

CITY COUNCIL
CITY OF NEW YORK

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TRANSCRIPT OF THE MINUTES

Of the

COMMITTEE ON CIVIL SERVICE AND LABOR

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December 13, 2021
Start: 10:30 a.m.
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HELD AT: Committee Room - City Hall

B E F O R E: I. Daneek Miller
CHAIRPERSON

COUNCIL MEMBERS:
Adrienne Adams
Eric Dinowitz
Farah Louis
Francisco Moya
Helen Rosenthal
Eric Ulrich

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

Barbara Dannenberg, Deputy Commissioner for
Human Capital
Department of Citywide Administrative Services

Steve Banks

2 CHAIRPERSON MILLER: Good morning and
3 thanks, everyone, for attending this morning's
4 hearing. I know it's been quite challenging and a
5 lot going on around here in these last days of
6 governance here at City Hall and within the New York
7 City Council. The other members of the committee
8 will be joining us as they are in a conference which
9 they are obligated to be in and I could no longer
10 prolong this hearing, so we are going to begin
11 without them. And once again, good morning. I am
12 Council member I. Daneek Miller and I am the Chair of
13 the Committee on Civil Service and Labor. I want to
14 welcome everyone here to the Civil Service hearing
15 this morning. This morning's hearing is on COVID 19
16 Workplace Safety Protocol. Eight years ago, I had
17 the pleasure and honor of being appointed as the
18 Chair on Civil Service and Labor. It was a wonderful
19 opportunity for me to continue to demonstrate my
20 advocacy on behalf of New York city's workforce. As
21 many of you may know, I previously served as the
22 president of the Amalgamated Transit Union prior to
23 my tenure in the Council where I fought to enhance
24 protections for transit workers and workers in
25 general. So, it is fitting that my last hearing here

2 in the Council as the Committee on Civil Service and
3 Labor also tackles these issues. Fitting, but at the
4 same time, we are still doing it. During my tenure
5 as the Chair, we passed legislation, just cause
6 protections for fast food workers, expanded health
7 insurance for survivors of those who died during 9/11
8 related illnesses, expose the gender gap in pay and
9 gender gaps in the workforce, compensation, and many
10 more. These legislations and [inaudible 00:02:13]
11 achievement laid the groundwork for our biggest
12 challenge yet: overseeing workforce protections for
13 New York City's workforce during COVID 19 pandemic.
14 The ability to work from home often is reflective of
15 race, gender, and class. According to the March 2020
16 report of the city Comptroller, more than 60 percent
17 of all frontline workers in New York City are women,
18 including 81 percent in social services and 74
19 percent in healthcare. Additionally, 75 percent of
20 all frontline workers are people of color--
21 specifically there are more than 40 percent of
22 transit employees that are black while 60 percent of
23 the cleaning workers are Latino. Lastly, more than
24 50 percent of the frontline workers are foreign born,
25 including 70 percent in healthcare, 53 percent in

2 food services, and others. This racial divide only
3 compounds existing structural disparities that
4 further exacerbate how people of color were impacted
5 by the COVID 19 pandemic. Since last hearing on
6 workplace safety, protocol in January 2021, the city
7 has made tremendous strides towards a safe return to
8 work. The administration has adopted workplace
9 safety plan for the city's agencies and expanded paid
10 sick leave laws for the private sector. Mandated
11 COVID 19 vaccines for the entire workforce, among
12 other protections that have been pertinent to place.
13 Our objective today is to assess how we can
14 successfully implement these policies for the city's
15 workforce citywide. We must ask critical questions
16 to evaluate lessons learned over the past year-- two
17 years of the pandemic as the city developed
18 centralized systems to communicate important updates
19 to staff and to the public. Is the city working with
20 our partner to their policies? Are the city's
21 workforce protections been properly forced? And is
22 it enough? What are the plans for the workforce
23 development, especially for those groups been
24 working? What is the game plan for returning to
25 person? This discussion will be ongoing. I look

2 forward to the reports from the workplace health and
3 safety Board established by our civil service and
4 labor committee, legislation local law 22. The board
5 will make recommendations on protocols for future
6 public health emergencies based on testimony from
7 employees, employers, and the public and other
8 relevant experts. Today, we are here to get an
9 update from DCAS, DCWP, DOHMH, and OLR on how to best
10 support workforce as we continue to battle the
11 challenges posed by the ongoing pandemic today. At
12 today's hearing, also, there is a platform for
13 workers and those that represent them to share their
14 questions and concerns. I would like to thank my
15 staff who worked hard on putting this together.
16 Senior advisor, Joe Goldbloom, Chief of Staff, Ally
17 [inaudible 00:05:37], legislative director, John Mani,
18 and I'd also like to thank committee counsel, Bianca
19 Vitali, policy analyst, Elizabeth Art, and finance
20 analyst, Evan Singh, for putting this together. I
21 look forward to today's testimony and public
22 discourse because public discourse creates public
23 policy. With that, we will hear from the
24 administration and counsel will administer the oath.
25 Thank you.

2 COMMITTEE COUNSEL: Thank you, Chair.
3 Can you all raise your right hands for me? Thank
4 you. Do you affirm to tell the truth, the whole
5 truth, and nothing but the truth in your testimony
6 before this committee and to respond honestly to
7 Council member questions? You say I do. Thank you
8 so much. Deputy Commissioner Dannenberg, you may
9 begin when ready.

10 DEPUTY COMMISSIONER DANNENBERG: Thank
11 you. Good morning, Chair Miller, and, hopefully,
12 soon to be members of the Civil Service and Labor
13 Committee. I am Barbara Dannenberg, Deputy
14 Commissioner of Human Capital at the Department of
15 Citywide Administrative Services, also know as DCAS.
16 Today, I am joined by representatives from the Office
17 of Labor Relations, DCWP, and the Department of
18 Helping Mental Hygiene-- partner agencies that have
19 been critical partners to DCAS throughout the
20 pandemic and helping shape the city's workforce
21 policies. Throughout the pandemic, we have been
22 diligent in providing expert guidance on safety
23 protocols in the workplace based on the expert advice
24 of our city's doctors and in alignment with city and
25 state regulations. During the lockdown, the city

2 quickly operationalized a teleworking system and, in
3 the return to office, the City took the necessary
4 steps to keep our employees safe: a vaccine a mask
5 mandate, widely available personal protective
6 equipment, or PPE, and optimized ventilation, among
7 other safety measures. Throughout, city employees To
8 our city running in their work has been invaluable to
9 keeping us safe and healthy and in driving our
10 recovery. This administration has been working daily
11 to ensure that workers and workplaces are safe. This
12 has been achieved through close attention to city and
13 state regulations, Centers for Disease Control and
14 Prevention, or CDC, guidance, and in consultation
15 with the city's medical experts at the Department of
16 Health. The city has protected its workforce using
17 the same core principles health experts have
18 recommended since the early days of the pandemic:
19 masking, improved ventilation, handwashing, keeping
20 distance where possible, staying home if sick, and
21 testing. But we now have the most powerful tool of
22 all: vaccination. And as our health experts and
23 others worldwide have advised, vaccines, particularly
24 when combined with these other precautions, prevent
25 transmission in severe illness and save lives. This

2 summer, the Mayor announced the vaccination
3 requirements for city healthcare and public health
4 workers and, from there, we climbed the ladder, as he
5 says. We now have a vaccine mandate for all city
6 employees and, as the Mayor announced last week, the
7 city is implementing a private sector vaccine
8 mandate, as well. In addition to getting vaccinated
9 themselves, are workforce across multiple agencies
10 has been vital to helping New Yorkers get vaccinated
11 as well. Nearly 6 million New Yorkers are fully
12 vaccinated today-- or about 70 percent-- which
13 further helps protect our workforce when they are at
14 work, in the community, in the grocery store, or at
15 home with their families. In February 2020, DCAS
16 issued a leave guidance for the pandemic. It has
17 seen 10 iterations to stay up-to-date on the latest
18 developments around COVID 19. We believe giving
19 employees excuse to leave to recover from COVID 19
20 and quarantine, to be vaccinated, to take their
21 children to get vaccinated, to take care of a loved
22 one in quarantine or isolation, or to support a child
23 due to school closure has provided flexibility and
24 created a workplace that allows employees to care for
25 themselves and their loved ones while stopping the

spread of COVID 19. In April 2020, DCAS issued a directive requiring employees to wear a facemask when interacting with the public and other employees.

