

CITY COUNCIL  
CITY OF NEW YORK

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TRANSCRIPT OF THE MINUTES

Of the

COMMITTEE ON VETERANS

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November 30, 2023  
Start: 10:10 a.m.  
Recess: 11:38 a.m.

HELD AT: 250 Broadway Committee Room  
14th Floor

B E F O R E: Robert F. Holden, Chairperson

COUNCIL MEMBERS:  
Joann Ariola  
Ari Kagan  
Sandy Nurse  
Vickie Paladino

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

James Hendon  
Commissioner  
NYC Department of Veteran Services

Dr. Lauren D'Mello  
Executive Director  
Mental Health and Care Coordination  
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Ellen Greely  
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Paul Vallone  
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Citizen of New York City

Peter Kempner  
Legal Director  
Volunteers for Legal Service

1 COMMITTEE ON VETERANS

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2 SERGEANT AT ARMS: Good morning and welcome to  
3 the New York City Council hearing for the Committee  
4 on Veterans. Please silence all cell phone and  
5 electronic devices. If you wish to submit testimony,  
6 you may do so via email at [counsel@nyc.gov](mailto:counsel@nyc.gov). Chair,  
7 we're ready to begin.

8 CHAIRPERSON HOLDEN: Good morning. Welcome to  
9 today's hearing. I'm Councilmember Robert Holden,  
10 Chair of the Veterans Committee. Today our committee  
11 will is holding a hearing on legislation aimed at  
12 connecting our veterans with available mental health  
13 resources. So, we will discuss Intro 1237, sponsored  
14 by Councilmember Dinowitz, a local law related to  
15 collecting demographic data on veterans. Intro 1239,  
16 sponsored by Councilmember Lee, a local law  
17 concerning community outreach and public education on  
18 mental health resources for veterans. And Intro 1241  
19 sponsored by Councilmember Narcisse, a local law  
20 requiring the commissioner of DVS to submit an annual  
21 report on the provision of mental health services by  
22 city agencies to veterans. And Intro 1244 sponsored  
23 by the Public Advocate, a local law regarding the  
24 development and distribution of informational  
25 pamphlet on accessing DVS resources. And Intro 837,

2 sponsored by myself, urging the New York State  
3 legislature to pass and the governor to sign Senate  
4 Bill 4717. This bill authorizes the New York State  
5 Department of Veterans Services to provide eligible  
6 veterans with financial assistance for purchasing,  
7 training, and upkeep of service and emotional support  
8 dogs. So these these bills are part of the New York  
9 City Council's mental health roadmap, addressing  
10 challenges in the city's mental healthcare system,  
11 and enhancing-evidence based solutions to improve  
12 mental health outcomes for all New Yorkers,  
13 obviously, including veterans.

14 The second stop of the roadmap focuses on the  
15 mental health needs of our veterans. Annually about  
16 200,000 service members transition from active duty  
17 service to civilian life and the Substance Abuse and  
18 Mental Health Service Administration notes that many  
19 experienced high stress during this transition, with  
20 roughly half not immediately connecting with  
21 available resources, benefits, or services.

22 Additionally, more than half of the veterans with  
23 mental illness did not receive treatment in the past  
24 year, and over 90% with a substance abuse disorder  
25 also did not receive treatment. Our veterans who

2 have bravely served our nation often bear unseen  
3 burdens long after their service. We must ensure  
4 they receive the support they've earned, and they  
5 certainly have earned it.

6 The legislation we discussed today is a crucial  
7 first step in ensuring New York City veterans receive  
8 the care and support they deserve. And I want to  
9 acknowledge my colleagues, Councilmember Kagan to my  
10 left here, and on-- on Zoom we have join Joann Ariola,  
11 Councilmember Ariola. Anybody else? Okay. Also, I  
12 want to extend my thanks to the committee staff who  
13 prepared for this hearing, David Romero, to my right  
14 eight years in service to our nation, Anastassia  
15 Zimina, the policy analyst, and my staff member,  
16 Daniel Cassina, Chief of Staff. I will also-- We  
17 don't have Jumaane? Okay. So-- All right, so I  
18 will turn it over to Committee Counsel, David Romero,  
19 to administer the oath to the witnesses from The  
20 Administration. Welcome.

21 COMMITTEE COUNSEL: Good morning. Will you  
22 please raise your right hand? Do you affirm tell the  
23 truth, the whole truth, and nothing but the truth  
24 before this committee, and to respond honestly to  
25 Councilmember questions?

2 PANEL MEMBERS: I do.

3 COMMITTEE COUNSEL: Thank you, you may begin when  
4 ready.

5 COMMISSIONER HENDON: Good morning Chair Holden,  
6 committee members, and advocates. My name is James  
7 Hendon. I'm proud to serve as Commissioner of the  
8 New York City Department of Veteran Services, or DVS.  
9 Thank you for holding this hearing on the package of  
10 legislation you've introduced to further support and  
11 amplify mental health services for veterans and their  
12 families. I'm joined today by Dr. Lauren D'Mello,  
13 Executive Director of Mental Health and Care  
14 Coordination, Ellen Greely, Assistant Commissioner,  
15 for Policy and Strategic Partnerships, and Paul  
16 Vallone, Deputy Commissioner for External Affairs.

17 We are here today to discuss the following  
18 priorities laid out in step two of the City Council's  
19 Mental Health Roadmap. Intro 1237, collection of  
20 demographic data; Intro 1239, community outreach on  
21 mental health resources; Intro 1241, reporting on  
22 mental health services; Intro 1244, distribution of  
23 resource guides; and then state legislation for  
24 emotional support dogs.

25

2           The New York City Council's Mental Health Roadmap  
3 is a critical and well-considered combination of  
4 steps in addressing the social determinants of health  
5 for our veterans. It is an essential initiative that  
6 recognizes the unique health challenges faced by  
7 veterans and seeks to provide comprehensive support.

8           Here I will outline the importance of step two  
9 and discuss three key areas for The Committee and the  
10 rest of the council to consider now and in the future  
11 during the legislative development process. These  
12 areas are, one, bolstering existing legislation to  
13 reach its intent more effectively; two, codifying  
14 existing resources to enhance or secure its future  
15 success; and three, redirecting the focus of veterans  
16 and their needs from an individual needs such as  
17 mental health to a whole-health approach to include  
18 housing and economic health, further reducing the  
19 ongoing stigma of all veterans having severe mental  
20 health challenges.

21           Addressing such needs begins with a very simple  
22 but effective question: Have you or your loved one  
23 ever served in the US Armed Forces? Executive Order  
24 65 has allowed us to begin data collection as it  
25 relates to veterans and their needs, but Intro 1237

2 codifies that effort and bolsters its concept into  
3 something DVS and many other agencies can build on as  
4 it relates to our data sharing efforts.

5 For Intro 1237, the importance of data sharing  
6 among government offices and agencies throughout New  
7 York cannot be overstated, particularly when it comes  
8 to coordinating care for veterans and their families.  
9 Asking the crucial question of whether a client or  
10 constituent has ever served in the US armed forces  
11 can be a game changer entailing support. However, to  
12 ensure the seamless sharing of this critical  
13 information, an opt-out option rather than an opt-in  
14 option is essential. By implementing an opt-out  
15 system, we maximize the potential for data collection  
16 and coordination, ensuring that veterans and their  
17 families receive the comprehensive care and support  
18 they deserve. This collaborative approach will not  
19 only improve the efficiency of service delivery, but  
20 also help identify and address the unique needs and  
21 challenges faced by our veteran community, ultimately  
22 enhancing their overall wellbeing and quality of  
23 life.

24 During the COVID-19 pandemic, the success of data  
25 sharing played a pivotal role in our response



2 efforts, government agencies, healthcare providers  
3 and researchers came together to share crucial  
4 information on infection rates, testing, contact  
5 tracing and vaccine distribution. This collaborative  
6 data-sharing approach allowed us to make informed  
7 decisions track the viruses spread and allocate  
8 resources effectively. It also facilitated the  
9 foundation of our Mission Vet Check initiative.  
10 Mission Vet Check, which we have relaunched (and  
11 visit [nyc.gov/vetcheck](http://nyc.gov/vetcheck) to learn more) resulted in the  
12 execution of over 34,000 total calls with an  
13 approximate 25% answer rate, according to over 100  
14 calls answered per week. Of those answered calls,  
15 DVS is proud to have been able to serve the more than  
16 1200 requests for service since launching. All of  
17 this occurred due to the successful implementation of  
18 critical data sharing agreements with our city  
19 partners at the New York City Department of Homeless  
20 Services, New York City Human Resources  
21 Administration, and other agencies.

22 The success of data sharing during the pandemic  
23 showcased the power of collective information sharing  
24 in times of crisis, underscoring the importance of  
25 future public health challenges. This is why we are

2 so passionate about this legislation, about seeing an  
3 age with the appropriate mechanisms for agencies and  
4 offices in New York City Government to serve our  
5 clients with a No Wrong Door approach.

6 I want to be clear we support the spirit of this  
7 legislation. In execution, in order for this to be  
8 seamless and account for the Council and  
9 Administration's intent, we recommend mimicking as  
10 closely as possible language that appears in the  
11 veteran indicator question on city form section of  
12 executive order 65. It's on page three, you'll have  
13 copies of EO 65 in front of you. For anyone  
14 following online, you can visit [nyc.gov/vetreports](http://nyc.gov/vetreports),  
15 clicking the Executive Orders tab. EO 65 is a link  
16 that appears there. So you can go to  
17 [nyc.gov/vetreports](http://nyc.gov/vetreports), Executive Order tab, click the EO  
18 65 link.

19 When you look at the section titled veteran  
20 indicated question on city forms page three, this  
21 doesn't, and should not be, a 100% word for word  
22 repetition. One item is an executive order. The  
23 other is City Council Law, a city law. These things  
24 are different. The caveats: When we look at-- how  
25 this could be in law. Number one, the indicator

2 question itself, which agencies already use, should  
3 stay the same. It reads, "Has anyone in your  
4 household ever served or is anyone currently serving  
5 in the US Armed Forces National Guard or Reserves?  
6 Please select all that apply." From there you can  
7 select self, spouse/partner, child, or other, and if  
8 it says other, you can click right in. The question  
9 should stay the same. Once again, it's, "Has anyone  
10 in your household ever served or are they currently  
11 serving in the US Armed Forces, National Guard, or  
12 Reserve?"

13 Caveat two: There should be a follow-on question  
14 and should read something along the lines of, "Check  
15 here if you would not like to be contacted by the New  
16 York City Department of Veterans Services about  
17 veteran and military specific programs, benefits, and  
18 services available to you." So that follow-on  
19 questions should say, "Check here if you would not  
20 like to be contacted by the New York City Department  
21 of Veterans Services about veteran and military  
22 specific programs, benefits, and services available  
23 to you." This makes sharing the information an opt  
24 out.

2       The third thing, it ties to Section 9 within the  
3 EO, and when you look at the section that begins,  
4 "When collecting and disclosing to DVS information  
5 related to the veteran-indicated question," you  
6 should also have a portion that says, "In addition to  
7 contact information that was approved by a respondent  
8 to be shared with DVS." So, the portion that already  
9 says, "When collecting and disclosing the DVS  
10 information relating to the veteran indicator  
11 question," there should also be some language that  
12 says, "In addition to contact information that was  
13 approved by respondent to be shared with DVS."

14       This gets at three things: It asks the question,  
15 it obtains consent for the data to be shared with us  
16 about that veteran or that veteran family, and it  
17 ensures that it is shared through the agencies to us.  
18 And those are our thoughts on Intro 1237.

