative, as I mentioned. So, part of that Age—Friendly Initiative in the past year or two has been around coordinating all of the city agency around their—their aging initiatives. So, that's meeting and—and Deputy Commissioner Karen Resnick coordinated this on behalf of DFTA along with Jeannine Ventura meeting with every single city agency, and—and looking at how they're working with seniors and

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really bringing all of those efforts together and coordinated so that everybody knows what everyone else is doing, and out of that there were 90 initiatives that focused on seniors and we've—we've actually have that manual and—and we've published what those initiatives are, and we'll be happy to share them with you and the Council.

COUNCIL MEMBER VALLONE: Thank you Commissioner. Thank you, Madam Chair.

 $\label{eq:CHAIRPERSON CHIN: Council Member Rose} % \begin{center} \begin{center$ 

COUNCIL MEMBER ROSE: Thank you, Madam

Chair and good morning everyone. When I-I was doing

a little research and I do mean just a little, I

found an interesting fact that Staten Island having—

is no surprise that it's Staten Island, right?

COMMISSIONER CORRADO: No.

COUNCIL MEMBER ROSE: But Staten Island has the fastest growth of senior population in New York City from the years 2000 to 2010 with 85-year-olds plus being the fastest growing group in the city. And so, that causes me great concern because I believe that then exponentially increases the—the need for caregiver services, and so, caregiver

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services as we know because of their age, they will more than likely need in-place, you know, caregivers working for them to help run errands, and helping with legal and financial matters, and in November 2017, DFTA testified that they would amend ten contracts that you had—caregiver contracts that you have by January 2018. Have you been able to do that?

COMMISSIONER CORRADO: Yes. Thank you,
Council Member Rose for bringing up Staten Island,
and it's definitely a growing demographic.

COUNCIL MEMBER ROSE: [interposing] It seems be a recurring theme with me.

administration, we-we have not forgotten Staten
Island, and I'm happy to say when I looked at the
distribution of the senior center model budget
funding, Staten Island I believe is getting the
highest proportion because they were the lowest—had
the lowest level of funding per center. So, that,
you know, that will go a long way in supporting the
senior centers network on Staten Island. Now, the
infusion of \$4 million the Administration has for
caregiver services, which is—will be spent

1	COMMITTEE ON AGING 48
2	predominantly on support services and respite
3	services
4	COUNCIL MEMBER ROSE: Uh-hm.
5	COMMISSIONER CORRADO:will be
6	distributed and those contracts are in the process of
7	being amended as we speak. So, that \$4 million will
8	go a long way on Staten Island and the Caregiver
9	Program on Staten Island will get a significant
LO	increase in funding.
L1	COUNCIL MEMBER ROSE: Well, my concern
L2	isn't only Staten Island, Commissioner
L3	COMMISSIONER CORRADO: [interposing] So,
L 4	for
L5	COUNCIL MEMBER ROSE:could you tell me
L 6	like
L7	COMMISSIONER CORRADO: Sure.
L8	COUNCIL MEMBER ROSE:you have some
L9	sort of breakdown and why it costs—it would cost \$4
20	million to serve a projected number of 300 people?
21	COMMISSIONER CORRADO: So, it's not-it's
22	an additional \$4 million.
23	COUNCIL MEMBER ROSE: [interposing] It's

an additional.

COMMISSIONER CORRADO: So-so these
programs are already established caregiver programs.
This is an additional \$4 million to purchase
additional respite care, and support services. So,
the-the existing contracts for caregiver services
will e amended to the turn of \$4 million. So that's
on top of the—the funding that they're already
getting, and that's something that obviously there-
there are many things that came out of the-the survey
for unpaid caregivers, the biggest of which, the
biggest need was for respite services. So, in
recognition of that, \$4 million was added to the
budget this year so that we can expand respite
services, and also the need for education around
these services are actually available for caregivers
if they self-identify as caregivers. So, we're in
the process of working with an advertising company to
do a huge public outreach campaign.
COUNCIL MEMBER ROSE: So, that's-that's
one

COMMISSIONER CORRADO: Around one-
COUNCIL MEMBER ROSE: That was one of my

questions.

25 COMMISSIONER CORRADO: Uh-hm.

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COUNCIL MEMBER ROSE: How are we doing outreach to seniors? I mean, you know, conventional wisdom now is that we reach out on social media and online and everything--

COMMISSIONER CORRADO: Right.

a large segment of this population that is still a part of the digital divide. They are not computer savvy. How are we reaching them to tell them about these services that, you know, we've—we've brought online?

commissioner corrado: So, we're-we're going to be doing an extensive outreach campaign.

So, part of that is not only social media, but through more traditional media meaning radio, and television. One-one thing that we-we have come to learn is that everybody has a television certainly even caregivers they may not even have the time or energy to go online and-and surf the Internet necessarily especially if you're a caregiver and you're also working and have other things going on in your life. But most people do have a radio on, and they do have a television. So, we're going to be concentrating on that, and with the purpose of

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actually helping a person identify that they are even a caregiver. Yes, they may be a daughter. They may be a son, they may be a daughter-in-law, but they're also a caregiver in that senses. So, self-identifying as a caregiver realizing that you need help is a very big important piece of it, and once you realize that, and then you know that there's assistance out there, you will avail yourself of those services.

COUNCIL MEMBER ROSE: Do we still engage in old fashioned snail mail?

COMMISSIONER CORRADO: We engage in it less and less. Number one it's very expensive and number two, we do it. I mean we do that, but we're having this debate at DFTA because the snail mail thing I don't necessarily think is very effective. A lot of the snail mail goes into the snail garbage bins. [laughter]

COUNCIL MEMBER ROSE: Okay.

COMMISSIONER CORRADO: So, we're seeing less and less of that and as you know, I mean I-I get my snail mail everyday and a lot of junk mail, and most of it I don't even open up. So, we're trying to bombard people in every which way, and we find that

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with caregivers especially new caregivers that come up with—you know, there's an acute situation. They find themselves needing help. That's when they, you know, the light bulb goes off in one's head and says, oh, I need help. Let me find out what's available out there, and it's at the point at which they're actually in that situation. So, a lot of knowing this proactively and before you actually need it. People don't necessarily pay attention as much as when they actually need this.

just want to say yes for the most part most people don't pay attention to their—the mail that they get delivered to their home, but if I'm someone I might not have time to watch TV. I miss it on the commercial or the advertisement, and that if something is mailed to my home and I might put it aside for when I—I need it. I just think we shouldn't eliminate it, you know, in it's—in it's totality.

COMMISSIONER CORRADO: No, I agree. I agree. It's—it's in our toolbox, but it's not the primary method.

1	COMMITTEE ON AGING 53
2	COUNCIL MEMBER ROSE: Right, and could
3	you tell me how many people are actually served by
4	this—this number with the addition of the \$4 million,
5	how many people we're serving? [background comments
6	pause]
7	COMMISSIONER CORRADO: I'll get you that
8	number of what we've projected
9	COUNCIL MEMBER ROSE: Okay.
10	COMMISSIONER CORRADO:that we would
11	serve.
12	COUNCIL MEMBER ROSE: Well, you're all-
13	you're already serving a certain number of people.
14	COMMISSIONER CORRADO: [interposing] So,
15	we're already serving.
16	COUNCIL MEMBER ROSE: You are talking
17	about adding 300 people now. So, that
18	COMMISSIONER CORRADO: Currently.
19	COUNCIL MEMBER ROSE:number?
20	COMMISSIONER CORRADO: So, we're
21	currently serving 1,000 people.
22	COUNCIL MEMBER ROSE: So, um
23	COMMISSIONER CORRADO: [interposing] I'm
24	sorry. 11,000 people.

25 COUNCIL MEMBER ROSE: Eleven.

54 COMMITTEE ON AGING 1 2 COMMISSIONER CORRADO: Currently? 3 COUNCIL MEMBER ROSE: And-and that's-is 4 that just for respite care or--? 5 COMMISSIONER CORRADO: [interposing] That's without—that's without the \$4 million. So, in 6 7 our ten programs we're currently serving 11,000 people and I will get you the number that we 8 projected for the \$4 million. [background comments, 9 10 pausel 11 COUNCIL MEMBER ROSE: Okay. So, you are 12 serving only 92 people with the-for respite care 13 currently. 14 COMMISSIONER CORRADO: Yes. 15 COUNCIL MEMBER ROSE: And so we'll and that's--16 17 COMMISSIONER CORRADO: So, currently, so 18 that \$4 million will significantly up that number as well. So, we did-we did a projection. 19 COUNCIL MEMBER ROSE: [interposing] Why 20 is it costing three-\$4 million to serve 300 people, 21 2.2 yeah, 300 people? [background comments, pause] 23 COMMISSIONER CORRADO: So, I don't-I

don't know-[background comments, pause] Okay. So,

could we discuss this offline because I'm not sure

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the--

1	COMMITTEE ON AGING 55
2	where your numbers are coming from, but respite is a
3	very expensive service as you know.
4	COUNCIL MEMBER ROSE: Give-give me a
5	minute.
6	COMMISSIONER CORRADO: Okay.
7	CHAIRPERSON CHIN: Commissioner, what's
8	in the
9	COUNCIL MEMBER ROSE: [interposing] These
10	are actually the numbers that were testified to in
11	November. So, we're just giving them back to you.
12	COMMISSIONER CORRADO: Okay.
13	COUNCIL MEMBER ROSE: So, you need time
14	to get back to us with that?
15	COMMISSIONER CORRADO: So they may—those
16	numbers may have been revised. That's why I'm a
17	little bit confused.
18	COUNCIL MEMBER ROSE: Okay. So, you will
19	get back to
20	COMMISSIONER CORRADO: [interposing] So,
21	actually that—I'm being told the number went from 300
22	to 450.
23	COUNCIL MEMBER ROSE: For
24	COMMISSIONER CORRADO: For residents into

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2 COUNCIL MEMBER ROSE: --for the \$4 3 million now it was--

COMMISSIONER CORRADO: [interposing] No, no, that's prior. 450 people avail themselves of respite services for the traditional 10 programs of— of like—it's with the Caregiver Program. So, this is an additional \$4 million, and then we projected how much or how many people would be served, and that's just a projection for the \$4 million. That's the number that I need to get to you.

COUNCIL MEMBER ROSE: It's—okay, alright, please do, and we're seeing an uptick in—in homeless seniors. Is there any plan to have senior, homeless shelters for senior, senior based homeless shelters?

COMMISSIONER CORRADO: So, I'm going to defer to Fran Winter, our Deputy Commission for Operations who was the former—former Deputy Commissioner, Department of Homeless Services. So, she's been in close contact with the Department of Homeless Services working around remedies for seniors that are homeless.

DEPUTY COMMISSIONER WINTER: We-we do have on occasion and it may be growing, senior centers that serve homeless seniors, and they're

welcome to come in as any senior is. I think the
question is: Is the staff prepared to-to work with
them, to meet any special needs they have? Can we
integrate them into the life of the senior center?
So, what we do is we reach out to DHS, Department of
Homeless Services, their outreach teams because
frequently for these homeless seniors they may be
coming in from the street, they may be coming in from
shelter, but we recognize they may have some special
needs, and we create a partnership really with the
senior center staff as well as the DHS staff or their
providers. So they can come in, help train the staff
on how to work with homeless seniors, what the
services are for homeless seniors. It really is
individual to each center how to-how to address the
situation with the goal really I think of integrating
those seniors into the life of the senior center, and
reaching them and getting them services and hopefully
helping them find a way back into the community.