DCAS commissioners directive 2020 - one now requires that every city employee able to medically tolerate a facemask must properly wear a facemask while they remain in a shared indoor city workspace. A shared workspace is a communal or open office setting where individuals cannot be separated by a closed-door.

The only exception is when someone is actively eating or drinking or has been granted a reasonable

accommodation. As you may recall, on June 19, 2020,

DCA, with support from OLR, HMH, and the Law

Department, issued formal guidance and protocols to

all city agencies on managing the office and the age

of COVID 19. The administration continues to update

this guidance-- the most recent version having been

released on October 21, 2021. The administration's

approach focuses on core categories: preparing the

buildings, preparing the workspaces, preparing the

workforce, and maintaining clear and consistent

communication. In addition to the development of

policies and procedures geared towards creating a

safe and healthy workplace, this administration has

2 also made available necessary personal protective
3 equipment. This includes the distribution of more
4 than 4 million bottles of hand sanitizer, 340 million
5 face coverings, and over 300,000 items of cleaning
6 supplies since March 2020. This administration, like
7 many state and local governments, has done an
8 effective job of utilizing vaccine and face covering
9 mandates as tools to ensure continued workplace
10 safety. The DOHMH commissioners order requires COVID
11 19 vaccination for incumbent city employees and
12 certain city contractors. The New York City vaccine
13 mandate requires that all other city employees must
14 provide verification that they are vaccinated against
15 COVID 19. This mandate continues to remain in
16 effect. Further, since August 2, 2021, the city as
17 required by Executive Order 75 and 76 that all new
18 hires provide proof of vaccination before beginning
19 their employment. Since early 2021, the city has
20 maintained a supportive environment for its employees
21 to be vaccinated. Vaccination sites are accessible
22 and appointments are easily scheduled. Employees are
23 entitled to take up to four hours of paid time off to
24 be vaccinated into a company dependent children to
25 get vaccinated. This excuse to leave time is also

2 available for booster shots. In addition, employees
3 who are fully vaccinated are eligible for three hours
4 of compensatory time off. If a covered employee has
5 a medical condition or a religious belief that
6 prevents them from complying with the vaccine
7 mandate, they can and should speak to their agencies
8 EEO officer regarding a potential reasonable
9 accommodation which are evaluated on a case-by-case
10 basis. An employee may appeal the denial via the
11 citywide panel or, in some cases, through
12 arbitration. The city employees who have not
13 requested a reasonable accommodation and are in
14 violation of the order have been placed on leave
15 without pay until they either comply or separate from
16 city service. Based on collective bargaining
17 agreements reached with 27 unions, most city
18 employees may elect to resign or retire and receive
19 and enhance payout of their sick leave days or extend
20 the length of the unpaid leave. As of today, the
21 percent of vaccinated city employees is 94%. Each
22 agency tracks compliance for their covered employees.
23 Employee vaccination information is considered
24 confidential medical information under the Americans
25 with Disabilities Act, or ADA, and is also a type of

2 identifying information protected under the city's
3 privacy law. This information is Private and secure
4 RNAs only shared with designated agency staff and
5 city officials. To ensure that the city policies are
6 well understood and implemented by agencies, DCAS
7 holds regular meetings with the agency personnel
8 officers, or APO's, on a weekly basis. During these
9 meetings, our colleagues from OLR, FISA [sp?] OPA,
10 the Law Department, and City Hall, are active
11 participants and provide guidance in their respective
12 areas of expertise. These forums provide a venue for
13 agencies to gain additional insight and guidance on
14 the latest policy updates, ask questions, and share
15 information. DCAS has also held quarterly meetings
16 with the EEO officers of city agencies and provided
17 critical training on issues related to the vaccine
18 mandate such as reasonable accommodations. As
19 always, I would like to thank Chair Miller, members
20 of this Committee, and your colleagues for your
21 continued support. I look forward to discussing
22 these policies to keep our communities and city
23 employees safe. Thank you and I welcome your
24 questions.

2 CHAIRPERSON MILLER: So, I expect nobody
3 else will be testifying. So, I am going to kind of--
4 We've been joined by Council member Rosenthal. Thank
5 you, Council member Rosenthal for attending today's
6 hearing and certainly she will join in on the
7 questioning. Going to work backwards a little bit
8 and I would like to come before we talk about the
9 mandates and where we all are all in the compliance,
10 whether it be the city or private sector workforce
11 and enforcement or not, I want to kind of go back and
12 talk about some of the things that we talked about in
13 January which was whether or not we had begun to
14 adapt best practices and what those best practices
15 were, how were we receiving information from
16 government bodies through CDC and otherwise on how
17 were we getting that information out to the relevant
18 workforce, and whether or not the agencies involved--
19 the specific agencies involved-- were getting that
20 information out to the relevant workforce and not
21 only getting the information out, but giving the
22 workforce tools and resources to operate and serve
23 safely, effectively, and efficiently. There was a
24 lot of confusion because everything was ongoing and
25 continues to be ongoing last January when we did our

2 first hearing around COVID 19 and workplace safety.

3 Specifically, there were new tasks taken upon them

4 required by the workforce and not sure whether or not

5 they were given specific training in order to meet

6 those obligations. And so, I want to make sure that

7 we have evolved and that them what we have done to

8 ensure that whatever real-time information--- and

9 it was the simplest things about usage of PPE. It

10 was social distancing. It was just an ongoing ever

11 evolving information and how did we get that

12 information out in real time? I recall testimony

13 from one of the agencies that are here today,

14 basically, saying that the city managed to many

15 different agency in such a diverse workforce and it

16 was difficult to get that information out in real

17 time. Conversely, I think DCAS did a good job on

18 putting together regulations and guidelines around

19 workplace safety and disseminating that. so what

20 we'd like to talk about is how they were received and

21 how they were enforced. So, with that being said, I

22 would begin by saying that the administration

23 directed all city public employees to return to in

24 person or office-based work beginning September 13th,

25 21. Since city public employees have returned to in

2 person work, what lessons has the administration
3 learned about protecting the health and safety of the
4 workforce? What has DCAS learned from private
5 sector--- DCAS and DCWP learned from private sector
6 policies and best practices about bringing employees
7 back to work in the in person workplace? But before
8 that, if you could expound on my little dissertation
9 about where we were then and what we're doing
10 differently now.