19       Now for Intros 1239 and 1244. Having the No  
20 Wrong Door approach also requires technological  
21 synergy among every office and agency executing the  
22 mutual goal of uplifting our veterans and their  
23 families. Traditionally, this synergy has been held  
24 together by DVS through current local laws, including  
25 Local Law 113, codified in Local Law 42 first and

2 moreover, but currently it's executed through Local  
3 Law 113. This ties to our inner agency work to  
4 cultivate and maintain relationships with the  
5 designated veteran liaisons and each city agency and  
6 office.

7 Local Law 216: The creation and public sharing  
8 of our Veterans Resource Guide.

9 Local Law 215 and Local Law 44: The  
10 complementary public reports that outline the  
11 outcomes associated with the services and resources  
12 shared in our Veterans Resource Guide.

13 Understanding Intro 1244's intent is to bolster  
14 the awareness and access to critical mental health  
15 resources through a pamphlet. We hope the Public  
16 Advocate will consider amending legislation to  
17 address the operational component of connecting our  
18 clients to those resources using a care coordination  
19 platform. It's currently known as VetConnect NYC, or  
20 VetConnect. VetConnect NYC is a multi-service  
21 provider referral platform utilized by an array of  
22 public and private institutions that have the mutual  
23 goal of connecting veterans and their families with  
24 resources to enrich their lives. Veterans submit an  
25 assistance request via an online intake form or by

2 speaking to our care coordinators at one of our  
3 locations throughout the five boroughs, or by calling  
4 us. The number is 212-416-5250, 212-416-5250. The  
5 care coordinators then input the client into the  
6 platform. A brief interview was conducted which  
7 includes two voluntary mental health screeners, the  
8 General Anxiety Disorder 7, or GAD-7, and the Patient  
9 Health Questionnaire, or PHQ-9, which screens for  
10 anxiety and depression respectively.

11 The screeners are reviewed with each client and  
12 mental health services are offered. All referrals  
13 are sent to our numerous selections of providers,  
14 which include the VA Vet Centers, VA Medical Centers,  
15 other government agencies, private and nonprofit  
16 partners, and veterans' crisis lines.

17 As Intro 1239 points out, the need for outreach  
18 and engagement on mental health resources is critical  
19 to advancing this connection to care. VetConnect and  
20 the impact it creates depend on outreach and  
21 engagement. This is because the success of our  
22 coordinated approach to educating veterans and their  
23 families about connecting them to mental health  
24 resources is tied to the relationship DVS maintains  
25 with city, state, federal and nonprofit

2 organizations. The same interagency effort can be  
3 applied to Intro 1241 to close gaps relevant to  
4 mental health programming and public reporting.

5 Speaking of Intro 1241, the proposed law  
6 mandating the Commissioner of the NYC Department of  
7 Veterans Services to collect data and information  
8 from agencies providing mental health services to  
9 veterans through an annual report is a significant  
10 step towards improving the support system for our  
11 veteran community. This interagency collaboration  
12 can seamlessly integrate into the codifying of the  
13 VetConnect system, streamlining the process of  
14 connecting veterans with the services they need. The  
15 NYC Department of Veteran Services and is  
16 enthusiastic about contributing to an existing annual  
17 report required by the Mayor's Office of Community  
18 Mental Health, OCMH, which identifies critical gaps  
19 in mental health care and preventing New Yorkers with  
20 mental health needs from accessing and staying  
21 connected to care. This is tied to Local Law 155 of  
22 2021. We are interested in working with OCMH so that  
23 it includes specific insights regarding veterans.

24 By including veterans in this report, we  
25 recognize the unique mental health needs of this

2 population and the importance of tailoring services  
3 to address their experience and challenges. It will  
4 shed light on the barriers veterans face in accessing  
5 and staying connected to mental healthcare, helping  
6 us develop more targeted and effective interventions.  
7 Furthermore, it underscores the commitment of the  
8 city to improve overall wellbeing of our veterans by  
9 ensuring they have access to the quality mental  
10 health services they deserve. This proposed law is a  
11 testament to New York City's dedication to providing  
12 comprehensive support for our veterans and fostering  
13 a more inclusive and responsive mental healthcare  
14 system for all New Yorkers.

15 I want to speak now on ending the stigma  
16 surrounding mental health and veterans.

17 The stigmatization of veterans and their mental  
18 health needs is deeply concerning as an issue. It's  
19 a deeply concerning issue that has profound effects  
20 on our community. This stigma often oversimplifies  
21 the experiences of veterans in accurately  
22 categorizing them into broad stereotypes.

23 The truth is, veterans mental health challenges  
24 are as diverse as their backgrounds and experiences  
25 in the military. Whether they experienced mild or



2 severe levels of depression and anxiety, it is  
3 crucial to recognize that these symptoms can be  
4 amplified by financial and housing insecurity, and a  
5 healthy relationship with finances and stable housing  
6 are fundamental aspects of overall wellbeing, and  
7 addressing these areas is equally important as  
8 addressing mental health. To best support our  
9 veterans, we must move beyond stereotypes, break the  
10 stigma, and focus on providing comprehensive  
11 assistance that includes mental health support,  
12 financial stability and secure housing, ensuring that  
13 all veterans could thrive in their civilian lives.

14 This permeates everywhere. I want to say  
15 according to VAs National Center for PTSD, 7% of all  
16 veterans will suffer from PTSD at some point in their  
17 lives. Meanwhile, 6% of all Americans will suffer  
18 from PTSD at some point in their lives. We have  
19 issues, yes, but we are not significantly different  
20 from non-veterans when it comes to mental health. We  
21 want to strike a balance between taking care of our  
22 community's mental health needs while not  
23 infantilizing them. The victim-hero narrative  
24 perpetuated on US military service members, past and  
25 present, is toxic.

2 In conclusion, step two of the veterans mental  
3 health in the New York City Council's Mental Health  
4 Roadmap is an important and necessary combination of  
5 steps to address the social determinants of health  
6 for veterans. While some goals may seem to overlap  
7 with existing local laws, they are in fact  
8 complementary at their core. DVS supports this  
9 initiative in hopes The Council will take into  
10 consideration what was shared today. Mayor Adams and  
11 his administration are deeply committed to the  
12 success and well-being of the City of New York. They  
13 recognize that the path to achieving the success lies  
14 and fostering effective communication and synergy  
15 between agency leadership like myself, and City  
16 Council offices across all corners of our great city.  
17 And Mayor Adams vision, a win for New Yorkers a win  
18 for all of its residents and by working  
19 collaboratively and transparently, we can ensure that  
20 our city thrives, prospers, and provides a brighter  
21 future for all who call it home, especially our  
22 veterans. Together, we can overcome challenges,  
23 seize opportunities, and build a stronger, more  
24 resilient and inclusive New York City that benefits  
25 every member of our diverse and vibrant community.

2 I urge you all to please reach out to me or our  
3 Senior Advisor of Intergovernmental Affairs, Jason  
4 Loughlin. Please view us as a tool to help navigate  
5 our legislative ideas and act as an optimizer to your  
6 historic and future success. Thank you.

7 CHAIRPERSON HOLDEN: Thank you, Commissioner,  
8 again, for the testimony. And I have a few  
9 questions. And then I'll pass it off to my  
10 colleague, if he has any other questions, and we-- I  
11 think we still have Joann Ariola online. And we have  
12 to get a quorum now before we can-- she can ask  
13 questions.

14 But again, I want to thank you, Commissioner, and  
15 it's good to see you again. And I see you a lot.  
16 You know, we do meet, and that's-- it's a pleasure,  
17 and we do have a lot of events that we both attend,  
18 and-- and I appreciate your dedication to our  
19 veterans. But I just want to ask a few questions on  
20 you know-- again, general questions first, and then  
21 we'll get into the bills. But how frequently do  
22 veterans reach out to DVS seeking mental health  
23 services? And I know that's hard to-- because  
24 eventually it gets into other areas, but just a

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2 general consensus of, you know, and I'm surprised 70%  
3 of our veterans have post-- some-- some issues.

4 COMMISSIONER HENDON: Seven. Seven percent.

5 CHAIRPERSON HOLDEN: Oh seven. I thought it was--  
6 -

7 COMMISSIONER HENDON: Yeah, 7%. It is 6% of all  
8 American-- the general population.

9 CHAIRPERSON HOLDEN: So 7%, uh--

10 COMMISSIONER HENDON: 7% at some point in their  
11 lives, 6% general population.

12 CHAIRPERSON HOLDEN: Yeah, I know. 70 didn't seem  
13 right, you know. All right. Thank you. Go ahead.  
14 I'm sorry.

15 COMMISSIONER HENDON: I'll defer to Dr. D'Mello.

16 DR. D'MELLO: Hi. So according to our data from  
17 this year, approximately 12 veterans outreach mental  
18 health-- seek mental health services from our agency  
19 each month.

20 CHAIRPERSON HOLDEN: Okay, so yeah.

21 DR. D'MELLO: Twelve every month, approximately.

22 CHAIRPERSON HOLDEN: So it averages 12. But we  
23 know from experience that, in talking-- especially  
24 the-- some of the more-- we go into the shelters or  
25 other areas, we'll come across veterans who need

2 help. And just in talking, when I visit some of the  
3 American Legions or-- or vet halls, I talked to the  
4 veterans, and you could see they were suffering. So  
5 it's-- Again, we have to, you know, overcome some of  
6 the barriers, I think, that we face with veterans not  
7 seeking help. And that that's-- that's another  
8 hurdle that we have to get through.

9 But can you describe the process Commissioner,  
10 when a veteran contacts DVS, via VetConnect for  
11 mental health support? Does it go to a number of  
12 individuals, or do they come in and talk to DVS?

13 COMMISSIONER HENDON: I'll defer to the doctor on  
14 this one.

15 CHAIRPERSON HOLDEN: Okay.

16 DR. D'MELLO: Hi. So when someone comes to  
17 outreach services from DVS, they can come in through  
18 a certain number of channels, including email, walk-  
19 in, they can call. They come into our office, and  
20 they're greeted by a care coordinator. And from  
21 there, assessments are done. They're welcome to do a  
22 voluntary mental health screener, we have two of  
23 them. One is the PHQ-9 and the other is the GAD-7.  
24 They assess for anxiety and depression. They are  
25 voluntary. We do offer mental health services

2 regardless. If they want to take the screener, we do  
3 let them know their score, and we-- we do ask further  
4 questioning to see if we can match services more  
5 accordingly. So if they mention that they are  
6 suffering from PTSD, or they are an MST survivor, a  
7 Military Sexual Trauma survivor, we do match them  
8 with special providers that have a specialty in  
9 treating these concerns.

10 CHAIRPERSON HOLDEN: And what methods to treat  
11 posttraumatic stress disorder? With-- Because  
12 there's a number of different methods, new ones that  
13 have been mentioned. Like for instance, if you know  
14 the protocols if a veteran expresses thoughts of  
15 self-harm or harm to others. I don't know if that--  
16 if that happens. But if you if you get to that  
17 point, is-- are there special treatments that you  
18 recommend?

19 DR. D'MELLO: So from an agency perspective, we  
20 do not recommend treatment. It is not-- It wouldn't  
21 be the best care that we provide. We do refer them  
22 to treatment providers that do full assessments, and  
23 they do recommend treatment accordingly. But it  
24 wouldn't be best practices to-- for us--

2 CHAIRPERSON HOLDEN: SO you recommend to go to a  
3 specific place for-- for treatment.

4 DR. D'MELLO: Right.

5 CHAIRPERSON HOLDEN: Do you do a follow up to see  
6 if they actually did it?

7 DR. D'MELLO: So we do have a follow up in  
8 Mission Vet Check, where we take our most severe  
9 scores from our assessments, additional-- our  
10 housing, our homeless veterans that have come to our  
11 office, we do follow up with them to make sure that  
12 their services have been met, where if they'd like  
13 different providers, or if they're unhappy, we do  
14 outreach.