COUNCIL MEMBER ROSE: And I—I think that's—that's wonderful, but I'm talking about since there are—the number is growing. Will there be—are you talking about—are you projecting the need to have shelter specifically from homeless seniors pretty

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much as we have certain—there are certain populations that we provide shelters for, shelter living for. Are you looking in that direction in terms of the senior population?

DEPUTY COMMISSIONER WINTER: That's where—I mean that's part of the analysis that the Department of Homeless Services has to do to see how to serve all of their homeless people including the numbers of seniors. Traditionally, the number of homeless seniors is—is a fairly small amount in terms of overall homeless, and whether they are targeting them special population shelter, I'm just not sure at this point. I know they have a very large plan to address all of the homeless, and they have been, you know, opening shelters to do so. Whether they've created special population senior shelters I'm just not sure. We'd have to check.

COUNCIL MEMBER ROSE: So, this would be a conversation that you should have with DHS, and since seniors are your portfolio that this is something and—and unfortunately, we're seeing this trend.

We're seeing seniors who are losing their homes who are no longer going to stay in their homes and, you know, as—as this continues to happen, I think it's

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2	something,	it's a	a conversation	that	you	should	b∈
3	involved in	n with	DHS.				

DEPUTY COMMISSIONER WINTER: Yes, it would be great.

COUNCIL MEMBER ROSE: Madam Chair, I have taken a lot of time. Thank you.

CHAIRPERSON CHIN: Thank you for your questions, Council Member Rose. We've also been joined by Council Member Treyger from Brooklyn. Next up on the questions Council Member Deutsch.

COUNCIL MEMBER DEUTSCH: Thank you, Chair. Good morning, Commissioner.

COMMISSIONER CORRADO: Good morning.

COUNCIL MEMBER DEUTSCH: Thank you, Chair.

Good morning, Commissioner.

COMMISSIONER CORRADO: Good morning and good morning to everyone in the panel.

COUNCIL MEMBER DEUTSCH: So, first-first-my first question is what is the procedure for a senior to apply for DFTA's Home Sharing Program?

COMMISSIONER CORRADO: So, there is someone in the audience from New York Foundation for Senior Citizens, which is the agency that currently holds the contract for the Home Sharing Program that

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we will be expanding. They've doing this for 30 So, a senior-either somebody that has space to spare in their home or in their apartment, calls up and-and-they're-they go through an extensive vetting process, and they try to match them with-with someone who's requested that they enter into a home sharing situation, and that person they call is-is a So there's the leaseholder or the homeowner, and the-who is known as the host, and then there's a guest. So, they-they go through this extensive vetting process that's done by the sponsoring organization and a social worker-worker actually does matches and they have a whole formula and algorithm that they use, and they actually meet with both parties and they broker a situation and they-they do the actual matching. So, it's an extensive process. It's not something that—that they just call up and, you know, the next day they get a referral. They're integrally involved in that process, and that is we feel one of the reasons why they've been so successful at it. So, you know, knowing that they have a 30-year history of making successful matches, we decided that we would like to bring this program to this scale.

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COUNCIL MEMBER DEUTSCH: So, how does—how does a senior get the phone number or is that—like how does it work? I mean, I—I don't know about it.

COMMISSIONER CORRADO: They can avail it if they call 311 because that's the easiest way call either Department for the Aging or call 311, and ask for Home Sharing and they'll direct you to the agency.

COUNCIL MEMBER DEUTSCH: So, is it an application? Once you make a phone call, is that an application?

COMMISSIONER CORRADO: There's a whole vetting process that—that's really been established by the Home Sharing Program.

COUNCIL MEMBER DEUTSCH: So, does the application process determine if—if a senior is a veteran?

COMMISSIONER CORRADO: So, they—they do give preference to veterans and they work with veterans. So, it's a—as I said, you know, there's a—and extensive vetting process, an application process. They want to make sure that those—they match the right host with the right guest. So, it's based on many, many variables, and so there's an

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extensive process. In order to get that—that process started, they call 311 and they'll be referred to New York Foundation for Senior Citizens.

COUNCIL MEMBER DEUTSCH: So, does—do you also conduct and entitlement intake like when a senior calls up to track if a senior is entitlement—entitled to let's say SNAP.

COMMISSIONER CORRADO: So, New York

Foundation for Senior Citizens is also a case

management agency, and they're a geriatric provider

of very good reputation. So, I'm going to, you know,

take a leap here and say that they absolutely do

knowing that that is part of why they exist. So, I'm

going to say that yes they would also look at what

other services that the person can avail themselves.

COUNCIL MEMBER DEUTSCH: Because we do have like 1.5 million seniors. So, from the 1.5 million seniors, I do believe that there are those who are—may be entitled to SNAP who is not receiving these services?

COMMISSIONER CORRADO: So, what, and it—
on a separate note, there are a number of seniors who
we believe are eligible for SNAP and may not be
receiving them, and those are separate initiatives

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that we've done citywide to—to help people enroll in SNAP and we've been involved in that for a number of years. So, the number of people actually enrolled through all of these efforts has increased over the years, but yes, I'm sure there are a number of people who are eligible and not currently receiving that, and we've done extensive outreach and worked with the third-party providers to actually do some targeted outreach as well as work with HRA and community based providers to increase the number of SNAP enrollees over the years as a—as a separate initiative that has really to do with Home Share.

So, my-my=--Commissioner, my concern is that there should be like a one-stop shopping that when a senior calls up to let's say for a home sharing, right, so we need to work from the bottom up, you know, first to see if the senior is eligible for any city resources to check if the senior is a veteran because there are federal resources and more than half our city's veterans, 210,000 veterans are senior citizens who have federal resources that are available to them, and then once we figure out and get them the resources that they need since we do have many

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2	seniors who are eligible for SNAP, and is not
3	receiving those benefits. So, those—those same
4	seniors could come in for let's say a home sharing,
5	and then it's overlooked to see what are the
6	resources missing for that individual, and then we're
7	spending money. We're putting in funding, and when
8	that person may be entitled to-to SNAP. So, I
9	commend the Mayor because we have now the Department
10	of Veterans Services. It's a one-stop shopping.
11	This-this new program Vet Connect, which is like a
12	one-stop shopping for veterans. So, we need to come
13	up with a program
14	COMMISSIONER CORRADO: [interposing] So
15	we-
16	COUNCIL MEMBER DEUTSCH:for senior
17	citizens
18	COMMISSIONER CORRADO: [interposing] So,
19	we have a program.
20	COUNCIL MEMBER DEUTSCH -so this way we
21	could see exactly how we could help them all around.
22	COMMISSIONER CORRADO: So, I—I couldn't
23	agree with you more.
24	COUNCIL MEMBER DEUTSCH: Because right

now it seems like piecemeal, you know.

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COMMISSIONER CORRADO: It's not piecemeal. What we call it, it's-it's one-stop shop, but there's many doors you can come and enter, and you should always get -- and every senior should always get an assessment about what benefits and entitlements that they may be eligible for. of the efforts through our senior centers for example is that through the model budget, which we were talking about earlier, every center will have a social worker for example. If you don't have somebody to actually do the benefit screening, then it can't get done. So, now that we'll have the proper funding so that they can have the proper staffing, that should become an essential part of every senior that comes through the door of a senior center. At some point in time, at some point during the year, when they're either assessed or reassessed that they go through that benefit and entitlement screening. Whether they go to a senior center, whether they go through a case management program, which is part of the assessment process, a full benefit and entitlement screening. Whether they go to a senior fair, that that they can avail themselves of those services. Whether they call 311, whether they

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call New York Connects, which is the No Wrong Door, which is a whole-whole screening for-for long-term care services and supports. There's many ways that they can access a benefit and entitlement screening, and there's, you know, one stop. There's every stop as far as I'm concerned, and it becomes part of the practice in any or our DFTA funded programs that a person is assessed for whatever they might be entitled to. So, I agree with you and, you know, the more that we can impress upon our providers and our non-DFTA community partners that are not in the DFTA network necessarily, and we do extensive outreach through our Outreach Department at DFTA to infiltrate into the community and places where seniors are, but they might not necessarily be a DFTA program to do these types of entitlement and benefit screenings and-and we-it's full court press all the time to do it, and they should be able to access. If anybody needs an entitlement screening, the best place to call is 311, and we'll send them somewhere whether it's a one-stop and do have one-stop centers just for this purpose or for any senior they should be able to be fully screened for any thing that they may be available for. And they have computer programming,

everyday practice.

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York City. There's benefits. There's a program from NCOA, and so many different aging members organizations that have developed proper programing. Live On New York does an entitlement and benefit screening, enrolls people in SNAP, and we've been very successful. Can we do better? Yes, of course, but I agree with you that—that should be just part of

it would just be more streamlined. I just want to touch upon what my colleague mentioned, Council Member Rose. [coughs] So, we do have 63,000 homeless people in our city. So, we do keep track of, you know, homeless youth, and we have Councilman Treyger, our Education Chair, you have a little over 100,000 homeless youth. You have a little over 450 homeless veterans. We have a number I believe to homeless families, but is there a number for homeless seniors? I know you mentioned that there's not that many, but do we have a number?

COMMISSIONER CORRADO: Yes, CHS actually has that number and they track that, the number of homeless seniors. It's around—it—it generally hovers

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around 2,000. So, they may be, you know, seniors. That may not be their first category. They may be overlapped with veterans. They may be seniors that have some other identifier in addition to being a

COUNCIL MEMBER DEUTSCH: So, can you explain what homeless senior is? Is it a homeless senior who's in shelter? Is it a homeless senior who's on the street?

senior, but yes that's tracked by DHS, not by DFTA.

 $\label{eq:commissioner} \mbox{COMMISSIONER CORRADO: So, I'm going to} \\ \mbox{defer to you. All of the above.}$ 

DEPUTY COMMISSIONER WINTER: Yeah, DHS would have both. They have what they consider the shelter population, which is the 63,000 number, and I think they would have the information as to the age of those 63,000 and they also have the information on whose—who they're serving—who's living on the street, and they would probably have ages for those as well.

COUNCIL MEMBER DEUTSCH: So—so would you—from the 2,000 homeless, right. So what percentage would seniors who maybe have a mental illness, who just choose to live in the streets opposed to seniors who just can't afford rent, and are living on the street?

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DEPUTY COMMISSIONER WINTER: DHS would have that. They do have a client tracking database where they have information about their clients. So, I think we could—we could work with them to get you the information you're looking for.

COUNCIL MEMBER DEUTSCH: So, so those living on the streets that just can't afford rent, like where are they? I mean who's keeping track of those seniors.

DEPUTY COMMISSIONER WINTER: The mayor has recently over the last couple of years increased the street outreach effort.

COUNCIL MEMBER DEUTSCH: Are they living like, you know, under some train trestle? Are they under a boardwalk? I mean where are they?

mean, you'd really have to ask DHS because they have a very strong outreach team, set of teams that really done through providers throughout all the five boroughs, and they actually are in touch with those people living the street, and they generally have locations where those people tend to congregate.