11 DEPUTY COMMISSIONER DANNENBERG:

12 Certainly. Thank you, Chair Miller. A good
13 morning. As you are aware, DCAS house, as you said,
14 with the ever evolving guidance, DCAS has updated the
15 guidance almost 10 times. So, as the health and
16 safety of the city's workforce is our priority, DCAS
17 has worked diligently, along with our partner
18 agencies, in order to make sure this information is
19 shared. DCAS shares this information with other at
20 all city agencies through sharing the policies. We
21 also have a webpage and APO portal or agency officer
22 personnel portal that is specifically dedicated to
23 COVID 19 information always with the latest
24 information at the top and at the forefront so that
25 people can easily distinguish between today's

2 guidance and, say, January 2020 guidance. Lessons
3 that we learn throughout this pandemic include, first
4 of all, that the city's workforce is highly skilled
5 and highly adaptable and that city employees wear
6 quickly pivoted to the telework environment from a
7 workplace environment with almost no notice. So,
8 again, we would like to acknowledge and thank those
9 city employees for keeping the city running during
10 those tumultuous times. We have also learned that
11 it's very important to have mandates in place in
12 order to keep the workplace safe such as a mask in
13 vaccine mandate, offering paid time off and excuse to
14 leave when employees are feeling ill or when they do
15 have a positive case of COVID 19, and we have all
16 learned from each other. As this pandemic has
17 evolved, both the private sector and the city have
18 worked very diligently hand-in-hand, in some cases,
19 in order to stay abreast of the most recent guidance
20 from the CDC and from the city and state authorities.

21 CHAIRPERSON MILLER: Okay. So, I think
22 one of the most pertinent questions is where we were
23 then and I would say not-- And I don't want to put
24 this on DCAS because I know this was a question and
25 some of my early weekly and biweekly meetings that we

2 were doing with OLR, Office of Labor Relations, about
3 some of the ongoing and ever-changing directives that
4 was coming from the healthcare governing agency use,
5 mostly from the federal government and state, and so
6 forth. How are they being implemented and, quite
7 frankly, the fact that we were told the not that it
8 was difficult, but it was nearly impossible
9 considering the amount of agencies in the diversity
10 of the workforce and how things change every day and
11 whether or not they were applicable to everyone. And
12 so, all responders who was responsible for that
13 particular task? If so, I'm interested to know if,
14 in fact, those things are changing, how the changing,
15 how they have changed, what we have done differently
16 to ensure that whatever guidelines come out based on
17 the new variance or new information, are we doing a
18 better job in getting it out in real time,
19 specifically, to those who may be a little more
20 impacted than others?

21 DEPUTY COMMISSIONER DANNENBERG: Sure.

22 Thank you, Chair Miller. So, yes. As you've
23 explained, the city's guidance has been evolving and
24 changing and, you know, there have been many
25 iterations of the Guidant shared. As I said earlier,

2 DCAS shares its information with city agencies with
3 the intention of city agencies sharing with their own
4 employees. Each city agency is better suited in
5 knowing how to get information to their employees
6 more so than DCAS would be. But for an example, as
7 an example, DCAS shared information with employees
8 regarding the new mandates and the changing mandates
9 via commissioners directives and commissioners
10 communications directly from the commissioner's
11 office. They were also shared by the human resources
12 department is so employees would have a contact
13 person to call into ask if they have a question.
14 DCAS also held several town halls for questions and
15 answers with DCAS employees so that employees were
16 able to ask those questions in real time and receive
17 an answer in real time from trusted agency
18 supervisors. Another way that DCAS communicated with
19 its own employees is through creating a webpage
20 specifically for the COVID 19 guidance and we also
21 included a frequently asked questions document that
22 is available to all city agencies, as well, for
23 employees to take a look and, if they have a
24 question, to look in that document very quickly if

2 they needed a quicker answer than reaching out and
3 asking.

4 CHAIRPERSON MILLER: And so, how does
5 the administration ensure enforcement of these
6 policies and, not just enforcement of the policy, but
7 to ensure that the information gets out in real time
8 and that there is compliance on these practices
9 across all of the city's various agencies and
10 workforce?

11 DEPUTY COMMISSIONER DANNENBERG: So, city
12 agencies are individually responsible for getting
13 that information to their employees and for ensuring
14 compliance of their employees because, again, city
15 agencies are best suited to know where their
16 employees are and to better explain the compliance
17 issues with their workforce in a specific way. So,
18 that is handled at the agency level and not via DCAS.

19 CHAIRPERSON MILLER: So, if there were
20 specific complaints lodged against agencies on
21 compliance lack thereof, where is that monitored?
22 Where would that go? Is there a central database
23 that the admin has? Where does that enforcement lie?

24 DEPUTY COMMISSIONER DANNENBERG: Thank
25 you, Chair Miller. So, if there are issues of

2 compliance are questions about compliance, individual
3 employees can always reach out to their human
4 resources officers to ask about compliance and to
5 ensure that their fellow employees are complying. If
6 there is an issue with a particular agency where
7 there are many complaints, the Mayors Restart Task
8 force is also responsible for ensuring that agencies
9 are compliant with all of these mandates.

10 CHAIRPERSON MILLER: Who makes up the
11 task force and could you tell us something about
12 that?

13 DEPUTY COMMISSIONER DANNENBERG:

14 Certainly. As I understand it, the Mayors
15 Restart Task force is made up of employees or
16 officials from each Deputy Mayors team and so this
17 team and task force are responsible for the
18 compliance of agencies.

19 CHAIRPERSON MILLER: So, those will be
20 that Deputy Mayors that have the particular agencies
21 in their portfolio that they are, basically, somehow
22 being bumped up to them? And is there a central
23 database that we know that ultimately is going to be
24 bumped up to someone who is responsible for
25 enforcement, such as a Deputy Mayor or this

2 particular collaboration of individuals that make up
3 the task force? Is that it and, if that is so, what
4 concerns that we received over the past year and a
5 half and how are those concerns dealt with?

6 DEPUTY COMMISSIONER DANNENBERG: So,
7 regarding the Mayor Restart Task force, I'm not
8 aware, as DCAS does not have ACT on this task force,
9 not aware of how they track information or whether it
10 is centrally located, however, can find out them
11 provide you with a representative from the task force
12 to answer that question. Regarding employees and
13 employees having access to file complaints and to
14 know who to speak to, I did forget to mention that
15 employees do have the opportunity to reach out to
16 their labor representatives, as well, in this
17 instance, and I would like to kick it over to my
18 colleague, Steve Banks, for further information.

19 STEVE BANKS: Yeah. And I will say that,
20 while it's not the sole mechanism for employees or
21 individual issues to be raised, certainly our office,
22 as being the main liaison with the labor unions,
23 since March of 2020, we have dealt with various
24 issues. Obviously, there's been a lot of changes in
25 what the focus has been. As Barbara said initially,

2 it was everybody adjusting to being at home. Last
3 summer was more about-- sorry. The summer of 2020,
4 it was more about being in fasteners for social
5 distancing in the parks and outside and stuff like
6 that. And now, most recently in the past couple
7 months, we have been dealing with the vaccine
8 mandates. But we are dealing every single day with
9 labor representatives and there have occasionally
10 been issues, although it usually hasn't risen to the
11 level of a grievance or any kind of litigation. It's
12 been more of a labor-management conversation where we
13 might be alerted that a given agency is-- or really
14 not so much a agency, but a work location. It's
15 usually more of a remote kind of work location might
16 be out of step with what the general practices are
17 and we are usually able to resolve that with the
18 agency.