15 CHAIRPERSON HOLDEN: So you do outreach. And do  
16 take-- do you collect feedback from their  
17 experiences?

18 DR. D'MELLO: We do.

19 CHAIRPERSON HOLDEN: You do? Could you share  
20 those, you know, general-- in terms-- I'm not talking  
21 about names or anything, but just, you know, I'd like  
22 to, I'd like to see some of the comments that you  
23 know, where they treated well? Did they get help?  
24 Did it work? Because we need that data. You know,  
25 we certainly want to see if things are working.

2 COMMISSIONER HENDON: I want to interject.

3 What's-- What's delicate with this is getting certain  
4 data while being mindful of someone's privacy, as far  
5 as what--

6 CHAIRPERSON HOLDEN: I know. We're not talking  
7 names.

8 COMMISSIONER HENDON: I know. I know. Just in a  
9 broad sense, we're trying to navigate that piece of--  
10 when we're getting that information--

11 CHAIRPERSON HOLDEN: For instance, 70% said they  
12 were satisfied, let's say. So that's good to know.  
13 70% said, no, they didn't get-- you know, that-- it  
14 could-- I'd just like to know, general, if you could  
15 share that with the Committee, we'd like to see what  
16 feedback we're getting and where-- what areas we need  
17 to improve. That's-- That's our job on the City  
18 Council.

19 DR. D'MELLO: Council, one thing that I do inform  
20 our veterans is that when they do access treatment, I  
21 do let them know that it might not be a one-time  
22 deal, right? They might try a provider like their  
23 form of treatment or their style. So you're going to  
24 run the gamut where they might not like the services  
25 just because they might not like their provider or



2 their treatment, where they can come back to us and  
3 we can match them to better fit, similar to primary  
4 care.

5 CHAIRPERSON HOLDEN: So tell me, doctor, what  
6 happens when a veteran comes in and they say they  
7 have a problem with substance abuse? What-- Do you  
8 recommend locations, and-- and then-- the same  
9 questions. Do they follow up-- do you follow up with  
10 them to see if they're doing well or not?

11 DR. D'MELLO: So not specific to substance use.  
12 We-- We prioritize for Mission Vet Check, homeless  
13 veterans and veterans who score high on the PHQ-9 had  
14 the GAD-7, but we do refer any veteran with substance  
15 use disorder to treatment providers. Most of them  
16 are local to them. We try to match them by zip code,  
17 or something convenient for them to attend.

18 CHAIRPERSON HOLDEN: Right. So does DVS  
19 collaborate with social services to identify homeless  
20 veterans suffering from serious mental illness or  
21 substance abuse disorders? And how do these  
22 agencies-- agencies cooperate, if at all?

23 DR. D'MELLO: So specifically to DSS, we have a  
24 new group that we have formed called the Veterans  
25 Complex Case Review Team. And so there are 22

2 collaborative partners that meet weekly, and we pick  
3 two veterans cases, we go through their bio-psycho-  
4 socials, and we all collaborate on coming up with a  
5 treatment plan. By the following week, we review the  
6 plan in place. We see if it's working. If it's not  
7 working, we make tweaks. It's a really good  
8 collaborative experience where we really delve into  
9 each case, and we make very thoughtful suggestions.

10 CHAIRPERSON HOLDEN: All right. And,  
11 Commissioner, I want to ask you this question. When-  
12 - When you leave the service. What happens? The  
13 Veterans Administration, do they interview you to see  
14 if you're, you know, okay? Or-- Or are you set up?  
15 You know, because let's face-- let's face it, you go  
16 into the service, everything is organized, and you--  
17 you're-- you know, you have everything, you have a  
18 schedule, you have places to go each time, you know,  
19 days that you-- you're programmed. You have a  
20 program, you have a schedule, you have jobs. Now you  
21 go into civilian life. Does the VA give enough help  
22 in that area, do you think? In your-- in your own  
23 experience?

24 COMMISSIONER HENDON: I'll just speak to me. I--  
25 So I left active duty in late 2009, and then I came

2 on the reserve in 2010, there was a gap, some gap  
3 time, and I was just, you know, clean, as a veteran.  
4 And when I was going through the transition process,  
5 as far as leaving the service, I was paired with  
6 someone from the New York State Department of  
7 Veterans Services. I transitioned out from West  
8 Point. I was paired with someone who helped me put  
9 up-- put my-- my claim that as far as getting  
10 civilian compensation. And that process kind of  
11 triggered me coming into the VA Healthcare System.  
12 As that something, where I was brought into it.

13 It's not -- in my opinion, just me speaking as a  
14 veteran -- it wasn't necessarily that someone from  
15 the VA is constantly following up trying to reach out  
16 to you. It's that, you know, you take advantage of  
17 it, if you choose, if you desire to. And for me, I  
18 wanted to take advantage of it. And so that's--  
19 that's my story. I think it's different for other  
20 people. But the key takeaway is that, I wouldn't say  
21 that it's the VA constantly trying to reach out to  
22 folks because if, during that juncture, let's say I--  
23 I said, "Okay, look, let me step away from this and  
24 not really explore this," I can easily just fall into  
25 the shadows and not be as accessible, because the

2 last data that they will even have had access to was  
3 old information, and I will have moved since I've  
4 gotten out.

5 And so I think the VA is sometimes in the dark  
6 with having the information to follow up with people.  
7 And you have the person who may not have that  
8 willingness. So that's why it's so important, the  
9 work we're doing to get the DD-214's as soon as  
10 someone gets out, so we can try to make contact with  
11 them, so that we can get them before the data becomes  
12 stale or becomes cold, and try to hold on to them, as  
13 far as you know-- even if not today for VA  
14 healthcare, maybe sometime tomorrow, but at least we  
15 know who you are, so we can keep making you aware of  
16 what's available.

17 CHAIRPERSON HOLDEN: But-- But somebody, again,  
18 getting down to the basic level, somebody from the  
19 VA, or let's say in the case of-- you're in the army,  
20 and you-- you're getting out, you've been serving for  
21 10 years, let's say. Does anybody actually-- a  
22 person, not-- not on the phone, just say in person,  
23 talk to you about some of the challenges you may  
24 have? Because you've been you've been in-- you know,  
25 you're going back to civilian life. So I'm just

2 curious: Is it on the phone, or does somebody sit  
3 down?

4 COMMISSIONER HENDON: So and I'll just speak to  
5 mine, and then I'll defer to Ellen, who coordinates a  
6 lot of our transition that we do, touching our  
7 transitioning servicemembers.

8 For me, it wasn't necessarily that somebody went  
9 out the way to speak to me. It was that, you know,  
10 during my TAP, my Transition Assistance Program,  
11 during that workshop, I went through, someone said,  
12 "Hey, if you guys want to get benefits, go see this  
13 person about it." And so I went saw someone. And  
14 they had-- there was also, I think, a representative  
15 from American Legion, and Veterans of Foreign Wars,  
16 who was nearby, but it was one where it was, you  
17 know, they weren't in the room for the TAP. They  
18 were just outside and said, "If you want to talk to  
19 someone, then please..." You know.

20 CHAIRPERSON HOLDEN: So it's just voluntary?  
21 Just--

22 CHAIRPERSON HOLDEN: HENDON: And I can tell you,  
23 I know from seeing this now, it's a commander by  
24 commander basis, as far as it's up to that garrison  
25 commander, if they will even allow that

2 representative from that VSO to be near when that  
3 person is getting out. Like you have, you know,  
4 places not here in New York State, where they have  
5 things like this announced in New York City, where a  
6 commander may not even allow you know, someone from  
7 American Legion or from VFW to be there to address  
8 those folks. It's not codified that someone is there  
9 to say, "Hey, I'm here if you need somebody to talk  
10 to."

11 CHAIRPERSON HOLDEN: So-- yeah. But, uh, you  
12 wanted to...?

13 DR. D'MELLO: So, when you're leaving the  
14 military, there is this Transition Assistance Program  
15 that you're encouraged to take. It's a lot of  
16 information in a short amount of time. What you  
17 remember may be a challenge. What I can tell you is  
18 that the VA just recently set up-- in fact, here in  
19 the Bronx, at the Bronx, VA, Dr. Joe Geraci is  
20 heading a special unit for those cap-- those  
21 transitioning service members that have-- that have  
22 departed from DOD, but have yet to apply for their  
23 benefits at the VA.

24 CHAIRPERSON HOLDEN: All right.

2 DR. D'MELLO: And if you are in need of  
3 medication, if you are in need of quick therapy, you  
4 can contact Dr. Joe Geraci. And he's doing this  
5 nationwide. It's not only in the Bronx, for the  
6 Bronx, but it's nationwide where he has a special  
7 mental health clinic set up in order to respond to  
8 that very specific niche time.

9 CHAIRPERSON HOLDEN: Yeah, I just think that--  
10 Again, to me, that people leaving the service should  
11 actually sit down and go through a PowerPoint, you  
12 know, and take notes and have a packet of, you know--

13 DR. D'MELLO: Part of it is the integration of  
14 all that material. I think, like when you're leaving  
15 college or going through any major transition, you  
16 know, you're-- you're given a lot of stuff and how it  
17 filters through your system--

18 CHAIRPERSON HOLDEN: Yeah. Like-- And you need--  
19 Yeah, I get it.

20 DR. D'MELLO: --takes-- takes time. But they're  
21 improving. I think the military recognizes that it's  
22 not been a strong point of theirs over time. And  
23 they are addressing it. They do have this  
24 experimentation of term service, which they're now  
25 calling Onward Ops Program, also founded by Dr. Joe

2 Geraci, where up to a year ahead of time, they prep  
3 you for transition. In fact, I'm a mentor for three  
4 separate individuals out there--

5 CHAIRPERSON HOLDEN: All right. That's good to  
6 know. Okay.

7 DR. D'MELLO: --and taking them. So it doesn't  
8 happen at all the installations, but it is becoming  
9 more frequent. And I could tell you that, you know,  
10 you have to work very gingerly with-- with people who  
11 are going through a transition and carefully.

12 CHAIRPERSON HOLDEN: Right. And Commissioner,  
13 you mentioned something in your testimony that you  
14 address a part of this. But at the most recent  
15 hearing DVS discussed the veterans lack of self-  
16 identification as a barrier to connecting with some  
17 of the services. And moving forward, how-- how do  
18 you plan to address it, other than the VetConnect,  
19 and every-- How do you plan to address that? Because  
20 you said they could opt out of even answering  
21 questions or, um...

22 COMMISSIONER HENDON: I want to speak that opt  
23 out piece, and I'll answer that question too on how  
24 we can try to-- one way-- our may way of trying to do  
25 this. Even the-- this discussion right now about us



2 learning who a transitioning service member is, so we  
3 can stay in touch with them.

4 So, it took over two years to fight to get data  
5 from the DOD, so we now know when someone is put on  
6 their DD-214, or separation statement that they're  
7 coming to New York City, we know who they are.

8 The next fight is: When you're leaving the  
9 military, they ask a question saying, you know,  
10 "Would you like for us to share your contact  
11 information with the state that you're going to?" We  
12 want to change that to being an opt out, where  
13 instead of it being, you know, "Check here, if you  
14 want us to share the information," it says, no, check  
15 if you DON'T want us to share the information.