They can move obviously, but they usually know where they find their—at least the people that are

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chronically out on the street, they're tracking them,
they're working with them to engage them to come in
off the streets. They have-

COUNCIL MEMBER DEUTSCH: [interposing] So, I just-I just want to say that if you have a homeless person who's living outside on the street because of mental illness, right, no one would want to take someone in who doesn't have the experience to deal with someone like that. But if you tell me there's a homeless senior who just couldn't afford to pay rent out on the street, tell me now. I will take someone in. So, I mean if you have let's say 2,000 homeless seniors, and we do a big push to-to 8.-the population just went up 8.6 million New Yorkers, we are New Yorkers. So, if you could tell us that there are 2,000 senior citizens who just couldn't afford rent that are living out on the street, those seniors will be housed any time. I think that at New Yorkers we would take them in. We would welcome them into our homes. So, I think we need to get the-the handle on how many homeless seniors that are out there who just couldn't afford to pay the rent, and reach out to New Yorkers and say listen, who can take--? You

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know, you're talking about a home sharing right? So, this is home sharing.

DEPUTY COMMISSIONER WINTER: Right.

COUNCIL MEMBER DEUTSCH: You tell me, I

would-

COMMISSIONER CORRADO: [interposing] So, part of the--

COUNCIL MEMBER DEUTSCH: --my wife would tell me in one second, let's take someone in.

COMMISSIONER CORRADO: So the part of the Home Sharing Proposal is to work with DHS, and—and serve exactly the constituents that you described.

COUNCIL MEMBER DEUTSCH: I mean I think it's--

COMMISSIONER CORRADO: [interposing]

Homeless seniors if they need it, they can become part of the Home Sharing Program, and they will be placed, and that will be priority.

COUNCIL MEMBER DEUTSCH: [interposing]

But that's—that's—Commissioner, that's not good

enough because we're using seniors as a number, and

we can't do that. So, I think that we should

identify who they are—

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COMMISSIONER CORRADO: [interposing] So,
I know--

COUNCIL MEMBER DEUTSCH: --where they are and take care of them immediately. [background comments]

COMMISSIONER CORRADO: So, DHS has an entire effort around placing seniors that are difficult to server and-and homeless pop-and the homeless population in general. If a senior wants to be part of the Home Sharing Program, they can avail themselves of Home Sharing. They could have always availed themselves, and I just happened to know this because in conversation with the Executive Director, they've been working direction with DHS to place homeless seniors, and that has not necessarily been the preferential mode for the actual homeless senior. So, we're going to work on as part of this new expansion of the program, to make those matches work and to do better outreach with the homeless. So, that's part of their proposal. So, yes, they can avail themselves of the Home Sharing Program and they'll be a much more concerted effort to place homeless seniors in a home sharing situation.

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COUNCIL MEMBER DEUTSCH: So, we have what's called now Breaking Grounds, and they are trained to go out there and offer assistance to the homeless people.

COMMISSIONER CORRADO: Yes.

COUNCIL MEMBER DEUTSCH: So, I cannot imagine that you have a senior who is out there in the streets who is offered assistance by Breaking Ground to say, Do you want a place to live?

COMMISSIONER CORRADO: So, I-I--

COUNCIL MEMBER DEUTSCH: [interposing]

That one of those seniors wouldn't yes. So, I mean why is there 2,000 homeless seniors?

COMMISSIONER CORRADO: So, I'm going to defer to Commissioner Banks who oversees the Department of Homeless Services at the Department of Social Services.

COUNCIL MEMBER DEUTSCH: [interposing] I mean, I will just ask the chair if we could have another hearing here with DHS and Breaking Ground and we'll--

COMMISSIONER CORRADO: [interposing] No,

I agree, and—and having—having in the former life

worked very closely with that particular agency in

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homeless prevention programs, they are-they do an extensive amount of outreach to homeless people to try to place them and, you know, in situations where they do go into a supportive housing situation, which is not what DFTA does, but when they do, they generally are very successful, but it's a more extensive program and it's-it's more with wraparound services. So that helps homeless seniors and mentally ill homeless seniors, people who have other issues other than just being a senior, which is not really an issues. It's just a-it's just a demographic. They have other issues, and they work successfully with them, but that's outside of the DFTA network that—that they're all in. They have the Supportive Housing Network, the Mental Health Network, or the-or the Homeless Service Network.

just want to say for the record that any time there's and HPD affordable housing project, and I have been involved just over the last few weeks. So, when you put aside let's say a certain percentage for homeless people in the HPD project whether it's a rezoning, any type of ULURP process. So first and foremost we need to make sure that when there's a set-aside, it

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should be a set-aside for senior citizens who are homeless, and a set-aside for homeless veterans in addition to your general population of homeless, and I just want to say that for the record because this is kind of embarrassing, and for the city of New York, and for—it's not your fault, Commissioner.

This is something that it's—it's kind of aggravating and I can't believe that we're sitting at a hearing and we're talking about 2,000 homeless seniors out on the street, and I have nothing more to say except that we need to take action right away, and this is

CHAIRPERSON CHIN: Thank you Council

Member Deutsch. I already introduced legislation

that have—to get the correct data of the number of

homeless seniors so that we will definitely be having

a hearing with DFTA and with DHS, and then we can

really work on this together. Thank you. Council

Member Treyger.

really totally unacceptable. Thank you.

COUNCIL MEMBER TREYGER: Thank you very much, Chair for your leadership, and welcome

Commissioner and your team. I just want to begin by just acknowledging that yourself and your staff has—

have been incredibly responsive, and accessible to my

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officer, and I truly do appreciate that. Having said that, I-I-I', pretty sure that the Chair might have touched on some of the questions I'm about to ask, but I-I think these issues are very significant. Are there any plans in the—in the budget process so far to expand DFTA contracts to expand the number of senior centers this year?

COMMISSIONER CORRADO: So, we've had-we spent a significant amount, speaking-speaking about the model senior center budget. So, we have a significant infusion of baselined funding to expand our Senior Center Portfolio, and as I mentioned earlier, we will be RFP'ing for all of our senior centers in Fiscal Year-for Fiscal Year 2021. really infusion of \$20 million in baseline money by Fiscal Year 2021 will allow us to make a significant investment in our Senior Center Portfolio, and when we RFP for it, we will be looking at the changing demographics and we're currently in that process to see how might redistribute those senior centers to-to truly reflect the current demographics and—and the constellation of senior centers in different communities based on the number of seniors that are actually living there at this point in time.

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supportive of--

COUNCIL MEMBER TREYGER: But—but I'm not sure if I'm hearing anything for this year, for this year's—this year to grow.

COMMISSIONER CORRADO: [interposing]
Well, this year we have \$10 million baselined funding
to support our current portfolio of senior centers.

COUNCIL MEMBER TREYGER: But we're not expanding to new is that correct?

COMMISSIONER CORRADO: Not expanding the number of senior centers per se.

COUNCIL MEMBER TREYGER: And are there any—and are there any plans this year to expand NORCs?

COUNCIL MEMBER TREYGER: So, you know, I think we've had this discussion before, and I know this is something that you personally are very

COMMISSIONER CORRADO: Not this year, no.

COMMISSIONER CORRADO: Uh-hm.

COUNCIL MEMBER TREYGER: --but I'm just making this clear to the Administration that when I hear leaders say that they support seniors, they support immigrants, they support families that they understand that we are—we have a significant aging

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population. These are our loved ones, but we're not aligning our budgets to that reality. I have a problem with that, and our budget has grown significantly in the last couple of years, and we have an ambitious housing plan, which we again passed I know the housing has started to in some the ZQA. cases get built or in the process of being built in my district as well. Councilman Deutsch will be pleased to hear that in my district we're actually building senior affordable housing, and housing for homeless veterans. But my concern is that once these buildings are up, are they going to have a center that is—that has reliable sustainable funding in, you know, attached to it, and I'm sure that the existing providers--

COMMISSIONER CORRADO: Uh-hm.

COUNCIL MEMBER TREYGER: --are facing whole sorts of challenges with regards to the fact that a lot of their personnel, their staff don't have the means and capacity to—to adequately meet the needs of—of their seniors, and this is something that, you know, we have to make sure that our pledges and our words are aligned to the numbers in our budgets.

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So, exactly in COMMISSIONER CORRADO: that vain in all due respect there will be a significant increase in funding for senior centers in the Senior Center Portfolio. There will be an increase in \$20 million in funding to support programming and staffing in our senior centers, and I know having looked at where everything falls out at your particular centers in your particular district will be getting a significant infusion of dollars to support and baselined dollars to support staffing, and to support programming. And we look forward to working with you because it's going to take some time to build capacity at those centers. Then there's some of which are significantly underfunded historically. So, I think that's a good thing. every senior building that goes up can we put in a new senior center? Well, we're trying to look at any new projects that are being built if there's an opportunity to move a senior center that currently exists into new-new space that's specifically designed for a senior centers we'll avail ourselves of those opportunities. So, as they go up, if you have a senior housing building, or any affordable housing built in your community, and you come to us

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with a proposal, we'll seriously consider that, but
we're not necessarily considering opening up new
senior centers in every building that's going up in
the city because (a) the surrounding community may
not support that in terms of the demographics in the
community and that's just practically not feasible,
but certainly if there is one that's in an
unacceptable facility, and we have an opportunity to
move a center into a new facility we're—we're all
ears and we're very open to that.

COUNCIL MEMBER TREYGER: Yeah, I mean I think my, you know, it's-I sound biased because it's my district, but we are experiencing a significant population boom. We are welcoming of immigrant communities that are continuing to emerge and grow, and we are ripe for additional support because a lot of these organizations are doing this not with the support of DFTA. They're doing this with discretionary grants, which right now they might be available, but with these-with the uncertainty of Washington, which is every day and in state budgets, we don't know how much longer we can carry this. So, I-I think we need-this is a very serious issue. also want to just point out, and the Chair might have

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raised this as well. I know that this is not
something that's not your-that's not your
responsibility the Lifeline Program. I'm not sure if
that's been discussed yet—yet at this point, but it's
very concern to many seniors in my district, and
obviously across the city of New York with regards to
the federal government's plans to eliminate this
critical support for seniors who use this program to
make appointments with their doctors, with-to get
medication. Have you-has your office been monitoring
this? Can you speak to that, and also are there
plans?

COMMISSIONER CORRADO: So, I don't know specifically about the Lifeline Program, but I do know that the current Omnibus Bill that the Congress passed--

COUNCIL MEMBER TREYGER: Right.

COMMISSIONER CORRADO: --and it's on thethe President's desk waiting for him to sign,
maintains and or increases the funding available for
senior services. So, I think that's good news and
it's something that--

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COUNCIL MEMBER TREYGER: [interposing]

Except for his Tweet this morning that he—he is

considering vetoing the bill.

COMMISSIONER CORRADO: Well, I think-Uh-hm. COUNCIL MEMBER TREYGER: So, I'm
not sure. So, that--

COMMISSIONER CORRADO: [interposing] That's unfortunate—that's unfortunate and-and-but in terms of Congress supporting all of these efforts and acknowledging that there is a changing demographic and expanding and increasing the funding available for senior services I think says a lot about the commitment of Congress. Now, we have to impose that upon our president to sign that bill so that we can maintain or expand that level of funding, and we're involved in that as a department working with our membership organizations at the federal level and with the city Legislative Office working to advocate on the federal level. So, we are going to Washington. We'll be there this-in April and meeting with our legislators to not-to support an expansion of senior programs, and the-- I'm not particularly familiar about the—the threats to that particular program, but I'll be happy to look into it.

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COUNCIL MEMBER TREYGER: Yes, this is a FCC program to provide assistance to--

COMMISSIONER CORRADO: Uh-hm.