19 CHAIRPERSON MILLER: So, that would be
20 my concern about some of the concerns about what the
21 workforce actually has. Obviously, there is a
22 process and, you know, we've talked about the
23 grievance process in those terms and conditions and
24 what workplace safety looks like. So, one, have you
25 receive such grievances and what are the grievances

2 and are they based on kind of each step that you
3 articulated of where we were from the very beginning
4 in the PPE and the social distancing and other areas
5 to workforce mandates? Are they based simply upon
6 that or is it something specifically that we are
7 seeing around compliance that is there anything that
8 we were seeing in 2020 that were still saying today
9 that concerns the workforce, considering all of the
10 safety mechanisms that have been put in place
11 subsequently where the things that are still
12 occurring? How do we address those and then we could
13 talk about where we are today in terms of mandates.

14 STEVE BANKS: Yeah. So, one of the things
15 that we are most proud of at OLR is that we have good
16 everyday working relationships with all of our labor
17 partners. So, the instances of something rising to
18 the level to be a grievance or litigation-- you
19 know, I am General Counsel at OLR, so I see the
20 arbitration cases and [inaudible 00:30:54] practice
21 cases. You can really count on one hand the number
22 of cases that have been filed, you know, related to
23 the use COVID 19 protocols since the pandemic
24 started. I can think of, you know, at least a few of
25 those of been settled between us and the union, you

2 know, in the course of those cases. But, obviously,
3 it is a continuing effort, right? We have also been
4 and had some discussions recently with District
5 Council 37 in the MLC about setting up a standing
6 labor-management committee that would be something a
7 little bit more formal, right? What I've been
8 describing as it has occurred it's been a little bit
9 more informal. The union will give us a call and
10 say, do you know what is happening at such and such
11 agency? Can we try to work through those issues
12 together. We talked about setting something up a
13 little bit more formal where there might be a monthly
14 or quarterly labor-management meeting with
15 representatives from Barbara's office and OLR and
16 City Hall and a wide swath of union so that everyone
17 is hearing the same message. So, we will probably
18 get that set up and going when we are in more of a
19 steady state.

20 CHAIRPERSON MILLER: So, you said there
21 was probably just a handful of grievances around this
22 issue. Is that because they were resolved or they
23 were just no concerns that we kind of come before we
24 went to the final grievance process, that there was
25 so full calling kind of subsequent conversation that

2 things were able to be worked out? And, if that were
3 the case, specifically what grievances found their
4 way through the process?

5 STEVE BANKS: Yeah. From my standpoint, I
6 think it is what you mentioned that, first of all,
7 you know, every single issue is not going to go to
8 the citywide Office of Labor Relations, right? The
9 agencies and the labor unions, finish horizons, are
10 able to work stuff out, too. And so, yeah. That is
11 my sense is that, when questions have arisen, we've
12 been able to resolve those sort of before they have
13 become a grievance. That is my perception.

14 CHAIRPERSON MILLER: Okay. We've been
15 joined by Council member Dinowitz. Thank you, sir,
16 for joining us. I assure you Council member
17 Dinowitz, as a former New York City public school
18 teacher, he's very much concerned about workplace
19 safety within the DOE and just, again, how services
20 get delivered and how we protect our workforce and
21 those that they are charged with servicing. Are
22 there, in relationship to those grievances, are there
23 some agencies that are more aggressive that, in terms
24 of grievances, which means that ultimately they could

2 not resolve some of the concerns that represented the
3 needs of the workforce?

4 STEVE BANKS: No. I don't think so. I
5 think that our city agencies, by large, are all on
6 the same page in terms of the protocols. Like I
7 said-- Again, this is just my perception from what
8 I've seen-- have been more, like I said, more those
9 more remote worksites where there might only be only
10 a few number of employees, right? The buildings were
11 a lot of city employees are, the MUTI building, One
12 Police Plaza, places like that, you know, I don't
13 think you're going to see health and safety
14 complaints or issues, but there might be, you know,
15 individual isolated circumstances where there's a
16 garage in some part of the city and, you know, they
17 are not following the protocols as they should. But
18 then once, I think, you get in touch with agency
19 leadership, those issues, have I seen them, work
20 themselves out.

21 CHAIRPERSON MILLER: So, I'm going to
22 just jump because I am reminded of a particular
23 agency and, clearly, as we move forward, we know that
24 there are some agencies that have vehemently
25 disagreed with the mandate and there been grievances

2 filed or whatever and we'll kind of get into that.

3 But what I know is that back in 21 January or

4 February, that there were a couple of breakouts and,

5 in fact, during the hearing, we highlighted some of

6 the problems that were going on. Places like the

7 Board of Elections in which there'd been multiple

8 breakouts at different facilities during the course

9 of the pandemic but there been several lives lost in

10 that, quite frankly, there'd been the level of

11 negligence and that was highlighted. Specific way,

12 that you had multiple agencies sharing the same

13 brick-and-mortar and, during outbreak, the they were

14 managed in different ways by different agencies. And

15 that, obviously, spoke to a lack of coordination, but

16 it had also spoke to a lack of oversight whereas

17 someone could come in and do immediate testing, do

18 immediate cleanup, and mandate quarantining an

19 invoice shut down where others were allowed to just

20 go on his business as usual. How do we address

21 something like that and what are the possibilities

22 years that we will see something in such a situation

23 in the future where multiple agencies are being

24 housed in the same location will be responding very

25 immediately to vehemently different?

2 DEPUTY COMMISSIONER DANNENBERG: Thank
3 you, Chair Miller. As we discussed earlier, DCAS
4 released guidance managing the office and the angel
5 of COVID 19. This guidance has also been updated
6 quite regularly and, within that guidance, there are
7 protocols or when there is a positive case both in
8 the workplace and outside of the workplace, protocols
9 for cleaning and deep cleaning, and also who to
10 contact if you have questions regarding these
11 processes and policies. I'm going to turn it over to
12 my colleague at the Department of Health for further
13 information.

14 UNKNOWN: Yes. So, as is outlined in
15 the DCAS guidance about managing cases in a
16 workplace, winning city worker tests positive for
17 COVID 19, they need to tell their HR person and then
18 we have a process set up for agencies to handle those
19 cases and report them. There's a phone number that
20 they can call at the Health Department to report
21 cases and close contacts and to get guidance on how
22 to manage contact tracing for people who may have
23 been in close contact with the individual at work and
24 might need to be recommended to quarantine. So, just
25 a reminder as we are talking about contact tracing

2 and identifying those who are close contacts, those
3 are a person who has been for at least 10 minutes
4 within 6 feet of a person while they were infectious
5 with COVID even if they were masked and vaccinated.
6 That is identified as a close contact, but people
7 don't need to quarantine if they been vaccinated even
8 if they had a close contact. So, these are all the
9 guidance that is in the DCAS guidance and that we are
10 helping to implement across the city.

11 CHAIRPERSON MILLER: Clearly, the
12 incidents that we are referring to proceeded vaccine,
13 all right? So, were talking January and February and
14 may be the very beginning of the vaccine and not
15 necessarily a viable option. But in terms of those
16 folks who may or may not of been in compliance back
17 then-- So, let me ask you this. Do we know what the
18 vaccine percentage is for individual agencies? Do we
19 have that information available?

20 DEPUTY COMMISSIONER DANNENBERG: I'm going
21 to have to ask my colleague at Department of Health
22 for that information.

23 UNKNOWN: So, I don't the number of
24 cases among city employees with me today. We can
25 bring that back to Health Department and see what we

2 might be able to provide. I will say we are
3 monitoring those cases for any patterns that might
4 indicate that transmission is occurring in the
5 workplaces and that we are not seeing patterns that
6 indicate that transmission is happening within the
7 workplace. And I think that that speaks to how
8 effective some of the recommendations have been about
9 how to manage the workplace during COVID.