16 CHAIRPERSON HOLDEN: So it's the reverse? Yeah,  
17 that's-- that's better.

18 COMMISSIONER HENDON: Yeah, because people who  
19 are in that-- this is the federal government's TAP  
20 program, where folks are in it up to a year prior to  
21 separation. Right now, about 13% of folks who fill  
22 that form out check the opt in. And so it's not as  
23 much data as we think it'll be if you invert it.

24 So right now, we are going to start receiving  
25 this information next spring, around April, we'll

2 start receiving the TAP data. But keep in mind, I'm  
3 only going to have folks who opted in to have their  
4 thing shared with New York. So we're trying to  
5 invert that.

6 So that kind of informs something we're saying  
7 about Intro 1237 also, about making it an opt out to  
8 kind of, you know, increase the amount of information  
9 that we have to get.

10 Now to your question about outreach. We've been  
11 trying to-- I literally got a text today-- just now,  
12 I want to update you on this. We've been working to  
13 make sure that what data we have we share with all  
14 whom we can share it with. And so we-- you know,  
15 first agreement, we were, I was able to execute with  
16 the Speaker's Office for the City Council so that all  
17 councilmembers should be able to receive any and all  
18 data we have on our veterans. We've also gone and  
19 had an agreement executed with the State Assembly.  
20 We're still working-- we have to confirm what's going  
21 on with the one with the State Senate. We're working  
22 with the New York delegation federally, so that our  
23 federal electeds have the information. We also have  
24 an agreement like this with the VA.

2           The text that I got said that we now are doing  
3 data sharing directly with New York State DVS, which  
4 took some time working with the Chamber at the state  
5 level. We want to live in a world where this is all  
6 about touches. If multiple people are reaching out  
7 to our veterans, it is inevitable that more people  
8 will say, "I want to come on the net." And so if  
9 it's not just me, but you; not just me and you, but  
10 also Assemblymember So-And-So, Senator Such-And-Such,  
11 Borough President Such-And-Such. And that's another  
12 one too. The first borough president agreement was  
13 signed with the Bronx Borough President's office.  
14 And so that's another one. We're looking at expanding  
15 to other BP's. The Borough President agreements  
16 include a carve-out where it authorizes that to be  
17 shared with the count-- the Community Board  
18 districts. And so what we see in the Bronx, right  
19 now we're looking to have a meeting with all the GCS  
20 and the BPS, just to get it done in one shot, you'll  
21 see those Community Boards having this access as  
22 well.

23           And so we want to have so many different people  
24 touching. And if so many touch, it is inevitable

2 that more of our brothers and sisters will come into  
3 the light. So that's the-- that's the main plan.

4 There's a lot of other things we do with our  
5 social media, our typical engagement and outreach,  
6 but really the main plan, it flows directly through  
7 you.

8 CHAIRPERSON HOLDEN: Just to follow up on that--  
9 When-- I mean, just with the experience-- and maybe  
10 the doctor might want to weigh in on this, but let's  
11 say some veteran clearly has post traumatic stress  
12 disorder. Would they check that box? Because they  
13 had such bad exp-- let's say they had such a bad  
14 experience in combat, or-- and they were-- they have  
15 nightmares. They want to forget about the army, or  
16 they want to forget about everything that-- in the  
17 past, and that's one of the-- that's probably one of  
18 the symptoms, when they can't even look back.

19 COMMISSIONER HENDON: [TO DR. D'MELLO] Doc, may I  
20 say something? And I'll-- I defer to you.

21 DR. D'MELLO: Surgery.

22 COMMISSIONER HENDON: This is her area. But I  
23 have to say, in my mind, we're at a place of, "Can  
24 you check the box that you even served?" You know,  
25 I'm almost like, like that's the point--

2 CHAIRPERSON HOLDEN: They're proud that they  
3 served.

4 COMMISSIONER HENDON: Yeah, that's the-- that's  
5 the whole--

6 CHAIRPERSON HOLDEN: But to be contacted. That's  
7 what I'm-- the concern. Do they want to-- "Do you  
8 want to be contacted?" "No, I don't want to. I want  
9 to forget about that." You know? "I want to forget  
10 about my past." I mean, is that an issue? Have you  
11 run into that? And the doctor probably has.

12 COMMISSIONER HENDON: I'll defer to Lauren.

13 DR. D'MELLO: Yeah. So I think it depends on  
14 every individual's lived experience. Depending on  
15 their experience, they may or may not want to self-  
16 identify, because it could be traumatic. Maybe they  
17 do feel the stigma of mental health. It could be  
18 frowned upon based on, you know, their military  
19 background and how it was perceived while they were  
20 in the military. So, it really depends. But yeah,  
21 there are definitely veterans that don't want to  
22 self-identify because they're afraid of being re-  
23 traumatized.

24 CHAIRPERSON HOLDEN: Yeah.

2 DEPUTY COMMISSIONER GREELY: May I just add that  
3 it may not be the servicemember, or the veteran that  
4 calls, but it may be the spouse, or the family  
5 member, that's called the caregiver, that's calling.  
6 And that's a lot of the calls that come into-- into  
7 play here.

8 CHAIRPERSON HOLDEN: And that's what my mom did,  
9 by the way. Because my father didn't want to contact  
10 the army.

11 DEPUTY COMMISSIONER GREELY: That's right. Yeah.

12 CHAIRPERSON HOLDEN: He didn't want anything to  
13 do with it. So that's exactly what my mom did.

14 DEPUTY COMMISSIONER GREELY: Right.

15 CHAIRPERSON HOLDEN: And then she had to take me  
16 down to the VA--

17 DEPUTY COMMISSIONER GREELY: Correct. That's  
18 right.

19 CHAIRPERSON HOLDEN: --because she felt  
20 overwhelmed. And you know, she needed like somebody  
21 as a witness to what's going on. So, yeah, that's  
22 probably--

23 DEPUTY COMMISSIONER GREELY: Yeah. That's why  
24 it's so important for us to-- to reach out to our  
25 caregivers.

2 CHAIRPERSON HOLDEN: Yeah.

3 DEPUTY COMMISSIONER GREELY: Very much so.

4 COMMISSIONER HENDON: Can I add something?

5 Something someone told me when I was a young  
6 lieutenant, and it stays with me is: The army  
7 doesn't care about you. People in the army care  
8 about you. You have some folks who have their time  
9 and service, and then just be jaded afterwards  
10 because they felt like they were just used.

11 So it's not just-- PTSD is one piece of it. But  
12 it could also just be general, maybe a  
13 dissatisfaction with that military experience. And  
14 it takes a lot to convince someone that-- look,  
15 that's-- that issue is separate from us making sure  
16 we're doing right by you and everything you've earned  
17 as a veteran.

18 And so that's something else, I think that may  
19 feed into this, that and-- Just at an event last  
20 night, where someone said something along the lines  
21 of, "Yeah, I just got out. I didn't really anyone I  
22 served. I didn't want them to treat me any  
23 differently." And so that's a whole other thing as  
24 far as this feeling of a stigma that-- You know,  
25 just a presumption that as soon as I say that I've

2 served, people are going to just automatically switch  
3 to thinking of me as broken, or thinking of me in a  
4 different way, et cetera. And so there's so much  
5 that goes into these decisions, Mr. Chair.

6 CHAIRPERSON HOLDEN: Thank you. We've been  
7 joined by Councilmember Vicky Palladino. Welcome.

8 And I have a few questions on 1237. And again,  
9 you might have answered this, but are veterans asked  
10 about their status on forms from city agencies? Uh,  
11 they were supposed to have that on there. And have  
12 you discovered any agencies that are not doing that  
13 with the-- You know, have that little checkbox?

14 COMMISSIONER HENDON: I want to-- I'll lead and  
15 I'll let anybody else jump on this. The issue with  
16 it, in my opinion, is: we don't know who the people  
17 are. So all we get is the number. So we'll say this  
18 is the number of people who answered this question  
19 from this agency. We get the number.

20 CHAIRPERSON HOLDEN: You only get the back end.  
21 But-- But you don't--

22 COMMISSIONER HENDON: Yeah.

23 CHAIRPERSON HOLDEN: It'd be nice to see how, you  
24 know, there-- there's obviously some of the agencies,  
25 their forms. I know when I was talking to the



2 Queen's DA, she mentioned that she-- she discovered,  
3 you know, in the veteran's treatment courts, that  
4 they weren't asked. They didn't they didn't have--  
5 You know, that they didn't identify them. They were  
6 arrested. They didn't-- They-- She said the police  
7 didn't have that on their forms, and she-- she  
8 actually pushed for it, and made sure that they put  
9 it on. But I just want to know. Sometimes we lapse.  
10 We go backwards in, you know, things-- an old form  
11 would resurface. So I just want to know. Have you  
12 seen, you know. Obviously they do fall through the  
13 cracks, some of-- some of our veterans, because--  
14 when they do get arrested. But have you seen any  
15 more-- any other agencies?

16 DEPUTY COMMISSIONER GREELY: I-- May I just add  
17 that it's not only about checking the box, but it's  
18 about the person who's reviewing the form, and what  
19 do they do with that information. What triggers the  
20 person--

21 CHAIRPERSON HOLDEN: Right.

22 DEPUTY COMMISSIONER GREELY: --who's-- who's  
23 reviewing the information? And how do they,  
24 basically, connect them to Veteran Treatment Court at  
25 that--? Yeah, it's a required-- it's-- so you check

2 it. But who is-- is that person properly trained to  
3 take it to the next level?

4 CHAIRPERSON HOLDEN: Right, so--

5 DEPUTY COMMISSIONER GREELY: That's really an  
6 important piece to all of this, too.

7 COMMISSIONER HENDON: And the Mayor's Office of  
8 Operations has done a great job of shepherding a lot  
9 of the agencies to make sure folks are including  
10 this, as far as whatever their newer form is to have  
11 that in-- that question. I think it's more so about--  
12 - You know, that's-- As what Ellen said as far as  
13 those next steps. But just us trying to go beyond  
14 just having numbers, but having-- If someone wants to  
15 share the informa-- their contact info, so we can  
16 follow up? Us having that. That's the big thing  
17 that we're very-- When we think about 1237, just  
18 having that other component where we can be able to--

19 CHAIRPERSON HOLDEN: Yeah, but-- but does DVS--  
20 does your agency get informed about the total number  
21 of veterans residing in the city? Who gives you that  
22 information? Or where do you get it from?

23 COMMISSIONER HENDON: It's-- We-- It's a  
24 combination between us cross-referencing census data,  
25 and looking at information that we received from the

2 DOD, and, you know, checking other sources, as far as  
3 to check up on that.

4 CHAIRPERSON HOLDEN: So there's no central agency  
5 that just, like, says, "We have this many-- 400 new  
6 veterans are--"

7 COMMISSIONER HENDON: Oh, excuse me. I thought  
8 you're talking about the entire number of veterans in  
9 the city of New York, not the--

10 CHAIRPERSON HOLDEN: No, but-- No, but let's say  
11 they're updated, you know, on a monthly basis? Or do  
12 you get notice? Or do you have to actually do the  
13 work and-- and find out? I mean you're-- You're  
14 shaking your head yes, that--

15 MS. GREELY: Well, the DOD data, for instance, we  
16 get on a monthly basis. It's systematic. When we  
17 get the data, though, we have to clean the data.

18 CHAIRPERSON HOLDEN: Yeah, you've got to really  
19 go through it.

20 DEPUTY COMMISSIONER GREELY: Yeah. You have to--  
21 And then-- And then it's the questions of the data  
22 that have, how useful is the data?

23 CHAIRPERSON HOLDEN: Right.

24 DEPUTY COMMISSIONER GREELY: So, we did a huge  
25 outreach for a transition summit that we-- we co-

2 sponsored with The Mets last June, and we did  
3 tremendous amount of emails and texts, and-- but not  
4 everybody has an email address every. Not everybody  
5 has a telephone. So you can text-- not-- You know,  
6 so it's-- and when you get those-- that information,  
7 a lot of it comes back to you. So it's-- A lot of it  
8 is, we are-- you know, we do have staff devoted to  
9 cleaning data a lot.