COUNCIL MEMBER TREYGER: --seniors with very limited means to make phone calls, cell phone service, utility services, and they use that as a lifeline literally to call their doctor, to follow up with appointments, to get medication. This is not a luxury item for seniors.

COMMISSIONER CORRADO: And I know that.

it speaks to a larger question—and this is my final question, Chair. Thank you for your—for your time—to addressing the costs of utilities and the cost of these basic needs, which for seniors is—is a necessity. It—is—are there plans or discussions underway to—if federal government cuts back on

Lifeline or in some cases in dealing with energy and other utility types of costs to provide some forms of assistance to seniors particularly those who have a very difficult time paying for prescriptions, paying for food. Are there any programs or services at the city level that we can assist our seniors with?

COMMISSIONER CORRADO: So, the-the city
makes a significant investment in supporting seniors
and the Department for the Aging Budget of \$344
million does a lot to do that. Now, are we making
significant contingency plans based on the
eventuality that our president will not sign an
omnibus bill and fund senior services at the current
level-and certainly there's threats. We're not
making contingency plans at the Department for the
Aging because we don't know how real those threats
are, but I mean I acknowledge that it is at the
federal level we're living in very scary times.
COUNCIL MEMBER ERRYCER. Aladah - a bat

COUNCIL MEMBER TREYGER: Alright, no but you do-

COMMISSIONER CORRADO: [interposing] But we do—we do have—we do have a significant investment in senior services, and we're very fortunate in New York City that the city government does take their responsibility to support seniors very seriously. So, much of our funding at the Department for the Aging is city tax levy monies as well that augment federal funding. So, in—in all actuality I think we'll be okay here in New York City.

COUNCIL MEMBER TREYGER: Just I want--

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COMMISSIONER CORRADO: [interposing]

That's not to acknowledge that there are people who depend on Lifeline for utility services, and as I said, we'll look into it, and if we need to do more advocacy around that specific program, we'll do that.

COUNCIL MEMBER TREYGER: Yeah, I'll just close by saying, Chair, as you've seen in the issues of public housing and the issue of education and transportation where the federal government has not given us adequate, sufficient resources, this is an area that we-we can't ignore either. We-I understand that the federal government has-has just abdicated its responsibility in so many different areas of life. It's-it's completely outrageous and it's-it's just-it's-it's-I think it's a huge stain on-on their inability to get things done, but we just can't put our heads in the sand either. We have to make sure that we have everything, you know, prepared in the eventuality or if something happens that we can't meet the basic needs and services, and I know that you are committed Commissioner, and I thank you again for your leadership, and Chair, thank you for your time.

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Member Treyger. I just want to follow up with another question relating to the model Senior Center Budget. Can you maybe go into more detail because meal, the cost for meals have been left out of the model budget so at this phase. So, how far along has DFTA done its analysis in terms of meal costs and the discrepancy now among a lot of centers? Some, you know, and a lot of centers have historically complained to us that not enough reimbursement for meal costs. So, are we going to address that in the budget?

engaging Price Waterhouse Coopers who was the consultant that we were working with to look at food service across the board, meal reimbursement and ow we can modernize our food service system in New York City both congregate and home delivered meals. So, we're re-engaging that, and we know that we did not address that in the model senior center in terms of the food service component and the reimbursement for meals, and that would be Phase 2. So we are also in discussions with OMB about how best to—to look at the situation, analyze it and those conversations are

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ongoing. So, and we're committed to doing that. I
mean this is, you know, a priority at the department.

CHAIRPERSON CHIN: So, are you—when you're saying we're engaging, so you're assigning a new contact with them?

COMMISSIONER CORRADO: No, we-we-CHAIRPERSON CHIN: [interposing] Or

9 you're not?

COMMISSIONER CORRADO: We RFP'd but webut fortunately the consultants that we were working with got the new RFP. They were awarded the proposal. So, we're actually meeting with them next week to reignite the process where left off. Unfortunately, it has somewhat to do with funding and procurement so that there was an interruption in that process, but in the interim we dealt with the senior center model budget situation, and dealt with everything other than food service. So now that's a, you know, we're doubling up on our commitment to address the food service component and we-everybody is on board with that. So, that work will be starting again next week, and we're going to come up with how we can better serve food in the city, how we can be much more efficient, how we can capitalize on

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new technology that exists to address some of the issues even that you've spoke of earlier around collecting contributions from seniors. No senior should go into a senior center and feel as if they're coerced into giving a contribution at this day and age. That's not to say and, you know, I feel very strongly about this that seniors generally want to contribute towards the cost of their meal in general and there may be a significant number of seniors that absolutely cannot afford a meal, and they should be able to find a way to put something in a contribution box even if it's an empty envelope in a way that's not coercive and maintains the dignity and the confidentiality of the person. So, you know, you brought that to my attention. We're going to do a better job working with our Program Officers to reinforce some common sense solutions on how they should be collecting contributions, but in addition to that, there are more modern ways that we can change our-our practices and our policies to eliminate that even, you know, the-to eliminate any coercive tactics and even the possibility that that could actually be a reality. And I know that sometimes there is, you know, there is in a senior

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center they have some bully that's sitting collecting contributions and making sure that somebody puts their money inside a shoe box slot. There's no reason for that. In this day and age we should have little envelopes. People put it in, and if they can't afford it, they don't put anything in. But we're required through the Older Americans' Act, it's codified in the Older Americans Act to collect contributions that goes towards the cost of the meal, and they're also able to collect contributions to go towards the cost of an activity. Anything collected gets reinvested back into the program, or to the meal if it's collected for a meal, and that is an essential, and we count on that and programs count on that contribution. So, we should find better ways to collect the contribution, and making sure that we maintain the dignity and the confidentiality. So, if that's an issue, we're going to, you know, double down on-on how we assess that, and if we need to change our practices we will.

CHAIRPERSON CHIN: Well, definitely with the meal costs. I mean like if providers are telling us that they need that contribution to supplement the meal, then it means that we're not paying enough,

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putting enough money in the budget for the meal program because there are discrepancy in terms of some centers pay more for the meal, and some centers pay less, and they get reimbursed at a lower amount. Hopefully and so there's a budget, I—I would expect.

Yeah, there's—there's—there's room for improvement, and there is something that we're going to prioritize at the department to try to fix some of those situations, and some of it about efficiencies, and our inability to hold programs accountable in the way that we'd like to. So, we definitely need to do something about that, and we've already started to do that.

CHAIRPERSON CHIN: Will, we see something in the Executive Budget that reflects the—the meal cost adjustments?

COMMISSIONER CORRADO: As I said, we're-we've reengaged with that, and it's something that we're working on. It's a work in progress. So, it will be in the future.

CHAIRPERSON CHIN: Do you have a timeline? How far in the future?

COMMISSIONER CORRADO: In my lifetime.

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time.

CHAIRPERSON CHIN: Oh, that's too far.

[laughs] Because you're going to live a long, long

5 COMMISSIONER CORRADO: [interposing] In 6 my tenure as Commissioner.

CHAIRPERSON CHIN: Well, we definitely because the providers are here. I mean we need to get that problem solved.

COMMISSIONER CORRADO: [interposing] As I said—as I've said, we've already engaged with—with the Office of Management and Budget, and those conversations are ongoing, and that is they, you know, there is a commitment that this will be phase 2 of the model senior center budget. So, we will address the food component in the future.

CHAIRPERSON CHIN: Okay, and we're going to continue to make sure we push so that that future is sooner rather than later. You know, we have a time pressure here because 1:00 the Education Committee is having their budget hearing, and we want to hear from the providers, and so we will follow up with the Commission and the Department for the Aging with all the questions that we didn't get the answer to, but I think that the issue with the model budget,

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we really need to see a more comprehensive presentation of it, and I think also the providers and the public also want to see how do we get to—what kind of formula did OMB and DFTA use to come up with this model budget to make sure that it's, you know, fair and equitable among all the senior centers. So, we want to make sure that we get that information and we can share it with the public.

COMMISSIONER CORRADO: Okay, thank you.

CHAIRPERSON CHIN: Okay, thank you for being here, and we will continue the negotiations.

Thank you.

COMMISSIONER CORRADO:

CHAIRPERSON CHIN: Thank you. [pause]

For the public that's testifying sorry that I have to put you on a clock because we want to make sure everyone get a chance to speak. So, there will be a clock with two minutes. So, give us your important points that we can follow-up with the Administration and with DFTA. So, first up, we have Rachel McCullough, Bobbie Sackman from the New York Caring Majority Coalition; Marie Krokowski from JASA; Chris Widelo from AARP; and Andrea Ciaffani (sp?) from Live On New York. [background comments, pause, background comments] Are you ready?

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ANDREA CIAFFANI: We're read.

3 CHAIRPERSON CHIN: Yes, please begin.

ANDREA CIAFFANI: Thank you. Good almost afternoon. Thank you so much Council Chair Chin as we well as Council Member Deutsch, and the rest of the Aging Committee that was here earlier to-for this opportunity to testify today at this very important hearing. We also really would like to acknowledge the leadership of the Council last year and especially you, Chair Chin and the Year of the Senior, and all of the work to secure the very historic investment in senior services more than we've seen in decades. So, we're really happy to be here today to talk about that, and to talk about continuing to build upon that work. We also strongly recognize the important work through DFTA and the Commissioner Corrado as the Mayor and the entire City Council for their work and leadership. Live On New York represents 100 community based agencies serving over 300,000 older adults annually, and we know that these organizations are doing incredible work in every corner of the city to-to serve older adults, caregivers and their families. We also know that aging creates momentum. We are all part of that

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today, and you can witness at every hearing you come to in the Aging Committee where you see hundreds of seniors here to listen and weigh on the important services and what's going on in the city. So, we're very proud to be here and be part of that. Aging, as we know also creates challenges, which we, you know, can put the whole system at risk. The lack of fair funding that you've been very vocal about and we appreciate that, the less than one percent of the City Budget creates challenges for both older adults, their families as well as the organizations that are serving seniors. There's also issues of ageism andand you-we're working to combat that everyday, and even with the historic gains, which we really appreciate in the budget last year, there's still exists waitlists and staff turnover, and there are issues with the system that we need-that's why we're here today to continue to work together to build The good news for the future is that we have an incredible network of senior services here in New York City that working together with the Council and the city are part of that solution, and can serve seniors today and in the future. When we talk about that future of aging services, we include every

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person and every Council District because they're all server whether it be today or for the future for ourselves and our families. So, I know that I got the bell, but I'm going to just quickly run through our priorities, which are fully listed in our testimony. Regarding the Model Senior Center Budget, as we sit here centers are getting notifications about the influx of the first \$10 million for staffing and programming. We recognize that as a very positive first step. We're very happy to see that that is working, and we are encouraging that second \$10 million that was referenced today be expedited and put into those budgets by FY20. It's really important to build up that system before the projected RFP. We also want to bring attention to the NYCHA Senior Centers. There's nearly 100 in the portfolio that are also through NYCHA that need some significant investment. So, we really highlight those as well as needing for funding. We-one of the main most important things about the model budget is that it didn't include food costs, and so we have a priority focused on raising the reimbursement rate for \$1.00 for both home delivered and congregate meals. We also draw attention to the waitlist that

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still exists for both home care and case management and we have asked for those as well, and a continue investment and at thank you to Council for your investment in all Schedule C senor services and a restoration for that as well. So, thank you again for letting me talk a little longer, and I know the—the hearing will continue, and be—be wonderful. So thank you for your support and we—we look forward to

MOLLY KRAKOWSKI: Hi. Good afternoon.