10 CHAIRPERSON MILLER: So, in the case
11 that we saw last year where we had infections at
12 these facilities, these DOB facilities and you had
13 DCAS employees taking part working in the facilities,
14 you had DOITT employees, and you had the Border
15 Elections employees and being managed so differently
16 and I think what we have seen over the past year and
17 a half is the different impacts COVID 19 has had on
18 different communities as highlighted on gender, race,
19 ethnicity, and so forth. I want to make sure that
20 that is not manifested itself even within the New
21 York City workforce. And so, when we look at those
22 who are vaccinated and then those that agencies that
23 kind of speak to it, and if, as we move forward, what
24 is being done to encourage folks? Obviously, people
25 have very strong feelings about to vax or not vax,

2 but these agencies that I'm looking at that are-- so
3 you don't have any numbers here? What are the
4 numbers for the police department? Does anybody
5 know? Fire department? Department of Corrections?
6 FDNY? Board of Elections?

7 DEPUTY COMMISSIONER DANNENBERG: So, as my
8 colleague stated earlier, we don't have those numbers
9 for individual agencies, but we can certainly see
10 what we have available and provide that to you in
11 your office.

12 CHAIRPERSON MILLER: Have any of these
13 agencies filed a grievance on the vaccine mandate?
14 Any of the bargaining unions representing workers for
15 these agencies?

16 STEVE BANKS: So, yeah. We have had a
17 couple of improper practice cases filed regarding the
18 vaccine mandate that are currently in litigation, you
19 know, from a handful of unions. And I think you
20 rightly made the distinction between the agencies and
21 the unions, right? Our agencies have all been fully
22 supportive and have been rolling out the vaccine
23 mandate and that is why we are at 94 percent, like my
24 colleagues said. We have had some isolated instances
25 where we have had some challenges from unions which

2 my office is responsible for defending and that is
3 currently pending.

4 CHAIRPERSON MILLER: So, how many
5 grievances are out there specifically from how many
6 agencies? Do you know?

7 STEVE BANKS: I think related to the
8 vaccine mandate there are two cases.

9 CHAIRPERSON MILLER: Two ongoing or two
10 grievances that have been filed?

11 STEVE BANKS: so not aware-- A grievance
12 an allegation that the contract was filed. I'm not
13 aware of any grievances that are pending at my
14 office. We do have a couple of improper practice
15 charges. I think to are currently pending and there
16 may been a third that was filed--

17 CHAIRPERSON MILLER: Do you know what
18 agencies they are or what bargaining units that filed
19 this grievances?

20 STEVE BANKS: So, one was related to the
21 fire department, the UFA and the UFOA, and the other
22 was a group of unions that are employed at various
23 agencies.

24 CHAIRPERSON MILLER: Okay. DCAS issued
25 eight revised workplace guidelines between June 20

2 and October 21. The municipal workforce returned to
3 work place in September of this year. Of those, what
4 is the impotence of each date of health and safety
5 guidelines? And did OLR give input on each update
6 and the health and safety guidelines? As well as all
7 our, how much, from DCAS' perspective-- and I know
8 early on-- but how much of policy reflects the
9 collaboration between labor and agency parties? Or
10 is this just a straight DCAS thing?

11 DEPUTY COMMISSIONER DANNENBERG: Thank
12 you, Chair Miller. The impetus behind all of the
13 updates to the DCAS guidance were due to either CDC
14 change and mandates, state or local authority change
15 in mandates, and all of these updates were made in
16 collaboration with our oversight partners such as
17 OLR, Department of Health, the Law Department, and
18 City Hall.

19 CHAIRPERSON MILLER: And in terms of the
20 local bargaining unions working in representing
21 workers, what did their involvement look like in this
22 process? Because I have spoken to some of my
23 contemporaries and they didn't have much involvement
24 in the process and that concerned them.

2 STEVE BANKS: Sure. So, I mean, with
3 regard to the DCAS policies that Barbara was
4 describing, we certainly disseminate those to all of
5 our labor unions. I know you mentioned earlier some
6 of the challenges with getting communications out to
7 all employees. I think to add to everything that
8 Barbara mentioned earlier, that our labor partners
9 are another important way that that information gets
10 out there. So, at any time any of these major
11 policies have been changed, usually a day or two
12 before we share them with-- with each union, I think
13 we have sort of a mailing list of 47 different
14 organizations that these sorts of communications
15 would go to and, while a lot of this has been
16 changing very quickly, like Barbara said, you know,
17 CDC guidance needs to be aligned to. It can't wait
18 for, you know, a whole round of comments, but there
19 have been instances where we get feedback from our
20 labor partners as part of that process and if we're
21 not able to make an amendment-- an appropriate
22 amendment-- to that version that's going to go out a
23 day or two later, that might be incorporated into the
24 next one. Usually, like Barbara said, with OLR
25 reviewing as part of that drafting process,

2 obviously, our role and responsibilities is we have
3 an eye to the reaction of our labor unions would be.
4 So, you know, through us, that's another way that is,
5 you know, sort of anticipated even before it's a
6 comment or a suggestion.

7 CHAIRPERSON MILLER: East agency is
8 required to establish a joint labor management
9 workplace safety committee to raise health and safety
10 concerns and review and implement policies. Can you
11 give examples of some of the tangible policy changes
12 resulting from these committees and/or do you hear
13 from-- and so let's bump that up. So we're talking
14 about agencies. Do you guys actually hear from these
15 committees within the agencies? Is there a role for
16 them to play in implementation of policy considering
17 what's happening on the ground? In terms of what you
18 guys are receiving, maybe CDC as it relates to a
19 particular workforce, what's the collaboration around
20 implementation of that?

21 STEVE BANKS: Yeah. So those joint labor-
22 management health and safety committees that you
23 described, you know, they would occur at the agency
24 level. Usually, my understanding is that it would be
25 Chaired by the Director of Labor Relations at each

2 agency and the purpose of those is, you know, well
3 before COVID, to have a regular, systematic meetings
4 and to have a forum for issues to be raised and
5 resolved. And, obviously, the content of those
6 meetings is going to be very different depending on
7 which agency it is and what health and safety issues
8 might arise at the fire department as compared to the
9 Department of Corrections and stuff like that. so,
10 you know, as an oversight agency, we don't get
11 regular reporting on those meetings because I think
12 the very purpose in the very idea is that it is
13 supposed to be for hyper- localized issues, right?
14 It's not a citywide policy. It's not a DCAS policy
15 that applies to every agency. It's going to be very
16 specific to whatever that worksite might be in
17 whatever issues labor and management need to work for
18 together.

19 CHAIRPERSON MILLER: Right. And so, my
20 concern is that those concerns-- those very nuanced
21 concerns of each individual agency-- that are put
22 forth by those working committees around health and
23 safety, I think those are probably the most
24 significant in terms of creating policy-- impactful
25

2 policy. How do we ensure that their force is being
3 heard in that there is compliance?

4 DEPUTY COMMISSIONER DANNENBERG: Thank
5 you, Chairman.

6 CHAIRPERSON MILLER: Or is the
7 responsibility simply just these are the guidelines.
8 You guys work it out. How does that work?