10 COMMISSIONER HENDON: Yeah. I'll look this up in  
11 a second. Because I think the key thing, when we  
12 talk about the number-- at least the numbers of our  
13 veterans, Mr. Chair, and just knowing who these  
14 groups are, there's a group that is just that we have  
15 not been able to get the numbers on. We believe the  
16 floor is about 203,000, is the absolute floor of  
17 veterans in this city. And I'll go into it in a  
18 second. It's the group of folks who served on guard  
19 or reserve status, those who never were on federal  
20 active orders during the Cold War period. That's a  
21 group where we've not been able to obtain through  
22 different means. We haven't been able to get that  
23 information.

24 On the Census side, the census only will show  
25 someone who has served on a federal status at some

2 point and no longer serves. So I'm not included when  
3 you look at the-- because I'm still in the reserve.  
4 So I'm not in the census information. And so when  
5 we've tried other means-- we've been dealing with  
6 this in a back-and-forth with DOD for a while: Who  
7 are all the guardsmen? All the reserves? At least,  
8 how many guardsmen, reservists on active duty do we  
9 have? Getting that, and census information, and  
10 other things, the X factor, we're at 203,000, but  
11 it's much higher if you account for anyone who is  
12 Cold War era, so post-Vietnam, pre Operation Desert  
13 Shield/Desert Storm, who was only on, you know,  
14 state-- who was never on federal active orders. So I  
15 just wanted to add that in.

16 CHAIRPERSON HOLDEN: Yeah. So I-- You know,  
17 because I would think that the V.A. should actually  
18 update you periodically about how many veterans are  
19 residing here in New York City.

20 COMMISSIONER HENDON: We have better information  
21 than the V.A. on this stuff.

22 CHAIRPERSON HOLDEN: All right.

23 COMMISSIONER HENDON: That's why it was  
24 important, the data sharing agreement we got was  
25 more--

2 CHAIRPERSON HOLDEN: No, but they-- they-- no,  
3 but let's say they moved to New York City. You  
4 don't-- How are you supposed to know that?

5 DEPUTY COMMISSIONER GREELY: Well, that's the DOD  
6 data that we're getting on a monthly basis.

7 CHAIRPERSON HOLDEN: You're getting that?

8 DEPUTY COMMISSIONER GREELY: Yeah, yeah. We're  
9 getting it, but it's-- Again, the-- First of all,  
10 this is for veterans who are opting in to reporting  
11 the information--

12 CHAIRPERSON HOLDEN: All right. Only if they--

13 DEPUTY COMMISSIONER GREELY: --and then, of  
14 course, again, if I'm the person who's looking at the  
15 data, I want to see: Who are the people who I can  
16 actually send an email or a text to? Okay, and that  
17 number gets reduced.

18 CHAIRPERSON HOLDEN: But do-- When you do get--  
19 What kind of information do you get on them?

20 DEPUTY COMMISSIONER GREELY: It's just-- It's  
21 just plain contact--

22 CHAIRPERSON HOLDEN: Plain what?

23 DEPUTY COMMISSIONER GREELY: Plain contact  
24 information.

2 CHAIRPERSON HOLDEN: Just contact information.  
3 You don't get any details?

4 DEPUTY COMMISSIONER GREELY: No.

5 CHAIRPERSON HOLDEN: So you have to-- You have to  
6 go and find it.

7 DEPUTY COMMISSIONER GREELY: Correct.

8 COMMISSIONER HENDON: This is why Mission Vet  
9 Check is so important.

10 CHAIRPERSON HOLDEN: Yeah.

11 COMMISSIONER HENDON: Mission Vet Check is us  
12 going off and to kind of corroborate what we can, to  
13 get the help to people who--

14 CHAIRPERSON HOLDEN: That's-- That's the hurdle  
15 here because that's where-- You just get contact  
16 information. There's not much-- You know, you don't  
17 get any of the-- how long they served or, you know,  
18 what-- did they serve in combat, did they served  
19 here? They-- You know, that's-- that's a big issue.  
20 Yeah.

21 DEPUTY COMMISSIONER GREELY: Right. Right.

22 CHAIRPERSON HOLDEN: DO you have any...?

23 COUNCILMEMBER KAGAN: Yes.

24

25

2 CHAIRPERSON HOLDEN: Okay, I want to turn it over  
3 to Councilman Kagan for questions. And then I'll  
4 come back.

5 COUNCILMEMBER KAGAN: Thank you Chair Holden. A  
6 very important hearing. Thank you very much. Thank  
7 you for your service. Thank you for your testimony.

8 So I have a few questions. My question is about  
9 budget, a little bit. So, first of all, recently, as  
10 you know, Mayor announcing upcoming budget cuts, and  
11 these hearings seem to reveal the fact that the  
12 Veteran Services Administration, your department, do  
13 you expect any cuts to veterans' services?

14 COMMISSIONER HENDON: Right now as far as the  
15 upcoming iteration of these things, it's us looking  
16 internally as far as how we can do this in a way  
17 that's as thoughtful as possible, while still  
18 delivering service to our people.

19 So anything that is duplicative in nature, where  
20 we have a program that we can see is already, you  
21 know, being done at the federal level or the state  
22 level, we're looking at, and say, "Okay, maybe we  
23 need to reduce these things." But right now, we're  
24 still in a place where we're still trying to put the  
25 pieces together. You know, Mr. Councilmember, about



2 what will these cuts be for this upcoming iteration.

3 I just want to... Yeah.

4 COUNCILMEMBER KAGAN: Also, I represent Coney  
5 Island, and I already mentioned and I would love to  
6 see it serve vets place, on Surf Avenue and West 21st  
7 Street. That's a special housing for veterans--

8 DEPUTY COMMISSIONER GREELY: We do. We actually  
9 do a food program every Wednesday, and serve vets.

10 COMMISSIONER HENDON: We get food out there.

11 DEPUTY COMMISSIONER GREELY: In fact-- In fact,  
12 we just gave them a whole bunch of turkeys last week.

13 COUNCILMEMBER KAGAN: That's very good. I'm  
14 saying, like, I'd love to see you there again. I  
15 know you're very busy, since you--

16 COMMISSIONER HENDON: I'll let you know-- Because  
17 I was there. They recently-- You know, they have  
18 the-- the downstairs area where they're going to make  
19 like a coffee shop now, where veterans can get work  
20 experience training by working in this coffee-slash-  
21 bagel shop down there. I was there for that ribbon  
22 cutting. It was last month. But I'll be sure to--  
23 to come. And I'll let you know. I'm so sorry about  
24 not informing you that was going to be there for  
25 that. Because I think anything that brings me down--

2 because I did the point-in-time count in Coney  
3 Island, as far as-- you know, just a few years ago.  
4 So, anything where I'm there, in general, I'll  
5 definitely reach out, Mr. Councilman. I'm-- I  
6 apologize for not letting you know about that.

7 COUNCILMEMBER KAGAN: Thank you.

8 COMMISSIONER HENDON: Yeah.

9 COUNCILMEMBER KAGAN: Yeah. I also have  
10 [inaudible] military post in Gravesend also. Like,  
11 if you ever would like to visit, just let us know.  
12 And it will be great.

13 And yes, it's up to council offices. Many  
14 veterans still are not aware of many, many services  
15 that you offer. And it's a challenge. And talking  
16 to social media, not everybody's on social media. So  
17 that's why it's even more important to be proactive.  
18 Thank you very much again.

19 COMMISSIONER HENDON: Thank you.

20 DEPUTY COMMISSIONER GREELY: Thank you.

21 CHAIRPERSON HOLDEN: Thank you, Councilmember.

22 And, um, just again, some-- some more questions on  
23 1239.

24 So you get the-- back to the contact information.  
25 You get the location. You get their address of the

2 veterans and their phone numbers? What areas of the  
3 city has really the higher concentration of veterans?

4 So--

5 DEPUTY COMMISSIONER GREELY: Queens. Queens has  
6 the highest concentration.

7 CHAIRPERSON HOLDEN: Yeah. We're proud of that.

8 COMMISSIONER HENDON: Queens has the highest  
9 number of veterans. Staten Island has the highest  
10 concentration.

11 DEPUTY COMMISSIONER GREELY: Yeah.

12 COMMISSIONER HENDON: Queens has the highest  
13 number of veterans, but the concentration-- 1 out of  
14 20 people who lives in Staten Island is a veteran.

15 CHAIRPERSON HOLDEN: Yeah. All the more-- See,  
16 that's why we have to save our halls, our veterans--

17 DEPUTY COMMISSIONER GREELY: Totally.

18 CHAIRPERSON HOLDEN: --service centers, because  
19 you know, especially in Staten Island and Queens, we  
20 have-- how many do we have in Queens? Just off the  
21 top--

22 DEPUTY COMMISSIONER GREELY: Oh, over--

23 COMMISSIONER HENDON: Over 58,000 off the top of  
24 my head.

25 DEPUTY COMMISSIONER GREELY: Yeah.

2 CHAIRPERSON HOLDEN: 58,000?

3 DEPUTY COMMISSIONER GREELY: Oh, are you--

4 COMMISSIONER HENDON: I think it's something like  
5 58,000 as far as Queen's veterans.

6 DEPUTY COMMISSIONER GREELY: Okay. Yeah. Yeah.  
7 But we have a tremendous number of VSOs and VFWs and  
8 American Legions in Queens.

9 CHAIRPERSON HOLDEN: All right.

10 DEPUTY COMMISSIONER GREELY: Yeah. It's the  
11 largest number.

12 COMMISSIONER HENDON: This is all connected. So  
13 this story about us putting hands on the  
14 transitioning service members and us reconstituting  
15 our VSOs, getting young blood in them. It's all tied  
16 in.

17 So, we're trying to do what we can to animate  
18 more of the young folks who are coming to New York  
19 City, to tie them into the various halls, the various  
20 posts, and whatnot so we can see a new generation  
21 take the helm for these.

22 DEPUTY COMMISSIONER GREELY: Actually, just to  
23 give you the heads up. I was on the phone yesterday  
24 talking about new bathroom tiles for Post 4--  
25 American Legion Post 460, just to get-- in Queens.

2 It's Major Sharon's American Legion Post, but we--  
3 it's part of some of the money that we were able to  
4 have through Dwyer, and we have a construction  
5 services not-for-profit that's working with the  
6 volunteers down at the post to rehab. And, so I'm on  
7 the phone about bathroom tiles in the women's  
8 bathroom. That's my conversation.

9 COMMISSIONER HENDON: And I want to be clear  
10 that's-- it's not capital. It's-- That's supporting  
11 the actual modality of folks coming together in a  
12 Habitat-for-Humanity-style project to go work on that  
13 post.

14 DEPUTY COMMISSIONER GREELY: Yeah. Mm-hmm.

15 CHAIRPERSON HOLDEN: That's why, you know-- In  
16 Queens by the way, Vicki Palladino does the Veteran  
17 Resource Center. I do that in my office in-- in the  
18 30th Council District. Is anybody doing that in  
19 Staten Island, the councilmembers, in their offices.

20 DEPUTY COMMISSIONER GREELY: Uh...

21 CHAIRPERSON HOLDEN: I don't want to-- You know,  
22 again, I don't want to overstretch your agency, but  
23 that's a very, very good--

24

25

2 DEPUTY COMMISSIONER GREELY: We just need to add  
3 to our staff 52 people in order to get everybody out  
4 to a council district.