It's Molly Krakowski from JASA, and I want to thank Council Member Chin for chairing today's hearing, and Council Member Deutsch, and-and committee. jump straight into our main ask while recognizing the significant funding that you put in this past year, and specifically your commitment to the human services sector. The way we see it, you know, fully funding city contracts, and the social service sector is an inextricably—is inextricably related and linked to our asks. So, salary equity. As the city continues to right size budgets, JASA is looking for a targeted fund focus on implementing increases in salaries for all DFTA funded contracts. Some of this will be resolved in the-the senior center model budget, but that doesn't address NORC programs,

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caregiver programs, and other DFTA contracts that remain significantly underfunded. Culturally appropriate home delivered and congregate meals, I'm going to echo what Andrea just said, last year JASA served 702,000 plus home delivered meals, 57% of which were kosher meals, and as a result are projecting a deficit of \$157,000 for providing those contracted meals through the city. Their last real increase was in FY15, and we need to see real investment in funding for the congregate and the home delivered meals. The Council Initiative began echoing what Andrea just mentioned, which is that all senior programs rely heavily on discretionary asks through-to support our seniors, healthy aging, NORC initiative, et cetera, and we just want to make sure that that funding remains or that there's more funding put into contracts. You know, the money and the discretionary ask is really making up for the lack of funding in the contracts, and I just wanted to-I won't-you have it in front of you, but I did want to just piggyback on what Council Member Deutsch asked earlier having to do with homeless services. just did a quick look online, but you know, there's 2% of the homeless population may be listed as

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seniors, but the largest number of homeless in the—in the system it's more than 30% or the 45 to 64-year—olds. So, we all know who those people are, and they're the older adults, and they're the older adults of five years down the road. So, I just—I—I think we need to—echoing what—what Council Member Rose and Deutsch are talking about that this needs to be a real focus. Thank you.

RACHEL MCCULLOUGH: Good morning. name is Rachel McCullough. I'm the Director of Organizing at Jews for Racial and Economic Justice, and I'm the Campaign Director of the New York Caring Majority. The New York Caring Majority is a new coalition of seniors, people with disabilities, family caregivers, homecare workers and domestic workers from all across the state. We're advocating for a more sustainable and just caring economy to help all New Yorkers who give and receive care to live fuller and healthier lives. But we're here today to really just reinforce and back up everything that Andrea and Molly have already shared especially regarding the urgent need to address the waiting list for both case management and homecare. Our-we're a statewide coalition, and so we're really leading

these efforts in Albany where we wish that there were
the same level of commitment, and leadership that we
see on behalf-from-from Council Member Chin, and from
this committee. That's especially why when we do
advocacy at the city level, we're especially pushing
for even greater levels of boldness, creativity and
innovation, and so I would applaud the Year of the
Senior and the effort to make every year the year of
the senior. Beyond that, our coalition was part of
the creation of the new Division of Paid Care within
the Office of Labor Policy and Standards, and in the
year ahead, we very much hope that there can be
greater levels of collaboration and—and cooperation
between DFTA, and that new Division of Paid Care to
lay the groundwork for the future of care and the
future of care work in the city. Beyond that, I
think we're very focused on the homecare workforce
shortage that is affecting folks statewide and exists
here in the city as well, and Albany is not leading
on that, and I think there is a great deal that New
York City could do [bell] to invest in this fast
growing workforce that overwhelmingly made up of
women and women of color. Thank you.

BOBBIE SACKMAN: Hi. I could say good
afternoon. Hi. My name is Bobbie Sackman, formerly
of Live On New York. I'm working with Rachel
McCullough at the New York Caring Majority Coalition.
I'm also involved with a group called the Radical Age
Movement, which I'll come back to in a moment. Again,
I'm-I'm here to also reinforce everything that Aging
Advocate's Coalition has asked for, and I was sitting
here thinking what a different to look at all this
money in the plans and we know government doesn't
move quickly or always well, but at least there's
something in the pipeline and more work to be done.
So, kudos to you Councilwoman and to the whole
sector. The reason I'm involved with the New York
Caring Majority Coalition is that they're talking
about ISEP issues. They're talking about all these
issues through the lens of racial and economic
justice, and I thin that that's something we could
all raise more. We know it's there, but I'm-I'm not
sure we've raised it enough, and—and it's critical.
The only other thing I wanted to mention is the
Radical Age Movement on May $15^{\rm th}$ is going to have the
first New York City and we think nationally Age
Justice Rally. It's going to be at Union Square at

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5:00. We have a website, Radical Age Movement or contact me, and one of the issues is a fair share of the city budget, and how miserably overall we do for the Department for the Aging. So, we will welcome everybody to come and bring older adults with them, and—and join with us. We'll be doing more outreach. So, that's really all I wanted to add today. Thank you.

CHAIRPERSON CHIN: Thank you. Oh, AARP. [laughs] Chris.

CHRIS WIDELO: Thank you, Chairwoman My name is Chris Widelo. I'm the Associate Chin. State Director for AARP here in New York. Thank you for the opportunity to testify and hello to my AARP members and friends in the audience. We're here on behalf of the 800,000 AARP members that are her in New York City, and I don't have to tell you that this is a very rapidly aging population. As a matter of fact, by the year 2040 people 50 and older will comprise about 20% of the population of the city, and of those 65 and older, it will make up 40%. So, this is rapidly happening. It's come to a city near you very soon and, you know, interestingly enough when you look at multi-cultural communities that are

aging, you know, we have a very diverse community
here and in New York City, and they account for 62%
of New York City residents 50 and older and half of
those 65+ living here in New York City were foreign
born, which is I think a very interesting statistic.
You know, when I think about the face of aging, you
have our formal comments, and we want to echo the
priorities around homecare case management, NORCs,
congregate and home delivered meals, and expedited
funding for the model senior center budget. You
know, I have to look no further than the folks that I
see on my right, our members who are incredibly
independent. They're civically engaged, they're
diverse and they're very part of the fabric of their
communities, and when they think about aging, I'm
sure that many of them want to stay here where they
grew up, where they live now, where they spent a
large portion of their life. If I ask them, do you-
are you looking forward to eventually getting to a
nursing home or some type of institutional care, I
don't see many people raising their hand and waving
this time around, right. So, it's important that we
have a strong Department for the Aging to provide
these services that keep people healthy and in their

home community, and also make sure that they—that the
Department for the Aging leads the way on other
initiatives across the state or city to show other
departments what they need to be doing to prepare for
this big demographic change. One of the other issues
that I just briefly want to talk about is AARP and
the Public Utility Law Project has been very
concerned about the 50+ population, and their ability
to afford utilities. Forty-one percent to New
Yorkers across the state have problems paying their
bills, and Con Edison continues to shut people off
from their utilities at record rates averaging over
5,000 people a month. That means people are without
power, and these are—those are accounts, right? So,
each account is about three to four people. So,
there are thousands of people that are being
impacted. We need leadership from the Council, from
the Administration, and I think maybe direction from
DFTA on how we can educate people on what their
rights are, their options and how they can avoid this
because there's no reason during especially cold
winter months that people are without power when they
have certain rights that they need to be aware of
because some of these shuts-shut-offs are not-

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shouldn't be happening during certain months. So thank you for the opportunity to be here today.

CHAIRPERSON CHIN: Thank you. for all your great work and bringing your members here, Chris, and for all the advocates who are here. Definitely we have a lot more to do. I mean, DFTA, we've got to make sure that it has strong budget. It's like one of the smallest agencies. Even DYCD, the-the Department of Youth and Community Development they have doubled their budget. So, we've still got a long way to go, and I'm really looking forward to continuing working with all of you to make that Year of the senior every year. Okay. Thank you. The next panel. Kevin Douglas and Liz Schwartzwald from-sorry if I messed up your name-United Neighborhood Houses. [background comments] Ahsia Badi from New York Academy of Medicine; Rachel Sherrows from City-City Meals on Wheels and Katie Foley, Self-Help Community Services. [pause]

RACHEL SHERROWS: I'll be brief. My name is Rachel Sherrows, Associate Director at City Meals on Wheels.

CHAIRPERSON CHIN: Oh, you want to wait a minute so--

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RACHEL SHERROWS: Oh, sure.

CHAIRPERSON CHIN: Thank you again to all the seniors who came today. Have a wonderful lunch, and we'll see you at the rally because we've still got a lot of work to do to make sure we have a good budget this year for the Year of the Senior. Thank you.

RACHEL SHERROWS: Thank you. You know who we are City Meals. You know what we do. I just want to emphasize that we stand with the other advocates and the Aging Coalition obviously to support a stronger DFTA. Evidence does support that fact that in-home services and programs like Meals on Wheels allow older adults to age in place. We do know that they don't want to be institutionalized. DFTA's budget for last Fiscal Year, Fiscal 17 actually reflected an increase of 25% since the Mayor did take over, but that brings us back to 2008 levels even with the wonderful increase that you were able to secure last year. We need to make sure that we have more money. During that time the population increased 9% and as we heard from everybody else, we know that it's rapidly increasing. We need to support all-everything that was said before me to

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improve capacity by funding costs for operations within aging services as well as aging NYCHA facilities where many of our seniors go to socialize and eat and get benefits and entitlements. We're also asking for an increase in meals, reimbursement costs for both home delivered and congregate. As we know, that will not get them to fully funded contracts, but at least it's a jumpstart. We haven't had an increase in years, and obviously there have been dost of living, food costs and the wage increases that were mandated, which are wonderful for staffing, but put a lot of pressure on the providers. So, we're here to support you, whatever you need to make sure that DFTA has more money.

AHSIA BADI: Thank you, Council Member
Chin. My name is Ahsia Badi. I'm a Senior Policy
Associate at the New York Academy of Medicine. The
Academy applauds the City Council's commitment to
support older adults through the Department for the
Aging. The Academy encourages the City Council to
provide sufficient support to the Commission and
Secretariat for Age Friendly NYC as the older adult
population in the city continues to grow in size and
diversity demands a strong network of public-private

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partnership is more important than ever before to meet that-their growing needs. Age-Friendly NYC offers a point of connection, collaboration and oversight between public and private sector initiatives and advocates for age includes the policy and the amenities across all aspect of life. Age Friendly NYC is uniquely positioned in line for its effective collaborative work across the sectors, transportation, arts and culture, public spaces and housing, and its quest improves health and quality for all older New Yorkers. A critical focus of Age Friendly NYC is its work to prevent social isolation and increased inclusion of older adults throughout the city. Older people in New York City may be at greater risk for social isolation due to higher rates of living alone, poverty, mobility impairments and lack of English proficiency. Social connection is not only good for health, but also a priority for older people. According to a national survey, 40% stated-said-stated staying connected with friends and family was most important. Senior centers are an important part of the solution. However, a majority of older adults wish to participate in multigenerational environments and continue the activities

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that they've done all their lives. Age Friendly NYC supports inclusion of older adults by hearing from older people and then working with local leaders and stakeholders to eliminate their engagement, and including businesses, arts and culture and parks and libraries. There is a continued need to spread and sustain the city's Age Friendly policies, and as the Council considers how we should support all older adults in New York City, the Academy respectfully recommends baselining an adequate support of Age Friendly NYC including the Secretariat and activities of the commission. The Academy is pleased to serve as a resource, and we look forward to working with the Council to make all of our neighborhoods healthier and age friendly for all New Yorkers. Okay, thank you. [bell]

KATIE FOLEY: Hello. My name is Katie Foley, and I'm the new Director of--

CHAIRPERSON CHIN: [interposing] Put the mic closer to you, please.