9 DEPUTY COMMISSIONER DANNENBERG: Thank
10 you, Chair Miller. One of the ways that these labor
11 committees, again, as my colleague explained, they
12 are focusing on localized issues within an agency.
13 However, if an agency does have questions about that
14 localized issue or if they expressed concerns about
15 those localized issues, I want to reiterate the DCAS
16 hosts weekly information sessions with the agency HR
17 community and we also host regular sessions with the
18 EEO community. But this is a forum for people to
19 attend in order to raise these issues and seek
20 clarity or seek further guidance on specific issues
21 that are happening at their agency level.

22 CHAIRPERSON MILLER: Right.

23 DEPUTY COMMISSIONER DANNENBERG: In these
24 meetings are actually quite popular. Some weeks we
25 will have 300 representatives who are clearly not

2 specifically HR representatives, but they do include
3 other folks from the agency who do have questions
4 that must be addressed.

5 CHAIRPERSON MILLER: And so, how's that
6 dialogue shaped policy? Help to shape policy, as
7 well? That voice that sort of not normally HR or
8 policy royalties, has it assisted in that very hyper
9 nuanced way of keeping people safe and-- So, the
10 point is, you know, how are we creating and
11 replicating this opportunity for workers throughout
12 agencies and what does the oversight of that look
13 like? You know, I have some very specific concerns
14 about agencies that we know were doing well and we
15 know that, when we looked at the demographics and the
16 numbers of who the front line workers are, the
17 communities that were being impacted and that these
18 are generally marginalized communities of color that
19 folks that are forced to go to work every day that
20 don't have an opportunity to work from home,
21 potentially infecting themselves and their families,
22 ultimately, their communities. Have we done and paid
23 particular attention to that? Have we paid
24 particular attention to the EMS workforce? The EMS
25 workforce that is predominately black and brown and

2 that is predominantly women that, obviously, we're
3 the frontline frontline, particularly considering
4 that, in the first week of the shutdown, FDNY put out
5 a memorandum that said that they did not answer:
6 related calls nor respiratory related calls because
7 of they lived within congregate living settings and
8 the potential for the spread and, therefore, this
9 task was laid solely upon EMS. And we know they had
10 a significant number of early challenges, high
11 numbers of infection and deaths. And we also know
12 that they represent marginalized communities. What
13 specific attention have we paid to that, if any?

14 DEPUTY COMMISSIONER DANNENBERG: Thank
15 you, Chair Miller. Regarding-- Just to go back to
16 the beginning your question, regarding individual
17 voices and individual situations at agency, I
18 mentioned that we do discuss them at our weekly
19 forum, but I neglected to also discuss what happens
20 after those weekly forums. And, again, the oversight
21 agencies meet regularly to discuss such issues,
22 especially when we don't have a good answer as to how
23 to handle that. So, yes. Individual concerns and
24 individual issues at agencies or within workspaces do
25 rise of the level of assisting us with making either

2 our guidance more clear or offering more flexibility
3 with certain guidance or offering more examples of
4 how to implement the guidance. Regarding the
5 particularly minority population and vaccination,
6 again, I would just like to reiterate that we are
7 grateful to our essential workers for showing up and
8 working every day and keeping the city safe and we
9 are deeply saddened by the loss that was resulted
10 from that work. There is the racial equity vaccine
11 committee that does address these specific issues
12 with specific jobs, agencies, and then also
13 neighborhoods where we are seeing vaccination rates
14 that could be improved and are falling behind
15 vaccination rates of their work populations or other
16 neighborhoods. And I'd like to ask my colleague to
17 offer any other information regarding those
18 vaccinations and what we are doing to address.

19 UNKNOWN: Thank you. Yes. And I think
20 Barbara summarize this in her testimony, also, that,
21 as we rolled out our vaccine program, the issue of
22 racial equity is something we paid very close
23 attention to, both that the Health Department and in
24 the Vaccine Command Center and we have really seen a
25 lot of effectiveness with the vaccine mandates that

2 have been put into place and climbing the ladder, so
3 to speak, of extending the vaccine mandates to cover
4 more of the population. But in addition to that, the
5 Health Department does a lot of community outreach
6 through a lot of neighborhood and we have, you know,
7 again partnered with our fellow city agencies to make
8 sure that people have the information that they need
9 to make about vaccination.

10 CHAIRPERSON MILLER: So, are we working
11 with those specific bargaining unions representing
12 those women and men of these agencies that are being
13 impacted and, specifically, what resources and what
14 are we doing to impact, number one, those with higher
15 infection rates and those with low vaccination rates?
16 Have we identified that and what are we doing to work
17 with those groups? And then, again, what are we
18 hearing from those groups about their concerns and if
19 they have any complaints about either or? Because I
20 do believe in the mandate for the municipal
21 workforce, but, at the same time, people have
22 legitimate concerns. What are we doing to mitigate
23 those concerns and create outside of the vaccine were
24 is the vaccine that and all that we have not-- that
25 we no longer focus on all of the other things that

2 have gotten us here, as you said, and that things
3 that we continue to make sure that we are sanitized,
4 clean, social distancing that need to get done, but
5 also from all the things that-- to protect the
6 workforce, right? Which means those who have to see
7 clients, you know, very early on I remember in my
8 industry that the MTA said don't wear a mask because
9 they offend people. They offend customers and
10 they're not going to ride and other things like that.
11 and I know that there were agencies withing social
12 services that continued to see clients when clients
13 were not mandated to wear masks, although you were.
14 And then, at the same time, we weren't sure on what
15 social distancing meant and it meant something
16 different depending on the services that were being
17 delivered. What do we know about that and what's the
18 feedback, again, from the workforce and how do we
19 address that?

20 DEPUTY COMMISSIONER DANNENBERG: Thank
21 you, Chair Miller. As I had discussed earlier in my
22 testimony, DCAS and the rest of the city feels that
23 clear and consistent messaging regarding mandates and
24 how to create a safe workplace are critical in
25 keeping our city workforce safe. You're correct

2 that, at certain times different, you know, masking
3 mandates or no masking mandates, testing mandates
4 throughout the course of the pandemic. So, as the
5 guidance and the science has evolved, so has our
6 guidance. And, you know, so today we can say that we
7 recommend that all employees be masked at all times,
8 especially when they are interacting with others when
9 they're not eating and drinking. So, this mask
10 mandate has evolved, as you said, throughout this
11 process.

12 CHAIRPERSON MILLER: and, certainly, we
13 know that the backs mandate is applicable to
14 everybody, as you said, except for those with some
15 reason for reasonable accommodations and others. I
16 know that, you know, prior there were agencies that
17 were allowed to test out and what was that. Was
18 there success in that or that forced us to move away
19 from a lack of success for it was we were looking for
20 uniformity within the mandate? What did the numbers
21 tell us and why did we move so aggressively toward
22 the mandate as opposed to a testing option?

23 DEPUTY COMMISSIONER DANNENBERG: I'm going
24 to ask my colleague from Department of Health to talk
25 about the importance of the vaccine mandate.

2 UNKNOWN: Thank you. Yes. You know,
3 vaccination is definitely our strongest and best
4 protection against both transmission of COVID 19 and
5 also of the most severe consequences. So, although
6 testing can help to identify cases, it will not
7 identify all cases and it can't help people protect
8 themselves from the most severe outcomes of COVID 19
9 infections.

10 CHAIRPERSON MILLER: All right. Thank
11 you. And while we're on that and I wasn't quite
12 ready to transition right over to the vaccine, but
13 can we talk about boosters and what the future may
14 hold?

15 UNKNOWN: Sure. So, people now 16 and
16 older are eligible to receive a booster depending on
17 how long it's been since they finished their initial
18 course of the vaccine. The Health Department is
19 strongly recommending that everyone who is eligible
20 for a booster get a booster. That will be our best
21 protection going into this winter and we're seeing
22 cases rise over the past month or so already.