5 CHAIRPERSON HOLDEN: I know.

6 DEPUTY COMMISSIONER GREELY: 51 actually.

7 CHAIRPERSON HOLDEN: Yes. Well, we've got--  
8 we've got to try to get-- we've got to get The Mayor  
9 not to cut your agency.

10 DEPUTY COMMISSIONER GREELY: [inaudible] day. I  
11 can't forget, because I do bathroom tiles and  
12 turkeys.

13 [LAUGHTER]

14 I'm real.

15 CHAIRPERSON HOLDEN: Right. So, again, there's a  
16 question regarding the VA's mental health campaign,  
17 you know, seen on city buses: Is DVS informed about  
18 it? Will you-- will you...?

19 COMMISSIONER HENDON: I want to say one thing,  
20 and then defer to Ellen and Lauren on that. We have  
21 a direct line of communication with the VA's Office  
22 of Public and Intergovernmental Affairs. And so they  
23 send us things like this as far as these different  
24 assets, and we get them out to our press team, our  
25 comms team. Sometimes you'll see them come up in

2 things we put on social media, or within our  
3 newsletter. So we are in the loop, but it's not  
4 something where they are directing us on any of  
5 these. It's just, you know, I want to make you aware  
6 of this.

7 CHAIRPERSON HOLDEN: So-- So the VA doesn't give  
8 you any resources to help promote it?

9 COMMISSIONER HENDON: Aside from an e-mail.

10 CHAIRPERSON HOLDEN: I-- I knew that-- I knew the  
11 answer to that question. I just wanted to get it on  
12 the record, but-- So, you-- So DVS-- The next  
13 question I have: Does DVS receive direct  
14 instructions from the VA or the state about this  
15 campaign? So you really... uh...

16 COMMISSIONER HENDON: It's more of an FYI.

17 CHAIRPERSON HOLDEN: It's FYI, so you-- yeah.

18 COMMISSIONER HENDON: So we put on-- here's some  
19 digital assets. But that's-- that's it.

20 CHAIRPERSON HOLDEN: So you are already-- And  
21 again, I just feel like it would be nice to have, you  
22 know, just a number or at least your logo on it would  
23 have been nice. Because if it's operating on city  
24 buses, it would be nice to at least, QR code or  
25 something that they could put on there.

2           COMMISSIONER HENDON: What's tough with that is  
3 this stuff is managed at-- for those types of  
4 campaigns, it's managed at a national level. It's  
5 not even coming from the visit. It's not even coming  
6 from the folks who are responsible for health care in  
7 New York and New Jersey. And so it's-- for us, it's,  
8 you know, how can we get them to incorporate us in a  
9 hyperlocal way, as far as small nuances that are  
10 appropriate for the five boroughs?

11           CHAIRPERSON HOLDEN: So are there-- and this is  
12 on intro 1241 now, just some questions. Are there  
13 specific mental health organizations or CBOs in the  
14 city known to be frequently utilized by veterans?  
15 Maybe the doctor could...

16           DR. D'MELLO: Yeah, we have numerous city  
17 agencies that we work with. We have private  
18 partnerships that we work with very frequently. We  
19 have very good relationships with them.

20           CHAIRPERSON HOLDEN: And I'd like to, at least at  
21 one point, meet with you to talk about what are the  
22 more successful programs that you're seeing, and how  
23 we could fund them, or at least-- Some of them might  
24 have waiting lists and so forth, that we could



2 actually-- the City Council could jump in and help  
3 out a little bit on that, too--

4 DR. D'MELLO: That would be great.

5 CHAIRPERSON HOLDEN: -- in funding. What are  
6 other barriers that exist besides privacy and other  
7 concerns in implementing the bill 1241? Are there  
8 any barriers?

9 COMMISSIONER HENDON: I'll start now and then  
10 defer to Ellen and Lauren. When I-- When I look at  
11 1241-- this is the one, as far as asking to be some  
12 sort of mental health service report that DVS, you  
13 know--

14 CHAIRPERSON HOLDEN: Right.

15 COMMISSIONER HENDON: --put out. I love it. I  
16 just feel like there's so many things we have to do  
17 before we get there. It's like it's the roof of the  
18 house, but we're working on the foundation right now,  
19 Mr. Chair.

20 In that, you know, a key pieces, is us being able  
21 to, you know, access the data on service providers  
22 who help veterans with mental health needs through  
23 VetConnect. And, so one piece of it is we don't live  
24 in a world now where all who receive, you know,  
25 taxpayer funding are-- to provide veteran services,

2 are service providers on our platform. And so we  
3 almost feel like codification of VetConnect is one  
4 step. So we can just have it in law that the city  
5 has a digital services platform for its veterans.

6 And once it's codified, then we can say, "Okay,  
7 anyone who receives city taxpayer levied funding to  
8 provide services to veterans," everyone from-- on the  
9 council side to my side, "if you receive city  
10 taxpayer money, that you have to be in VetConnect."  
11 That facilitates us being able to say, "Okay, now, I  
12 can actually see this thing." And we can actually  
13 learn more and see what the data tells us,  
14 organically incorporated per Local Law 44, so you'll  
15 see the annual information from this. It'll get  
16 there, but it allows us to at least have more agency  
17 so we can say, "Okay, now that we see this, here's  
18 what we think we should do next." And so when I  
19 think about 1241, I love its intent, but I feel as  
20 though step one is us building a portal where-- Right  
21 now, I as Commissioner, do not know-- or we do not  
22 have a direct line of communication with all of the  
23 people receiving money from the city to provide  
24 Veterans Services. And I almost want us to fix that.

2 And then we can live in a world where we actually see  
3 what's going on. So we can say--

4 CHAIRPERSON HOLDEN: All right. Yeah. That  
5 would-- That would make sense actually.

6 COMMISSIONER HENDON: That's the issue that we  
7 that we want. Yeah. And I love it. I want to be  
8 clear: It's not about the work. It's about the-- I  
9 need-- I need to step A to occur before step B, Mr.  
10 Chair.

11 CHAIRPERSON HOLDEN: Right. Yeah.

12 COMMISSIONER HENDON: And so for us, as for now,  
13 what we're saying is we want to be sure to-- and  
14 we're already-- this is-- I'm happy that we're having  
15 this conversation, because something that we're  
16 looking at is going forward in the report that The  
17 Office of Community Mental Health puts out, they have  
18 a section that talks about specific demographics and  
19 populations. This is a report that just highlights  
20 gaps and mental health services. We will now have a  
21 section there about veterans. And so you will see  
22 that, and that's going to be published by January 31  
23 of each year.

24 So, in the 2024 report, in a few months, you'll  
25 see a section specifically on gaps in mental service-

2 - health services to veterans composed by us. And so  
3 that's something we'll do as a stop-gap. I don't  
4 believe we're ready for the larger piece yet for the  
5 reasons I've described.

6 CHAIRPERSON HOLDEN: All right. So my last line  
7 of questioning is on Intro 1244. And the first  
8 question is: Does DVS have any informational  
9 materials specifically on mental health that you  
10 distribute to veterans? Is this-- this one? [HOLDING  
11 UP "Veteran Resource Guide"]

12 ASSISTANT COMMISSIONER GREELY: Yes.

13 CHAIRPERSON HOLDEN: That's the one.

14 ASSISTANT COMMISSIONER GREELY: That's the one.

15 CHAIRPERSON HOLDEN: Okay. Any-- any--

16 COMMISSIONER HENDON: And we have the smaller  
17 flyers. We have the one-page flyer. We have a  
18 larger resource form.

19 CHAIRPERSON HOLDEN: Okay.

20 COMMISSIONER HENDON: And we have-- There's  
21 everything online. But as far as stuff that's--  
22 that's physical, those are the things. Yeah.

23 CHAIRPERSON HOLDEN: Okay. So the Veteran  
24 Resource Guide-- This is this is the Veteran

2 Resource Guide. So somebody calls your office, you  
3 mail this, or they...?

4 ASSISTANT COMMISSIONER GREELY: It's digital, we  
5 can--

6 CHAIRPERSON HOLDEN: It's digital? Okay.

7 ASSISTANT COMMISSIONER GREELY: We can send it--

8 COMMISSIONER HENDON: And we have hard copies  
9 also. We share--

10 CHAIRPERSON HOLDEN: All right.

11 COMMISSIONER HENDON: --we just gave out 800 hard  
12 copies or so to the Department of Homeless Services  
13 for using with their population. So we get it out.  
14 We got it to Rikers, you know, a few weeks ago. We  
15 make sure that they have that there as far as the  
16 folks who are detained. So we get it out in physical  
17 form at outreach events and other things. This is  
18 the one that all community boards have, the one that  
19 we had. Someone-- Someone's physically delivered  
20 this to every Council, every district office or  
21 Councilmember, and every Community Board has this.

22 ASSISTANT COMMISSIONER GREELY: Right.

23 CHAIRPERSON HOLDEN: And how often is it updated?

24 COMMISSIONER HENDON: I'd say it's no more than  
25 every two years. So as far as the clip-- For this

2 one, we're going to put an insert in to get a more--  
3 an update now just to--

4 ASSISTANT COMMISSIONER GREELY: You might have  
5 the insert.

6 COMMISSIONER HENDON: We're going to put an  
7 insert in there.

8 ASSISTANT COMMISSIONER GREELY: The insert should  
9 be there.

10 COMMISSIONER HENDON: I'm sorry. You already  
11 have that insert.

12 ASSISTANT COMMISSIONER GREELY: Yeah.

13 CHAIRPERSON HOLDEN: And this is the this is  
14 designed by the city? I just-- Obviously they--  
15 Their agency--

16 ASSISTANT COMMISSIONER GREELY: Our agency.

17 COMMISSIONER HENDON: Uh, we design it.

18 CHAIRPERSON HOLDEN: You design it.

19 COMMISSIONER HENDON: We design this. We print  
20 this. Yeah.

21 CHAIRPERSON HOLDEN: All right. Because I could  
22 suggest something on this, if you don't mind.

23 COMMISSIONER HENDON: We are-- We are happy to  
24 take suggestions. Absolutely.

25 ASSISTANT COMMISSIONER GREELY: Right.

2 COMMISSIONER HENDON: Yeah.

3 CHAIRPERSON HOLDEN: This is going to-- I'm  
4 going to plug my-- the college that I taught for 40  
5 years--

6 ASSISTANT COMMISSIONER GREELY: That's great.

7 CHAIRPERSON HOLDEN: Right across the river, at  
8 City Tech, New York City College of Technology, they  
9 have a very good-- a very good (where's the camera?)  
10 very good art department.

11 [LAUGHTER]

12 Sorry. But-- and they do these kinds-- they'll  
13 design pieces, top notch-- they'll do web pages,  
14 they'll do digital-- they'll do video. I mean, they  
15 love--

16 ASSISTANT COMMISSIONER GREELY: We'd be happy to  
17 take their names and contact them.

18 CHAIRPERSON HOLDEN: I will give you the contact  
19 information. But I--

20 ASSISTANT COMMISSIONER GREELY: Okay. That would  
21 be fabulous, graphic design.

22 CHAIRPERSON HOLDEN: When I taught there, we  
23 actually did-- we did work for City Hall. I did work  
24 for Mayor Bloomberg on Operation Silent Night. We  
25 did a number of projects. Because what it does is it

2 gives-- it gives the students the real life  
3 experience. They go and pitch it to you guys. They  
4 can go and say, "Here's our new veterans resource  
5 guide." And you know, and they'll design it, no  
6 charge, because they need the real-world experience.  
7 So I would suggest-- and even on-- on ads and other  
8 pamphlets and things, anything visual.