KATIE FOLEY: Okay. How's that? My mane is Katie Foley, and I'm the new Director of Public Affairs at Selfhelp Community Services. Thank you to the Aging Committee Chair Margaret Chin and to the

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members of the committee this morning for the opportunity to testify today. As you know, Selfhelp is committed to ensuring the independence and dignity of older New Yorkers as they age through a range of home and community based programs. We're grateful for the Council's ongoing support for so many important senior programs, and today I want to focus on two of Selfhelp's priorities. The rest are in the written testimony that we hope the Council will highlight over the next few months, and in budget negotiations. We commend the Department for the Aging and the City Council for the ongoing commitment to senior centers since the beginning of the model budget process. We're grateful to receive the notice about the Fiscal Year 18 and 19 allocations, and the enhancements the city is providing to our centers. We believe that this is the first step in the process that will enhance one of the core programs that supports older New Yorkers including many immigrant seniors. We hope that additional investments in the next few years will move us toward the goal of right sizing staffing resources, rent and food costs, and expanding programming to meet client needs. Our five senior centers serve over 10,000 people and continue

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to be understaffed given the significant need from our community, and the high quality programming that our centers offer. We are also urging the City Council to renew the Holocaust Survivor Initiative with continued support for Selfhelp and our Holocaust Survivor Program. More than 50% of the survivors served by Selfhelp are living at or below the poverty line while 80% of survivors from the former Soviet Union are living in poverty. As the largest provider of comprehensive services to survivors, Selfhelp is uniquely positions to assist this last generation of survivors especially as their needs grow more intense and more costly. Thank you for the opportunity to testify today. Additional information like I said about Selfhelp's priorities and programs can be found in my written testimony. In behalf-on behalf of the 20,000 clients we serve I am grateful for the Council's support on so many important programs. [bell]

LIZA SCHWARTZWALD: Thank you for convening your hearing today. My name is Liza Schwartzwald. I'm here with Kevin Douglas representing United Neighborhood Houses. UNH is the association of 39 settlement houses within the city.

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There's over 650 sites collectively serving over 750,000 New Yorkers including 70,000 older adults in programs like senior centers, NORCs, home delivered meals and a multitude of other programs. We would first like to thank the City Council and in particular Chair Chin for all of the leadership you've provided in the last few years especially last year's Year of the Senior. We appreciate the opportunity to revisit some of those priorities. Today, I'll be talking about the senior center model budget process, and you can also find some of our other priorities, NYCHA based at the senior centers, home delivered meals and the restoration or expansion of several of the Council initiatives, NORCs, Geriatric Mental Health, Support our Seniors and Healthy Aging in our written testimony. So, again, we'd like to thank the city for beginning to address the chronic underfunding of senior centers by investing \$10 million in the model budget process. This was a great step in the right direction. We would like to mention a few challenges we've had with the process. First, the city hasn't been as transparent in its development of the process as we would have liked. As we are echoing others, the

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Model Budget has covered the cost drivers such as rent, food and OTPS costs, and the delay in getting instructions to providers, which I believe were just sent out this week for FY18 contracts may not get time to access and spend that money. So, to that end, we have a couple of recommendations. We would like to recommend that first the city ensure that DFTA has the infrastructure and mechanisms in place to execute the \$10 million in contract amendments, that the city invest \$4.5 million in FY19 to address the congregate meals that aren't covered. That the city include the second \$10 million promised for DFTA's budget as soon as possible, but no later than 2020 and that DFTA more closely work with providers and advocates on this budget going forward. again, you can find our other priorities in our written testimony. Thank you very much.

KEVIN DOUGLAS: Good—good afternoon,

Chair Chin. I just wanted to add a couple of items

that are sort of a little bit broader picture beyond

DFTA's Budget alone. We echo everything that

everyone has said here today, but we think it's

really important that the City Council recognize that

many of the flaws in the DFTA contracting process are

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systemic to the whole city at large, and so we're part of the broad continuum of social service providers in the city who are really asking the City Council to hold the Administration to account unfairly funding contracts across the board. We're recommending that the city adopt principles in all contracting for Human Services that provide at least a 15% indirect rate and a 37% fringe rate, which would include an allowance for health insurance, and then we're also recommending straight increases to occupancy costs, casualty and liability insurance of 10% each. We estimate that this could cost in the neighborhood of \$200 million, but we're really looking for the city as the holder of all contract information to work with the Council and advocates understand what that true cost is, and to implement it as soon as possible. We think it's important that we under grade the system at large and not try to do sort of one-offs here in order to try to fix parts of contracts and parts of agencies. It will really take us a second look to fixing the solution to the problem. Thank you.

CHAIRPERSON CHIN: Thank you. You have that in the testimony. So, we will follow up. Great.

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Thank you for all your great work and thank you for being here today. We're going to call up the next panel. Pakhi Kane from the Stanley Isaac

Neighborhood Center; Tanya Krupat from the Osborne

Association; Barbara Brown, New York Road Runners; and Zakia Haywood, also from New York Road Runners; and Jeanette Espimal from FPWA. [pause]. You want to begin? [pause]

ZAKIA HAYWOOD: Alright. Good afternoon, Chair Chin. My name is Zakia Haywood, and I serve as the Director of Community Services at New York Road Runners. I've been with the organization for about 12 years, and thank you for this opportunity to testify before the Committee on Aging for the Fiscal year 2019 Preliminary Budget. I'm here to speak on how New York Road Runners provides the motivation, know how and opportunity for people of all ages and abilities to truly run for life. For us, every year is the Year of the Senior. While New York Road Runners is best known for producing the TCS New York City Marathon, and our free youth programs in schools, our organization is a dedicated provider of senior health and fitness programs throughout New York City. Maintaining and increasing access to

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health and fitness services is imperative for the wellbeing of our city's older adults. The U.S. Department of Health and Human Services recognizes physical activity and physical education as critical for both preventing and treating many chronic conditions. Additionally, walking programs such Striders Program and walkable communities are good for social connectivity, good for business, good for the environment, and most importantly an easy way to help seniors enjoy a better quality of life and live longer independently. With that said, New York Road Runners respectfully aske the New York City Council to consider our request to support our Striders Program through the Healthy Aging Initiative. Currently, the Striders Program, which started in 2011 in a response to the New York City Department of Health Community Needs Assessment for Health Equity Programming for older adults operates in 49 New York City Council districts. We received generous support from the Council during the past two budget years under the Healthy Aging Initiative, and with the 2019 request we are hoping to (1) continue to provide the organized program via a healthy [bell] Neighborhood HUB Model for 3,000 seniors to continue to work with

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the New York City Department for the Aging on Walking 101 Workshops and technical assistance in senior centers and to also expand our Discovery Walk Series through the Mayor's Building Healthy Communities initiative in East Harlem and other communities. We look forward to continuing our commitment within New York City's aging population [bell] and growing relationship with the New York City Council. Thank you for allowing us to testify today.

Chin. My name is Barbara Brown. I am a New York Road Runner Strider, a senior—a senior citizen from Brooklyn, New York and a proud runner. Thank you for this opportunity to testify today. Whoever said you cannot teach and old dog new tricks is incorrect. I am a prime example of old—old with support at any age you can do anything you set your mind and heart to do. I am 65-years old and proud, and I try to live life to the fullest potential everyday. However, one day I went—I went—I was recently retired, and I went to the doctor, and I was surprised when he gave me a list of chronic illnesses I suffered from, and even longer list of medications. I needed to take—some—some of which he told me I would have to take for the

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entire-my entire life, and that moment-- At that moment, I knew I will have to make a change in my life if I was going to be proud-if I was going to be around for my children and grandchildren and see thesee them experience a special milestone in their I joined a local New York City Park Recreation Center and learned how to swim. This was my—I'm sorry about that. Then I joined a local senior center. With a fixed income I needed three activities to be social and get out of the house. The already neighborhood senior centers in Crown Heights, Brooklyn provided a number of opportunities to chat and be creative, but at the same time did not offer physical activity. That changed—that changed when Coach Maria from the New York Road Runners Striders Program came to our senior center and didn't want to hear excuse-she said I didn't want to hear She told me we were on at least and excuses. whoever-and whenever we are we must get up and walk. [bell] I became and elite runner. I purchase a fitness and beat most weekly challenges. I loved the challenge. I participated in another community program from the Roadrunner called Open Run at Canarsie. The Strider Program from New York Road

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Runners changed my life for the better. My health was improved greatly in three years I've been participating. And—and I know and I know that it has added years to my life. Ms. Chair Chin, I humbly ask you to support the work of New York Road Runners so that most seniors across New York City just like me can be touched by their free health programs. Thank you for—for allowing me to testify today.

CHAIRPERSON CHIN: [off mic] Well, you're healthy.

BARBARA BROWN: Yeah, I try to be. [laughs] Yes. [pause]

TANYA KRUPAT: It's a hard act to follow. Thank you so much. Thank you for the opportunity to speak with you today. My name is Tanya Krupat. I'm from the Osborne Association. The Osborne Association provides a wide range of diverse—of diversion and reentry programs at sites in the Bronx, Brooklyn, Harlem and Newburgh, New York as well as services at 27 New York State prisons and seven New York City jails. My testimony focuses on older adults returning form incarceration. Today, there are more than 10,337 people over age 50 in New York State prisons. Each year more than 1,000 men and women age

50 and over leave state prison and return to New York
City. We want to thank the City Council for your
leadership and particularly Council Member Dromm for
recently passing the Care Act, which establishes a
temporary interagency taskforce examining the needs
of older adults post-incarceration. This is an
exciting and important step forward and we hope the
task force will begin to meet soon. My written
testimony provides greater detail about the program
we're seeking City Council funding for in the amount
of \$150,000. The program the Elder Reentry
Initiative provides case management and support for
returning elders in New York City, but I want to tell
you a true story that illustrates the challenges
reentering elders face. Larry, spent much of the
last 40 years since age 17 in and out of prisons and
jails. Elder Reentry staff picked him up on his
release date last November, and he has been involved
in Osborne ever since. He's a daily fixture in our
classes and substance abuse treatment program, and
he's working on getting an apartment. Larry had no
friends or family when he left prison at almost age
60 so his housing options were limited. He wanted
long-term sustainable housing and he want to get

there by sleeping at a shelter long enough to be
granted a housing voucher, which he used to rent a
room while he worked and saved enough money to get
his own apartment. With Osborne's help he had been
navigating the bureaucracy, but just as he was ready
to sign a lease on a room with his hard earned
voucher, a housing specialist made an error and put
the wrong room number on the lease. This careless
error cascaded into a potentially cataclysmic couple
of hours for Larry. He believed he'd have to start
over, a process that had taken several months
already. [bell] I'm almost done. The night before
police had raided the shelter, which caused him to be
very scared. Instead of spiraling out of control he
met with his care manager for hours and he said,
You've always got my back. I've never had that. We
are happy to report that five days later, Larry moved
into his own room and is working on the next step of
his plan, saving for an apartment. Thank you for
your consideration in support of those like Larry.