23 CHAIRPERSON MILLER: Okay. And before
24 we kind of just finish on the vaccine, can we talk a
25 little about the private sector workforce and DCWP

2 and the work that they have done and what we see with
3 the paid sick and other things and implementation
4 before we get to the implementation of the mandate,
5 but what have we seen and I know it was a little bit
6 of a more challenging task. There was a kind of to
7 reel in a far larger workforce but also one that, you
8 know, that's not sure what authority that we actually
9 have to implement some of these policies, but what
10 have we done and, particularly, as it relates to the
11 Heroes Act and the law that mandated since in
12 placement of healthcare safety protections and
13 respond to COVID 19 and the purpose of, as it relates
14 to these front-line workers, to the disease and what
15 has been the response thus far?

16 UNKNOWN: Thank you, Chair Miller.
17 Want to be very clear. The paid safe and sick leave
18 law has saved lives. The City Council has been ahead
19 of the curve. That law has been amended and expanded
20 since 2014, most recently to allow for additional
21 time, four hours, per shot per child or dependent.
22 And these are the exact laws and regulations that are
23 helping our city's recovery today. So, paid safe and
24 sick leave has been successful and we are honored
25 and, quite frankly, determined to continue to enforce

2 that law, especially during these times. As it
3 relates to the Heroes Act, that is the law that the
4 Department of Labor, as well as the Department of
5 Health of New York State are involved in issuing
6 guidance, as well as enforcing. Of course DCWP's
7 Office of Labor, Policy, Standards is a hub to all
8 workers regardless of jurisdiction, workers have a
9 number of different ways to reach our office: by
10 phone, email, and otherwise, and we make referral is
11 necessary and provide that top-level guidance. You
12 know, during the pandemic, right from the jump, we
13 established a home page on our website,
14 NYC.gov/DCWPalert. That was a centralized hub where
15 you could find guidance, for example, for workers and
16 employers in a range of different languages often
17 above and beyond what is required by local law that
18 had all the different requirements of New York State,
19 federal, as well as municipal guidance, so that
20 employers and workers knew what their rights were or
21 employers what their obligations were. You know, in
22 2014, our first campaign for paid sick leave then to
23 come before we incorporated safe leave into this, was
24 that if you feel 100%, you will work 100%. We
25 believe strongly what we issue these guidance is and

2 what were out doing outreach business-to-business and
3 hosting webinars, utilizing our faith and community-
4 based partners, that we are moving the needle in New
5 York City's recovery and, like I said, we are
6 committed to that work and honored to do it.

7 CHAIRPERSON MILLER: So, in terms of
8 enforcement, you know, how is it done? Do we
9 actually get out to make sure were all these
10 regulations and all these new policies being adhered
11 to. Are we looking to see that this crucial
12 information if properly posted throughout the city of
13 New York? What does that look like in terms of do
14 you have the support, the workforce, that allows you
15 to support workers in that way to ensure that--
16 listen, ignorance is bliss and there's a lot of
17 folks-- particularly, there a very vulnerable
18 workforce who aren't organized, who doesn't have this
19 information readily available to them as a target
20 audience, right? So, every worker in the city of New
21 York is not being contacted by their union by updated
22 policy and other things. How do we reach our target
23 audience in this case and how do we ensure that the
24 proper enforcement happens when people aren't in
25 compliance?

2 UNKNONW: Thank you for the question.

3 Well, you raise two great points. I think, first and
4 foremost, what we always say the greatest way to get
5 ahead of this is by affirmative outreach. At DCWP,
6 we leverage our in-house expertise to make sure that
7 we are reaching out to the targeted audience is based
8 on a databased approach and strategically. During
9 the pandemic itself, we leverage not only our own in-
10 house expertise, but also information about Test and
11 Trace, for example, had. Joining them on
12 doorknocking campaigns, being present at dispensaries
13 sites for the vaccine so that folks knew what
14 resources were available so that, if there ever was
15 an issue for them in their private, you know,
16 workforce job, that they knew that the city
17 government had rights or regulations that apply to
18 them. As it relates to our enforcement, in general,
19 as with all our municipal workplace laws, we enforce
20 by receiving incomplete or by launching a proactive
21 investigation into an industry. Right now, for paid
22 safe and sick leave, we have a campaign that is
23 underway and we have adapted that campaign not only
24 to incorporate the most recent change which is that
25 for our additional time per dose per child or

2 dependent, but also, importantly, we are learning
3 from our enforcement. We know that there are certain
4 industries, for example, through our investigations,
5 that have had issues with paid safe and sick leave
6 compliance and we are working with our vendors to
7 ensure that we are doing direct outrage and
8 enforcement to those industries so that they know
9 about the laws and up-to-date with the latest
10 guidance.

11 CHAIRPERSON MILLER: Could you give us
12 examples of some of those vulnerable industries or
13 those industries that likely to be in compliance for
14 whatever reason?

15 UNKNOWN: Sure. I think that we, most
16 recently, had an announcement about a joint
17 investigation settlement that we had with the Atty.
18 Gen.'s office related to home healthcare industries.
19 Our paid care division at OLPS is dedicated to
20 reaching out to this vulnerable constituency and
21 making sure that they are aware of the laws and they
22 well be, as I alluded to earlier, subjected to, you
23 know, direct communications. Of course, and multi-
24 languages, as well as the employers themselves being

2 put on notice about the different laws and the
3 adaptations evident as it relates to them.

4 CHAIRPERSON MILLER: Could you speak
5 about the information obtained from Test and Trace
6 and there were some questions about the
7 effectiveness, but particularly as it relates to the
8 workforce, data received. Could you give us some
9 insight on that?

10 UNKNOWN: Sure. So, I do want to be
11 clear. When we deploy our outreach throughout the
12 city, it is most often databased and also based on
13 requests that we receive as an agency. You know, in
14 the case of Test and Trace and others, a lot of that
15 work and where boots were on the ground were
16 indicative of places where there were, you know, you
17 low utilization of vaccines or high rates of spread.
18 There was also, just on our own and just pivoting a
19 little bit to how we leveraged our Office of
20 Financial Empowerment which is also at DCWP, we
21 relied a lot on demographic and census data where we
22 saw and where we know there are communities of low
23 income neighborhoods that utilized a number of
24 different government resources and we wanted to make
25 sure that we are using that information and applying

2 it to, of course, getting the word out for this life-
3 saving law, the paid Safe and sick leave law.

4 CHAIRPERSON MILLER: Yep. So,
5 specifically, on that note, as having identified
6 those communities in those workforces within those
7 communities, how then, given the potential lack of
8 access and online access, how did we reach that
9 target audience? What did that look like?

10 UNKNOWN: Yeah. I think it's ever
11 adapting. Obviously, during the pandemic, we did a
12 lot of work over webinars, but also, importantly,
13 understanding that many of these folks may not have
14 access to certain technologies where they can, you
15 know, here this information first hand. We had boots
16 on the ground. We went door to door whether it was
17 with Testing Trace or just on our own helping out
18 with the reopening for New York City. You know, that
19 was more business facing, but also, you know, reliant
20 on community and faith-based leaders and those that
21 already have that great standing in these
22 neighborhoods and making sure that they are
23 amplifying our work and adding another level of
24 validity to what we are saying.