9 ASSISTANT COMMISSIONER GREELY: Oh, great.

10 CHAIRPERSON HOLDEN: You have-- You have-- And  
11 you have other, obviously, other schools in CUNY that  
12 could do it also. But I think that would be a good--  
13 a good resource.

14 Anyway, the obstacles to implementing 1244?

15 COMMISSIONER HENDON: It's-- I don't-- I don't  
16 like to call it an obstacle, but it's something that  
17 is already directed to us in-- in 216.

18 CHAIRPERSON HOLDEN: Right.

19 COMMISSIONER HENDON: In Local Law 216, so I  
20 think that's the flag.

21 And I personally think that 1239 and 1244, the  
22 more important discussion is to codify VetConnect.

23 CHAIRPERSON HOLDEN: Right.

24 COMMISSIONER HENDON: To codify the existence of  
25 a digital services, or of-- a digital services



2 platform for our veterans through the city of New  
3 York.

4 CHAIRPERSON HOLDEN: We've been joined by  
5 Councilmember Nurse. And do you have any questions?

6 COUNCILMEMBER NURSE: Not at the moment, no.

7 CHAIRPERSON HOLDEN: Okay. All right. Well,  
8 that's-- that's the end-- uh...

9 COUNCILMEMBER NURSE: No. I'm listening. No,  
10 I'm just-- no, this is all very good. I just got-- I  
11 came late. So I'm easy [inaudible].

12 CHAIRPERSON HOLDEN: Well, you know about  
13 veterans' stuff. You know about some of the  
14 obstacles.

15 COUNCILMEMBER NURSE: Yeah, I do. I know a  
16 little bit about that.

17 COMMISSIONER HENDON: May I interject something,  
18 Mr. Chair, if it's okay.

19 CHAIRPERSON HOLDEN: Yeah.

20 COMMISSIONER HENDON: Just to-- When I-- This  
21 is just, you know, in a perfect world, the story I'm  
22 telling myself is that, we-- we stick the landing on  
23 1237 as far as the question. You know that-- that  
24 meant codified that that question be asked, and that  
25 there'll be this opt out, so we can kind of get as

2 much of our data from our veterans as possible, and  
3 codifying that other agencies share that with us. I  
4 feel like that's one piece, so that when we can at  
5 least know these things.

6 And then the other piece is this codification of  
7 VetConnect, some sort of saying in law that we must  
8 have this digital services platform.

9 And then once we have that, we'll let the data  
10 talk to us. We'll get you everything through the  
11 Local Law reports, as far as you'll start to see  
12 where this is going, how many users are, and what  
13 they're doing.

14 But beyond that, once we get to this piece that  
15 the next step to me, Mr. Chair, and to the committee  
16 is: We want to live in a world where anyone who  
17 receives city taxpayer levied dollars to provide  
18 veterans services must be listed as a service  
19 provider in VetConnect. And I think, so once it's  
20 law, then we can come with that next aspect of it.

21 And then yet another thing-- because I've done  
22 this-- I've looked at the Council, you know, what's  
23 been going on with discretionary funding for years--  
24 If you receive city taxpayer levied funding to put on

2 an event for our veterans, notify us within a certain  
3 number of days.

4 CHAIRPERSON HOLDEN: That's good.

5 COMMISSIONER HENDON: That doesn't happen right  
6 now. And that's-- And that's-- And that ties back to  
7 outreach also. When we talk about outreach, that's  
8 another one where we-- we can read-- we all can read  
9 the same things that's publicly available. You see a  
10 group received funding to put on an event. That's  
11 it. I don't know anything else. And, so if there  
12 was something where we're working to get a handle on  
13 that. This goes back to the discretionary contract  
14 discussion we've had, where if a pilot, we're looking  
15 at five discretionary contracts we will run this  
16 year, this fiscal year, and that's in process. But  
17 get 50 to 60 contracts in total for veterans that are  
18 awarded typically by the Council. So, for us, if we  
19 live in a world where the, you know, (A) if you  
20 receive money for services, you're in VetConnect, (B)  
21 if you receive money for events, notify DVS. I think  
22 that's good all around.

23 CHAIRPERSON HOLDEN: Right. Just to piggyback  
24 again something in 1244, about getting the word out  
25 and the informational material. What I mentioned

2 about City Tech, and, you know, where I taught for 40  
3 years, they could also-- and there's some creative  
4 programs that-- that that I'd like to help with. So  
5 I don't want to just give it all to you. But I think  
6 this Committee can help.

7       There's a billboard companies all throughout the  
8 city that have ads. They'll have gaps where they  
9 don't have ads for a few months. And we could-- We  
10 could actually-- Or the students could design some  
11 ads for your agency. And the-- and I'm sure that the  
12 billboard companies, because they want to-- they  
13 don't want an ad up that's peeling, that's  
14 graffitied, that's outdated already. So they want to  
15 replace it. And when we-- we had one on Myrtle  
16 Avenue in my district, two billboards a few years  
17 ago, that weren't really utilized. They were peeling  
18 and some of the paper was coming down. So, you know,  
19 we alerted the company, and they put up recruitment  
20 posters. I told you about this. They had two  
21 recruitment posters. I think one was for the  
22 Marines. They kept them up for years. They didn't  
23 change them. I think one is still up now. And it  
24 has to be-- it's starting to deteriorate.

2           So I think if we come up with a program where we  
3 could actually offer help for our veterans, and have  
4 your agency contacted or the VA contacted, we could  
5 do-- we could do ads, or the students can do it,  
6 design it with your material in there, and get the  
7 billboard companies-- I'm sure-- I'll reach out to  
8 them to see if they're willing to do the production  
9 work on it. So no cost to you.

10           ASSISTANT COMMISSIONER GREELY: That sounds  
11 great.

12           CHAIRPERSON HOLDEN: Obviously no cost to  
13 students. And we get free advertising, at least as a  
14 filler for the billboards. And I would start with my  
15 district. But I would also go to other districts.  
16 But I think that should be-- that could be a citywide  
17 program.

18           And this is what I was mentioning in the number  
19 of hearings that we had, that there's-- there's-- we  
20 have bus stops with advertising on it. And sometimes  
21 it's-- there's nobody booked for a certain period of  
22 time. So we could actually have filler ads that  
23 could jump in there. It's worth trying. Anything we  
24 can do.

2 ASSISTANT COMMISSIONER GREELY: Sure. That  
3 sounds great.

4 COMMISSIONER HENDON: I-- We will get on your  
5 calendar and have that conversation.

6 CHAIRPERSON HOLDEN: Let's have-- Let's have a  
7 meeting because I'd like to then pitch it to the  
8 colleges. It doesn't have to be my-- the college  
9 that I taught. It doesn't have to be City Tech, but  
10 they're very good. But it could be other schools  
11 around the city. It could even be high school  
12 students.

13 ASSISTANT COMMISSIONER GREELY: I believe Visual  
14 Arts has one.

15 CHAIRPERSON HOLDEN: Yeah. Art and Design did--  
16 did an actual project on our subways to stop subway  
17 surfing. And they-- they did a very good campaign.

18 So they're very talented. We have students in  
19 our system, in the City University and also in our  
20 high schools that could do this. And again, what I  
21 think is for an agency like yours with a very small  
22 budget, this would be probably the best way to reach  
23 out to veterans and to people that are not, you know,  
24 aware of some of the programs.

25 Thank you. Thanks so much. Any other?

2 COUNCILMEMBER NURSE: No, I'm good.

3 CHAIRPERSON HOLDEN: Okay. Thank you,  
4 Commissioner. Thank you, staff, everybody. And we  
5 didn't get to hear from Paul Vallone, but we'll get  
6 him next time.

7 Thank you.

8 Yeah, we're going to have the public testimony  
9 now. If you'd like to sign in, if you haven't, see  
10 the Sergeant at Arms. Thanks again.

11 COMMITTEE COUNSEL: I will now be calling up  
12 individuals in panels testify. Once your name is  
13 called, you may come up, and you may begin your  
14 testimony once the sergeant in arms sets the clock  
15 and gives you the cue. I would like to note that  
16 written testimony, which will be reviewed in full by  
17 committee staff, may be submitted to the record up to  
18 72 hours after the close of this hearing by e-mailing  
19 it to testimony@counsel.NYC.gov. All testimony will  
20 be limited to three minutes. Remember there's a few  
21 second delay when you're on mute before we can hear  
22 you. The first panel will be Joe Bello and Andrew.

23 CHAIRPERSON HOLDEN: Joe Bello, do you want to  
24 start?

25 MR. BELLO: No.

2 CHAIRPERSON HOLDEN: No? Okay.

3 ANDREW: Good? Good morning ladies-- ladies and  
4 gentlemen. My name is Andrew. City Council--

5 CHAIRPERSON HOLDEN: Could you speak a little  
6 louder and move the mic up? Go ahead. Go ahead,  
7 Andrew.

8 ANDREW: Good morning, ladies and gentlemen of  
9 the City Council. My name is Andrew. And it's a  
10 pleasure to be here to talk about the veterans. I do  
11 appreciate the veterans protecting America. But I'm  
12 not sure if they're aware of an actor named Robin  
13 Williams. He killed himself because of the  
14 medication that he was on. So this .gov website that  
15 I would like to give you guys is called pubmed.gov,  
16 which speaks about the medications that the people  
17 being administered that they will kill themselves.  
18 Or they'll go out and kill-- kill others. I learned  
19 that from a guy on the radio named Gary Null, he  
20 comes on every day at 99.5 FM at 12 o'clock speaks  
21 about the mental state, cancer, and different things.

22 So I'd first like to mention that-- Also, I'd  
23 like to mention I'm being attacked by law  
24 enforcement. That's why I gave out the flyers here.  
25 They had attacked me. And they had a list of videos.



2 They did that to another guy named Laquan McDonald in  
3 Chicago. They murdered him. And they went to Burger  
4 King, and they had then erase the video. They  
5 destroyed it. Everything on the news.

6 So I would like for the City Council to take time  
7 to investigate my situation as to what's going on.  
8 Because I gave you guys do QR code to the video that  
9 I made, that I put online, what law enforcement is  
10 doing to me. But they do this to people throughout  
11 America as well, which is quite dangerous to other  
12 people.

13 So I'm concerned about the veterans, and I'm  
14 concerned about the American public, how law  
15 enforcement is treating the-- the American public.

16 CHAIRPERSON HOLDEN: We're concerned with  
17 veterans, and their mental health on this-- this  
18 hearing. So if you could give us some of that  
19 information, we'll-- we'll look at it if there's if  
20 it's concerning veterans. Okay?

21 Thank you. Thanks so much for your testimony.

22 ANDREW: Okay, so you're not concerned about the  
23 American public being attacked by law enforcement?

24 CHAIRPERSON HOLDEN: We-- Again, if you give us  
25 any information, we'll-- we'll look at it. Okay?

2 ANDREW: Okay. Sure.

3 CHAIRPERSON HOLDEN: Thank you. Okay. Joe  
4 Bello.

5 MR. BELLO: Hello. Okay. Good morning, Chairman  
6 Holden, members of the Veterans Committee. Thank you  
7 for the opportunity to testify this morning on the  
8 proposed legislation focused on veterans' mental  
9 health, which is part of the Council's Mental Health  
10 Roadmap to improve outcomes for all New Yorkers.

11 Many of us recognize, especially if you're active  
12 in the community, that DVS is one of the smallest  
13 agencies in the city with a budget of roughly \$5  
14 million. Like many agencies over the past several  
15 years, DVS has seen a decline in its personnel and  
16 has had to shift personnel to cover various programs  
17 and outreach.