PAKHI KANE: Thank you, Council Member

Chin, and members of the Committee on Aging. My name
is Pakhi Kane. I am part of the Stanley Isaac's

Neighborhood Center. As the Deputy Executive Director

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it is a pleasure and a privilege to be on this side of table. You know our organization well so I won't go through all of it, but we are part of a NORC. Our senior center offers congregate meals, a multitude of wellness activities, media and technology classes, arts and cultural and entertainment. We also have a comprehensive case management program that provides seniors with supports and services they need to comfortably and safely age in place. I want to thank the members of the committee as well as Commissioner Corrado for their much needed attention to budgets of the senior centers. As we know, the Middle Budget process has added \$10 million. I won't repeat some of the things that others have said here, but I will-I would like to highlight that that \$10 million is across the entire system, specifically for our organization it—it translated to approximately \$36,000 for Fiscal 17 and Fiscal 18. I'm sorry. Fiscal 18 and Fiscal 19, and it's important to note that the allocation is restricted to personnel costs and programming. So, that means instructors and consultants. So, other than personnel costs like rent, utilities, supplies and even meal costs are not included as discussed at this hearing. We appreciate

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the Commissioner's commitment to negotiate additional allocations for organizations such as our on a caseby-case basis, but as we know, the expanding needs of the rapidly growing aging population in NYC requires substantial commitment. Council Member Chin, your work with the Speaker and the Council's Budget Negotiating Team to ensure continued critical funding for NORCs, and also other citywide initiatives that you have been a leader in supporting such as Support our seniors and senior centers programs, and enhancements it critical to our work. These investments allow the Isaac Center to provide hundreds of older adults per year with access to services that provide financial security, support their health and wellness, and ensure the stability of their housing. These efforts provided by interdisciplinary teams [bell] of social workers, nurses, psychotherapists and program specialists maximize their potential to age in place safety and comfortably. I want to thank you for the opportunity to testify today.

JEANETTE ESTIMA: Hello, my name is

Jeanette Estima and I'm a Senior Policy Analyst at

FPWA an anti-poverty policy and advocacy organization

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with a membership network of 170 community and faith based members. Thank you Chairperson Chin and members of the Committee for the opportunity to speak here today. Last year thanks to your leadership, the Administration started to turn the tide on decades of chronic underfunding for aging services. We're so grateful tot the City Council and the Administration for such a clear demonstration of their commitment to older New Yorkers with nearly \$23 million in baselined funding. That was a critical first step in rebuilding the safety net for older New Yorkers. now ask that the Council fight to further stabilize funding not only to meet current needs, but also to shore up the city's safety net infrastructure for older adults, which is threatened by proposed federal cuts. According to our analysis, Trump's Budget Proposal cuts DFTA's federal funding by nearly \$27 million or 7.2%. These cuts are in addition to the decimation of direct federal assistance such as housing, food assistance and healthcare. Especially now under this threat of continued city led investment and a long-term plan to build the service infrastructure is the right forward. In FY19 we encouraged the Council to seek an investment of \$22.1

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million for services that helped keep older New Yorkers in their communities. Of particular importance, this year's funding for both congregate and home delivered meals neither of which have received an increase in several years. Current reimbursement rates are below the national average. Therefore, we request that permeable reimbursements be increased by a dollar at a total cost of \$12.1 million in FY19. Also, there are nearly 100 DFTA funded senior centers located within NYCHA developments. While these centers will receive some funding for staff and programming through the model budget process, these centers have unique needs as a result of budget short falls at NYCHA. In order to make these centers safe inviting spaces, we request \$10 million over two years. [bell] There are still older New Yorkers on waitlists for case management and homecare as you know. So, we're requesting \$2 million for case management and \$1 million for homecare to ensure these services keep pace with the ever increasing demand, and finally we just wanted to echo the other advocates in asking that the-that you ensure that DFTA has the capacity necessary to process all of the amendments as they roll out the

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model budget for \$20 million. We really want to see these be expedited as well, and we're hoping that it's fully implemented by FY20, not FY21. Thank you

5 very much.

CHAIRPERSON CHIN: Thank you. Thank you for being here today. We're on the same page. We want to make sure that that money gets out to the providers. Thank you. We're going to call up the next panel. Jo-Ann Yoo from the Asian-American Federation; Dr. Cynthia Morro from Visiting

Neighbors. [background comments, pause] Larchmont from India Home. You've got to pronounce your name for me again, and John Reed from Staten Island AARP, Vickie Owen from the 12<sup>th</sup> District of Council Member Andy King, and Bonnie Lumagui from Education

Alliance. I know Bonnie. We just-hi. [laughter]

Come on up. [pause] Please begin.

JO-ANN YOO: Sorry. Good afternoon.

Thank you, Councilwoman Chin for this opportunity.

My name is Jo-Ann Yoo, and the Executive Director of the Asiana-American Federation. We represent an organization of almost 70 non-profits that serve the Asian-American community. We're here to offer our support for programs that serve our senior

population. As you know, Asian-American seniors are
the fastest growing in New York City, and they are
not just living in enclaves, but they are living in
all boroughs and all neighborhoods and certainly we
know from the reports that we have submitted to this
Council and to you specifically how much of the
support they are not getting. So, just as a
highlight, I just want to mention that one in four
Asian seniors live in poverty with poverty rates
reaching as high as 35% for Bangladeshi seniors and
30% for Chinese seniors. Language barriers remain
high for Asian-American seniors. For example, more
than 90% of Chinese and Korean speaking-Korean
seniors have limited English proficiency and among
Bangladeshi speakers 88% were limited in each
profession. As you know, seniors tend to want to go
to services where their language is—their language is
spoken, and their culture is practices and regularly
accepted, and so, I-my recommendations I have a
detailed report, and I brought some senior reports
that we produced last year, but I want to offer our
recommendations that we need to increase funding to
expand senior services for Asian-American seniors.
Certainly I think while the City Council has-DFTA

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has done a remarkable job getting the funds out. still have a huge need. Granted that we come from a point of deficit. I'd like to ask the City Council to ensure that DFTA receives the funding they need to fully implement the new citywide Language Access Law the Local Law 30, and to also talk about mental health, and to be able to support that [bell]. you know, in New York City Asian seniors are the only population where suicide is within the top 10%--top ten causes of death, the leading cause of death, and so this is a huge issue for us, and there's such a stigma about talking about depression and suicide in our community and social isolation. So, we really do need to address this issue. Additionally, I know time is up. Additionally, we need to talk about I know that we-everybody has talked homebound meals. about that here, and I see our member agencies here. I see Pauline and Lachman here, but we don't have a Meals on Wheels Program on our own. We're always subcontracting, and so I think it's high time that get one. There isn't any reason that one of our larger Asian-American non-profits can manage one for the city and, you know, they are at the whims of the big agencies. There is no way to compete [bell] but

we really do need to figure out how to disaggregate
some of the funding that comes to our community. And
finally, we need to start to think about the Census.
I know that this is the-something that we have been
worried about, but we know that seniors are
particularly vulnerable to that information, and
there is so much fear in community that we'd like to
put his on the radar for this committee and for you
as well so that that way we can all figure out how do
we start to inform our seniors about the importance

LACHMAN KALASURI: Thank you Chair Chin for giving me the opioid to testify. My name is Lachman Kalasuri. I'm from India Home, and you are familiar with India Home [laughs] and you have been telling us to come and testify, and that's what we've been doing, and we're happy--

CHAIRPERSON CHIN: [interposing] And you've also been getting support from the City Council, right.

22 LACHMAN KALASURI: Yes, of course.

of census and participation. Thank you.

CHAIRPERSON CHIN: So, testifying helps.

LACHMAN KALASURI: And we're happy to see the increase in the DFTA Budget for FY 2018 and we're

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happy that all our partner agencies such as Queens Community House and 75 community services have received that increase, but we must note that despite our continued advocacy, grassroots community led organizations such as India Home and others in this room have not received the benefits of the increased baselined budget. We serve a critical gap in serving multiple-in multiple vulnerable population who are immigrants, LEP and low-income, and we're laying the foundations for services that will only be increasing in demand in the coming years. In fact, just yesterday, despite there being a foot of snow on the ground, we've got 50 seniors at our day senior center, and we are trying to be creative on how that's going to meet their needs. We started in 2008, and our most large-largest senior center based in the center with over 100 seniors will start in But DFTA recently proposed that the next senior centers contract will start July 1st in 2021. We cannot wait three more years. We cannot. Our communities cannot be short changed, and all we're asking for is equity in resource allocation, and distribution. Until 2021, there have to be provisions in the increased baselined budget for

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programs such as ours that were-who are not in the RFP system, and I'm asking you to, you know, get creative about it, and I'm DFTA to get creative about it, because we're trying to get as creative as we can and yeah, we thank you for your leadership, and we are heavily relying on your Council Initiatives [bell] to fund our programs but, you know, the support only runs so far. So thank you.

SUZANNE HOWELL: Hi, I'm Suzanne Howell (sic) with Visiting Neighbors. We are here to talk about a population that often isn't included and that is the population not going to the senior centers. The seniors that can't get out or don't want to or honestly are looking to make a connection with someone who is youthful and engaged in going-ongoing activities. We're also targeting the seniors that are the oldest adults. In this city, we right now currently are serving a thousand for our little I really do think of us like the engine that We've done a lot with very little, but we still need something, and we're very thankful for discretionary funds. If it wasn't for discretionary funds, we couldn't do the work that we do. What do we do? We are volunteers who are on the front lines

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who are serving our seniors by taking them to doctors, being an arm to hold safely across the street. I had a discussion with some volunteers the other day, young students to say look around ono the street. Notice how many people are on their cell phones who don't get off their cell phones who bump into you, and one student came back in, 17, and said, You know, there was at least seven people in a very short few feet all on the phone. So, a lot of times seniors are knocked over. There are hazards, potholes, getting around, being an advocate when someone goes into a hospital. Just having somebody let the staff know that there's somebody watching can make the difference of being more and more careful, and just letting them know that they're not alone. We're having-celebrating a 100<sup>th</sup> birthday. We have 12 seniors this year who are going to turn 100, and these people are at home, and they want to stay in their own homes because you would, too, and if we're lucky we'll all become a healthy senior someday, but not without programs like Visiting Neighbors in place. Volunteer programs like ours are costeffective. They make sense. They help a lot of people and the cost of a nursing home, four seniors

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in a nursing home would pay for our entire program keeping a thousand people okay. There are all kinds of fraud issues out there. We're trying to keep people safe, keep them aware of what's going on so that they don't fall victim and prey. We need support, and we need to let people know that seniors that are going to senior centers are great. Those are fun programs, but there's also importance with, you know, a place for being valued in our society when people can't get there, and we just want to tell you thank you for getting it. We need you to help more people get it so that they understand that we need to be able to keep our people [bell] home and safe. Thank you.