2 CHAIRPERSON MILLER: Okay. And for OLR,
3 we know that, you know, based on collective
4 bargaining, they are very, very specific language
5 around sick leave usage, right? Which I am sure that
6 there is some, but very few have permit sick leave
7 usage for dependents, spouses, and so forth. Have
8 you address that? Has that been-- What does that
9 look like in terms of being able to actually use
10 those and times that we are seeing now outside of the
11 specific CBA?

12 STEVE BANKS: Yeah. I appreciate that
13 question. So, the policies that Barbara described in
14 her testimony and in response to some of the
15 questions, particularly the excused absence if
16 someone has symptoms of COVID or if they test
17 positive, at the time off and compensatory time if
18 someone goes to get the vaccine and then, most
19 recently, the time off to take your child to get the
20 vaccine, those are all over and above the annual
21 leave and sick leave benefits that are in our
22 collective bargaining agreement. So, they are, you
23 know, layered on top of whatever existing leaves and
24 policies might have pre-existed. And that is one of
25 the reasons why, when I mentioned that we regularly

2 communicate with our unions with some of these policy
3 changes, the general response-- you know, I don't
4 want to paraphrase, but it's been, thank you. We
5 appreciate it. So--

6 CHAIRPERSON MILLER: So, they have been
7 modified universally and to what degree does agency
8 have discretion as to whether or not they are going
9 to comply? Is it about availability of something
10 like that? Were hearing that. Or is it universal
11 that you can now use sick leave for dependent
12 children and spouse and those living in the household
13 or however broadly defined?

14 STEVE BANKS: So, the DCAS policies that we
15 are talking about which relate to excused leave,
16 right? Leave to go get the vaccination order to
17 bring a child to get the vaccination, those are
18 applicable to every mayoral agency. It might get a
19 little bit more nuanced with non-mayoral entities
20 like the City Council where there might be a little
21 bit of discretion there. I will let Barbara speak
22 more towards DCAS' jurisdiction. But for the folks
23 that we deal with, right, the uniformed and civilian
24 mayoral agencies--

2 CHAIRPERSON MILLER: No. I'm talking
3 more about sick leave. Annual leave.

4 STEVE BANKS: Right. So what we're
5 providing--

6 CHAIRPERSON MILLER: So, specifically,
7 sick leave is under the city's collective bargaining
8 agreement. It's for you. Right? Not for your
9 child. Not for your spouse. Has that been modified?

10 STEVE BANKS: R. So, yes. In general, if
11 someone has a sick leave bank, if they accrue sick
12 leave like I accrue 12 days year, you can use up to
13 three for the care of a family member. That was pre-
14 COVID. In addition, since the spring of 2020-- and
15 Barbara can fill you in more on the specifics-- we
16 have been providing excused absence, so you don't
17 even have to charge your sick leave balances for a
18 variety of reasons.

19 CHAIRPERSON MILLER: Well, how do you
20 get paid if you don't use your sick leave?

21 STEVE BANKS: It's an excused absence.
22 It's better. You're not charging your leave balances
23 in you're getting paid.

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2 CHAIRPERSON MILLER: So, you have an
3 excused out in addition to annual and up to how much
4 time?

5 DEPUTY COMMISSIONER DANNENBERG: Sure. If
6 I can provide further information regarding the
7 excused leave. Excused leave was originally made
8 available at the beginning of the pandemic through
9 the FFCRA. And that is through the federal
10 government. And, again, these precautions were put
11 in place so that we were not penalizing employees who
12 may have used their sick leave balances or their
13 annual leave balances or who, you know, in the
14 private sector that actually didn't accrue any.

15 CHAIRPERSON MILLER: So, this is not
16 FMLA, but is some form of FMLA. But with FMLA, you
17 will ultimately use your own entitlement balances if
18 you want to get paid. So, how does that work now?

19 DEPUTY COMMISSIONER DANNENBERG: This is
20 separate and apart. You are correct that with FMLA,
21 you would exhaust your leave balances. With excused
22 leave, you do not have to do this. You don't have a
23 bank. This is leave that is provided by the city on
24 a case-by-case basis for individuals, as Steve
25 reiterated, either who have COVID 19 themselves, have

2 been exposed and are required to quarantine, their
3 child school is been closed and so they need to stay
4 home with their child. All of this excused leave is
5 separate and apart from an employee's leave balances.
6 There leave balances are not touched. There is no
7 need to exhaust them. And, again, it was made
8 possible through the FFCRA. That expired-- the ACE,
9 American Cares Act, came out afterwards, but the
10 city-- and that also expired. However, the city
11 continues to provide this excused leave, again, as a
12 major line of defense in order to keep our employees
13 safe and to keep the workplace safe. So--

14 CHAIRPERSON MILLER: Is it unlimited?

15 DEPUTY COMMISSIONER DANNENBERG: I'm
16 sorry?

17 CHAIRPERSON MILLER: Is it unlimited
18 during the course of the illness and recovery?

19 DEPUTY COMMISSIONER DANNENBERG: So, if
20 you contract COVID 19, you are the employee, you have
21 up to four weeks of excused leave, however, if you're
22 hospitalized due to COVID 19, as many people were at
23 the beginning of the pandemic, the excused leave will
24 cover you from that time that you are hospitalized
25 through your recovery.

2 CHAIRPERSON MILLER: Is this the New
3 York City policy? Is this a federal policy? Is this
4 a state policy? And where does the money come from
5 to pay for it?

6 DEPUTY COMMISSIONER DANNENBERG: This
7 began as a federal policy in the city has, as we do
8 with most of our leave and most of our lines of
9 defense against this disease, the city has expanded
10 upon it and kept this policy in place. I can't
11 speak-- we don't have a representative here from--

12 CHAIRPERSON MILLER: I've heard from
13 workers that were hospitalized early for significant
14 or sick for a significant period of time. I know one
15 person was for almost 40 days in March 2020. The
16 recovery lasted nearly a year when they went back to
17 work, all of their balances had been exhausted. So,
18 my question is was it about-- at that time it was
19 four weeks and did not run unlimited at that moment
20 or whatever. So, if we can get-- I don't want to
21 spend too much time on that, but that is certainly a
22 question that we've heard in my office from multiple
23 agencies that they came back to work and didn't have
24 any sick days and didn't have any annual days. They
25 were then, you know-- and these are folks who were

2 sick who it took them six months after the so-called
3 recovery are getting out of the hospital to get back
4 to work. So, you know, again, how do we protect the
5 workforce is important. So, that is good to know.
6 Does everyone know that? How does that work? And
7 then, for the health experts, how much of this is--
8 this policy and recommendations would be applicable
9 to the city's workforce on the private side, as well?
10 Obviously, MTA has a different policy, right? But,
11 clearly, you know, some would believe that it was a
12 big-- in the early pandemic that a large chunk of
13 the infection occurred probably underground in those
14 kind of settings and for them to have a different
15 policy certainly potentially has an impact on the
16 entire city's workforce and everybody was using that
17 system.

18 DEPUTY COMMISSIONER DANNENBERG:

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20 DEPUTY COMMISSIONER DANNENBERG:

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22 DEPUTY COMMISSIONER DANNENBERG:

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25 COUNCIL MEMBER :

1 COMMITTEE ON CIVIL SERVICE AND LABOR

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1 COMMITTEE ON CIVIL SERVICE AND LABOR

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C E R T I F I C A T E

World Wide Dictation certifies that the foregoing transcript is a true and accurate record of the proceedings. We further certify that there is no relation to any of the parties to this action by blood or marriage, and that there is interest in the outcome of this matter.



Date FEBRUARY 8, 2022