BONNIE LUMAGUI: My name is Bonnie

Lumagui, and I'm the Director of Cooperative Village

NORC at the Educational Alliance, and I'm here to

talk about NORCs because apparently it's not that—it

doesn't seem to be that on the forefront of the DFTA

budget to see the need to increase the funding for

NORC programs, and there are significant reasons to

do that because as my—this—what a lady here pointe

out, not all seniors go to senior centers. Senior

centers are extremely important and valued, and

valuable, but it doesn't stop there. There's a lot
of seniors that need to be serviced in their homes,
and that is what the NORCs do, and continue to do and
many without DFTA funding, and use discretionary
funding, and we're really being put to the brink here
with the increased numbers because we are seeing more
and more people age-living longer, living longer with
needs. So, I strongly this committee to really,
really look at what they're not increasing the
funding for NORC programs because that's a-and-and
the fact that the budget is so small for a very, very
fast growing population. A couple of points that I
just want to point out regarding NORCs, we're finding
in recent years like many have said already that
there's a rise in—in seniors living longer, and we
have many seniors that are over the age of 100, and
coming in June and now August at Right View (sic) we
have over 30 people a year that we're honoring that
are over the age of 95. So, and—and those are the
ones that that are just coming out. So there's
definitely a strong increase of seniors living
longer, and we need-need to expend and diversify our
program accordingly, which is causing budgetary
strain because we're also working with people as

young as 60, and a person at 60 doesn't necessarily
have the needs or wants of a person at 100. Our
health partners, this is a huge issue. The nursing
[bell] component is to meet the deliverables that New
York City Department of Aging requires. They can no
longer provide the services without reimbursement.
We need additional funds to continue to provide the
vital nursing services we presently offer. Services
enable faster identification of medical issues before
it becomes critical and hospitalization is required.
Further funding: We need the funding that the City
council provided in FY16 baselined in the budget. We
also are being asked to collect data more and more,
but the there-but DFTA is not providing adequate
support to manage this function, and we're working on
very old computers, obsolete computers, and the
mandate is just getting more and more, and we're-and
most—and a lot of times our social workers are
spending more time on a computer than working with a
client. We're struggling to maintain qualified
staff. Yes, it's wonderful that—that Case Management
got the increase for MSWs. When is that increase
going to hit NORCs and other programs? [bell]
\$45,000 start for an MSW is laughable and no one is

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going to take it. One year I lost three social workers because I can't—I can't do it. I keep talking about it, but nothing keeps happening, and it's really unfortunate because we need adequate staff to help the growing need. The need isn't getting less. The need is getting more. Again, I thank you for having us here today. I applaud this committee. You do so much with such little, and we appreciated it, but obviously more need to be done. Thank you.

CHAIRPERSON CHIN: Thank you for being here. We know that and that's why we've got to make sure that this year's budget also gets increased.

But thank you for being here, and our last panel.

[background comments, pause] Miranda Hoffner from Lincoln Center; Ariel Sarvansky from UJA Federation; Allen [background comments from Brightwood Tower Tenant Association; and Sari Tekman from Surret's Center; and Mohammed Razi from Cobo Senior Center.

Anybody else that wanted to testify that didn't sign up? Okay. Please begin.

MIRANDA HOFFNER: Thank you, Council

Member Chin and members of the Aging Committee. My

name is Miranda Hoffner. I'm the Assistant Director

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of the Accessibility at Lincoln Center for the Performing Arts, and we're also a member of the Cultural Institutions Group. On behalf of Lincoln Center and the CIG we want to express our continued gratitude to the Council's longstanding leadership and support. In FY18, Lincoln Center was fortunate enough to received a \$51,500 grant from the Council's Geriatric Mental Health Initiative. We're here to request that the Council continue funding this in FY19 and also to support CIG's request that you baseline the \$10 million received in FY18 and an additional \$20 million allocated for all cultural institutions providing a means for implementing the city's Cultural Plan. One particularly vulnerablevulnerable and isolated group within the senior population in New York City is individuals with dementia. It's estimated that over five million Americans are living with dementia, and that number is expected to triple by 2015. At Lincoln Center we seek to combat the isolation and caregiver stress of the disease through Lincoln Center Moments and Arts Program that focuses on community and self-In FY18 we'll welcome 900 New Yorkers to expression. performance based programs followed by music movement

and art making workshops bringing that outstanding
talent Lincoln Center's stages to an intimate and
supportive setting, individuals with dementia and
their caregivers can access world class performances
and workshops that foster discussion, self-expression
and socialization. For many participants, the arts
are a central reason why they make New York their
home and this program aims to return that vital part
to their lives. In the words of some of our
participants, my mom does have Alzheimer's, but when
she comes to Lincoln Center she comes alive. I
greatly enjoy the experience as well, and the
strength of the program cultivates the patient's
imagination and helps them socially interact with
others. This program has a unique cross-disciplinary
approach blending arts and social services or
partnering with Caring Kind, the former Alzheimer's
Association's New York Chapter to train our staff
consultants supporting individuals and caregivers and
reaching out to underserved New Yorkers and community
centers. Through a study conduced by the [bell]
Louis Armstrong Center for Music and Medicine last
spring, the program has proven to have significant
positive impacts on our participants in terms of

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elevated mood and connection to loved ones. New York

Center is—Lincoln Center is grateful to the Council

for generously granting the Council's Geriatric

Mental Health Initiative last year, and we request

continued support in FY19. On behalf of Lincoln

Center and the CIG, thank you so much for your

support and consideration.

CHAIRPERSON CHIN: Next, please.

ALLEN POTHAS: [off mic] Allen Pothas (sp?) the Brightwood Tower Tenant Association.

CHAIRPERSON CHIN: Can you press the button please, Allen.

ALLEN POTHAS: Okay, I thought we could do without it. (sic) Okay. Anyway, Allen Pothas from the Brightwood Tower Tenant Association. I'm a retired attorney. I thank Councilwoman Chin, and I want to remark I'm not asking for any money. I just want to give an observation of what Councilman Deutsch said about 2,000 homeless seniors. A lot of the reason seniors are homeless is because they live in rent stabilized apartments, and rent controlled apartments that are valuable. Landlords have donestarted eviction proceedings against them for base, just that it's their apartments, and I realize it's

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somewhere in the budget, but not adequate. It doesn't really stretch far. How much money in the budget to protect these seniors. I'm a senior myself and I see this both as an attorney and as an individual and also process servers serve papers that are not valid, and the judges do not observe this. How much oversight does is the City Council doing in this matter. Thank you.

ARIEL SARVANSKY: Good afternoon. name is Ariel Sarvansky. I'm an Advocacy and Policy Advisor at UJA Federation of New York. On behalf of UJA, our network of non-profit partners and those we serve, thank you for the opportunity to testify today. UJA applauds the Council's continued interest and support of New York City's seniors and the programs and services on which they rely. That's one of the benefits or being on the last panel of the day is that most of what I've written in my testimony has already been mentioned so I'm just going to echo a few of my colleagues' asks. First, I'd like to echo my colleagues' and ask for the release of the remaining \$10 million proposed through the model budget process be expedited and fully allocated by FY20 as opposed to the proposed 3-year rollout.

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Next, I'd like to echo colleagues' request to increase the reimbursement rates for home delivered and congregate meals. UJA's network of non-profit partners provides vital food services and support to all New Yorkers throughout the five boroughs. also through our partners that UJA is the largest provider of kosher food in New York City. However, the high cost of a kosher meal presents a unique challenge for many of our agencies in their work with clients suits their biggest dietary laws. As was pointed out, there was an increased investment in FY15, which alleviated some of this burden, but providers of kosher meals continue to feel strained. We also just heard about NORCs on the last panel. So, I will just echo my recommendation that the City Council increase the investment in NORCs for the valuable services that they provide to seniors, and the last thing I want to bring up that was also brought up previously is the-is the Holocaust Survivor Initiative. UJS applauds the leadership of the City Council and its continued investment in New York City's Holocaust Survivors. Many of our nonprofit partners have received initiative grants to provide specialized programming and comprehensive

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services for holocaust survivors. As we continue to care for this last generation of survivors, we ask that the City Council continue its compassionate support of this vulnerable population, [bell] and increased investment to \$3.5 million for the Holocaust Initiative. Thank you for the opportunity to testify.

MOHAMMAD RAZVI: Good afternoon and thank So, if you have my testimony in front of you it says Making History. There's a reason for that. My name is Mohammad Razvi. I'm the Executive Director and CEO of Council of People's Organization, and we run the first and possibly the only Halal Senior Center in New York City. I'm just cutting my presentation a little bit shorter. We service over 15,000 people in our office, and we are-I can't even explain it to you-at the forefront of providing multiple services for the community, whether it's from Pre-K classes to health insurance to English classes to voter registration and the senior center. COPO has been servicing the seniors for many years, and it's come time to time when people come to us and they phone us, and I thought it was, you know all good that I'm able to help these seniors, but now

we're receiving phone calls that seniors who are
homebound and need the services. What do I do? I
had no idea what to do. So, I called my friend
Joanne Yoo, and I called DFTA, the team of DFTA that
we were working with, and Commissioner Corrado. We
had a meeting, and I want to be the first one to let
you know. I know you've never heard of this. You've
heard of Kosher Meals on Wheels, Catholic Charities
Meals on Wheels, but this time [pause]. So, it's
going to be the first Halal Meals on Wheels program,
and this is only possible because, and I'll say it
again, because the advocacy that we did, the
community members because of you, Ms. Chin. Thank
you so much, Margaret, and also because of the
Commissioner. There are over one million Muslims in
New York City and growing. Many of them are seniors
also. They've done their share. They've worked
hard. They've raised their families [bell]. They've
done everything that all other seniors have done.
All I request is that resources be allocated to
accordingly. Let me and other groups like me serve
my community. The Jewish community, the Christian
community yes they do wonderful work, and they are
servicing their communities. Where is their

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resources for our communities, the Asian community
the Korean community? Let us have our own contracts.
Thank you.

CHAIRPERSON CHIN: Well, I wanted to thank you all for your great work and—and coming to testify today. This is once again, you know, we're going to be working hard to make sure DFTA,

Department for the Aging get its fair share of the budget because our seniors need to be a priority, and every year needs to be the year of senior. Allen, I thank you for coming. We're doing a lot in senior council—in the City Council to protect seniors to make sure they can stay in their homes. So, if a senior is facing landlord harassment, they should call their Council Member and they can call 311. We have legal services. We have support services for them because we want to make sure they can age in the home, in the community that they helped to build.

ALLEN POTHAS: [off mic]

CHAIRPERSON CHIN: Yes, we all know that.

That's why we're fighting for more, and thank you all

for being here today for the Committee on Aging.

Council Member Deutsch, do you want to say something?

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COUNCIL MEMBER DEUTSCH: Yeah, sure.

3 First of all I'd like to recognize Allen Pothas.

4 He's a constituent of mine.

CHAIRPERSON CHIN: [off mic] Oh, well, that's where he is. (sic)

COUNCIL MEMBER DEUTSCH: Yes, and so is Bobbie Sackman, and I just want to answer you question the-the last-I don't know your name, but you just spoke on the panel, and I agree with you, and in my district I have what's called Atma Center (sic) which is a Muslim group that were able to form a center for the Muslim community, and you're absolutely right, and this is the first year they'll be getting city funding and we really, you know, no community should be disenfranchised from any city services, and as well as our seniors. So, we brought a lot of resources into my district, into the—into the Muslim community, and I fully agree with what you have said, and also we-we also need to fight in the budget to have in the 1.1 for the 1.1 million school children in the city to have Halal and Kosher options. So, this way all school children get the free lunches that they deserve. So, thank you.

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1	COMMITTEE ON AGING 14
2	MOHAMMED RAZVI: So, let me know when can
3	I testify for that. I will be there.
4	COUNCIL MEMBER DEUTSCH: Thank you.
5	MOHAMMED RAZVI: [laughs] It's going to
6	be me. (sic)
7	CHAIRPERSON CHIN: Well, the next
8	committee hearing is education. That's why we have
9	to-we have to wrap up, and thank you all for coming
10	to testify to day. The Budget Hear for FY19 for the
11	Committee of Aging is now adjourned. [gavel]
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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 23, 2018