18 In March 2021, Mayor de Blasio signed Executive  
19 Order 65, which mandated that all agencies adopt by  
20 the end of fiscal year 21, a standard uniform and  
21 veteran indicator question on their intake forms,  
22 questionnaires, requests for assistance. The purpose  
23 was to connect previously unknown veteran populations  
24 as well as new veterans to services and benefits they  
25 may qualify for, including legal, housing,

2 employment, and education assistance. Each agency  
3 was supposed to start submitting this data on October  
4 15, 2021.

5 Intro 1237 would seemingly codify this Executive  
6 Order, which I should note still remains in effect.  
7 However, to date, no one from the public has seen any  
8 demographic data from 2021 onward from either the  
9 previous administration or the current one. And the  
10 mayor's most recent MMR provided no data on this  
11 either, other than to give a percentage number of  
12 veterans and their families referred to resources and  
13 services.

14 I also wanted to add in that at the last hearing  
15 that we had on-- on mental health, we talked about  
16 Vet-- Mission Vet Check, and how it had been  
17 cancelled. The mayor's MMR actually specifically  
18 said that Mission Vet Check was stopped in July or  
19 August of 2022. And I know that DVS is starting that  
20 up again. So, I'd like to see those numbers as well,  
21 as to who's using-- what those numbers look like  
22 since they've started again.

23 My concern with Intro 1237 is that without  
24 knowing what the agencies have collected as a result  
25 of EO 65, or what the demographic data looks like,

2 we're asking them to throw out the baby with the  
3 bathwater, and start again in a time of budget cuts  
4 and reduced personnel. I know it's just numbers,  
5 but, you know, when-- if we pass Intro 1237, it  
6 conceivably could have the unintended consequences of  
7 double dipping on the data and numbers of veterans  
8 seeking services.

9 This Intro also mandates third parties through  
10 contracts to collect demographic information, which  
11 could also add additional issues into the collection  
12 of the data.

13 I cannot support this Intro at this time,  
14 although I-- you know, it's a-- it is good, it just  
15 needs to be fleshed out more. I would recommend the  
16 committee request the administration to provide the  
17 EO 65 information.

18 I would also recommend that the Intro be aligned,  
19 kind of like a blending of 1237 and what the question  
20 contained in EO 65. For example, in-- in 1237, I  
21 would take out, "What is the relevance of the city  
22 needing to know what branch of service an individual  
23 was in?"

24 Finally, the survey data report compiled by DVS  
25 should be amended to be submitted not only to the

2 speaker, but to the Veterans' Committee Chair, and  
3 the city's veterans advisory board which represent  
4 the community.

5 With respect to Intro 1239, DVS does have a  
6 mental health webpage, Connect To Wellness, where  
7 they have one-pagers to review, most of it just being  
8 VA to mental health resources available to veterans  
9 and family members. However, you know, as was said,  
10 I don't know how often it is reviewed or updated. My  
11 concern is that while I agree that The Mayor's  
12 Community Affairs and Public Engagement Unit could be  
13 doing more on the outreach front, Commissioner Hendon  
14 did testify at DVS's executive budget hearing last  
15 May that from last [inaudible], the agency cut  
16 \$19,800 for media marketing, specifically the I Heart  
17 Radio Christmas marketing campaign that few people  
18 knew about. To everyone's knowledge that-- that's  
19 the extent of the agency's citywide public  
20 advertising. So unless some funding is going to be  
21 put in for specific advertising, I don't see that  
22 happening. Even Laurie Sutton had talked about doing  
23 that, and it never happened.

24 So with the 5% PEG just happening, and  
25 potentially another two scheduled for early next

2 year, which would most likely come from DVS's Other-  
3 Than-Personnel Services, or OPS monies, I share ICL's  
4 CEO Jody Rudin's concern that with a potential 15%  
5 PEG, how are we asking DVS (including the non-for-  
6 profits) to do this work when DVS doesn't have the--  
7 necessarily have the manpower, and the Council did  
8 not increase its funding to the Veterans Initiative.

9 With regards to Intro 1241, this legislation in  
10 its current form should be held over. New York City  
11 regards everyone who served regardless of discharge  
12 to be a service-- to be a veteran. The city also  
13 includes active duty military personnel stationed in  
14 New York City as veterans. Therefore, if Councilman  
15 Dinowitz's Intro 1237 legislation were to pass, there  
16 are nonprofit organizations providing mental health  
17 services that would have to be added into Intro 1241  
18 as well.

19 Additionally, the annual report on the provision  
20 of mental health services should be amended to be  
21 separate and distinct from any other report DVS is  
22 required to submit.

23 Regarding Intro 1244, I appreciate the Public  
24 Advocate's work with Theater of War on bringing  
25 veterans' mental health to the forefront. However,

2 with this legislation (and was stated) DVS already  
3 has one-page pamphlets and mental health resources on  
4 its webpage. The issue here seems to be distribution  
5 to social service agencies, Councilmember offices.  
6 That doesn't need to be litigated. Additionally, the  
7 Veterans Resource Guide would need to be reviewed and  
8 updated annually.

9 Finally, I am supportive of your resolution  
10 Chairman, Reso 387 to provide eligible veterans with  
11 support dogs. But I recognize that it currently  
12 costs upwards between \$15 to \$30,000, depending on  
13 the specific skill required to train them, and that  
14 not all dogs make the cut. I also see that DVS used  
15 example for funding for the Joseph P. Dwyer program,  
16 Not Tiles, for animal-assisted modalities, but we'll  
17 have to see what DVS's concept papers says whenever  
18 that comes out.

19 In conclusion, I want to thank Speaker Adams for  
20 her leadership, for raising awareness of this issue.  
21 And I want to echo the speaker's statement to thank  
22 Councilmembers Lee, Holden, Dinowitz, and Narcisse,  
23 as well as the Public Advocate for their work on  
24 these items. I believe there is potential with these  
25 bills, but we need to get them right.

2 Thank you.

3 CHAIRPERSON HOLDEN: And I agree with most of  
4 your testimony. Certainly with the size of the  
5 agency, they should not-- DVS should not be part of  
6 the PEG. There should be no cuts, because we don't  
7 have a-- the agency should be twice the size. I  
8 agree. And I think the Commissioner would agree, he--  
9 - because he's dedicated his life to serving our  
10 veterans.

11 So-- And this is the frustrating thing. I put in  
12 for initiatives for the fund from the Council. And  
13 again, they're-- it's fallen on deaf ears.

14 So we owe-- You know, we do everything. We  
15 increase budgets, you know, for a lot of other  
16 programs. And yet, we don't do that for our  
17 veterans, and enough budget. We actually cut  
18 benefits or services.

19 The biggest challenge that I see-- and I tried to  
20 address it today a little bit, and this time we'll  
21 try to get it actually done is just the outreach,  
22 notifying veterans, putting it on the-- you know, out  
23 there on bus shelters, billboards, or even, you know,  
24 again, without a budget item there, without money.  
25 And I think we could do that. We've done it in the



2 past and I said we-- we could probably do it again,  
3 on a more permanent basis. But again, thank you both  
4 for your testimony. And I know Joe. Joe, we'll be  
5 in touch we'll see you out there because you're a  
6 good advocate.

7 MR. BELLO: Absolutely.

8 CHAIRPERSON HOLDEN: Thanks so much.

9 MR. BELLO: I appreciate it.

10 CHAIRPERSON HOLDEN: Thank you.

11 COMMITTEE COUNSEL: Chair Holden, we have now  
12 heard from everyone who was signed up to testify. If  
13 we inadvertently missed anyone who would like to  
14 testify, please visit the Sergeant's table and  
15 complete a witness slip now.

16 [BACKGROUND VOICES]

17 What's your name?

18 Peter?

19 Well, just come up. Peter Kepner.

20 CHAIRPERSON HOLDEN: You don't have it?

21 COMMITTEE COUNSEL: All right. We just found  
22 your card.

23 MR. KEMPNER: I knew I had done one.

24 CHAIRPERSON HOLDEN: All right. You may start.

25

2 MR. KEMPNER: Thank you Chair Holden. And thank  
3 you for the-- to the members of the Veterans  
4 Committee for holding this hearing. My name is Peter  
5 Kepner, and I am the Legal Director of Volunteers Of  
6 Legal Service. Our mission is to leverage private  
7 attorneys to provide free legal services to low-  
8 income New Yorkers to help fill the justice gap.

9 The VOLS Veterans Initiative which is part of our  
10 senior law project strives to empower older New  
11 Yorkers who served in the military to age in place  
12 with dignity, access legal services, and live without  
13 fear of homelessness. Our free legal services assist  
14 older veterans in making key decisions about  
15 incapacity, end of life planning by providing them  
16 with last wills and testaments, powers of attorney,  
17 health care proxies, and other advanced directives.  
18 These documents enable our clients to ensure that  
19 their dying wishes are clear, and that they're being  
20 carried out by the people that they love and trust  
21 the most.

22 In addition to the work in our Senior Law  
23 Project, we also have a Veterans Initiative in our  
24 Microenterprise Project. for over 20 years our  
25 Microenterprise project has provided free high

2 quality legal services to small business owners and  
3 micro-entrepreneurs. For many veterans, owning a  
4 small businesses and effective path to financial  
5 stability and independence upon their return from  
6 service. VOLS aids with drafting of contracts  
7 reviewing government documents, protecting  
8 intellectual property, and advising on commercial  
9 leases.

10 My comments today focus on Intros 1237 and 1244.  
11 Screening for and collecting data with respect to  
12 military service is critically important. Knowing  
13 whether someone has a history of military service can  
14 be the key to unlocking benefits and services which  
15 can be life changing. Asking the question, "Have you  
16 or anyone in your family or household ever served in  
17 the US military?" is a simple yet effective method of  
18 an Ensuring that a veteran's or family member's  
19 military affiliation is accounted for, opening up a  
20 vast number of possible benefits and solutions to  
21 problems that might not otherwise have been  
22 considered.

23 The benefits available to veterans through the VA  
24 and other programs are extensive and often life-  
25 changing. Knowing somebody's veteran status can mean

2 access to eviction prevention grants, housing  
3 subsidies, cash benefits, health care services,  
4 preferences for affordable housing, job  
5 opportunities, veteran-focused social services,  
6 educational grants, and many other programs.

7       The New York City veterans community is  
8 incredibly diverse, and many in the community face a  
9 wide variety of challenges. Often those with a  
10 history of military service do not think of going to  
11 DVS for help, but instead turned to other agencies  
12 for assistance. When these other agencies failed to  
13 screen for military service, we miss an opportunity  
14 to provide veteran-specific services and care.

15       While we applaud the first steps taken by Intro  
16 1237 If adopted, it is also important to note that if  
17 agencies simply collect the data, and do not apply  
18 that data to solutions, we continue to miss  
19 opportunities to serve our city's veterans. Data  
20 collection can certainly shed light on the  
21 demographics of our veteran community, and what  
22 social services they're seeking. But the goal should  
23 be to provide access to the best benefits and  
24 services possible. Agencies must create systems to  
25 have a feedback loop with DVS to ensure that no

2 veteran slips through the cracks. Having a single  
3 informational pamphlet, such as the one envisioned in  
4 1244 could be a useful tool for those agencies and  
5 others to direct veterans to the right programs and  
6 services. But we must all be dedicated to  
7 guaranteeing that individuals who sacrifice the most  
8 on behalf of our country have access to benefits,  
9 resources, and assistance they need and have earned.

10 We'd like to thank the Council for holding this  
11 hearing and inviting us to testify. We hope that the  
12 city will continue to invest in services and programs  
13 that make New York City a place where veterans feel  
14 supported, welcomed, and at home. Thank you.

15 CHAIRPERSON HOLDEN: Thank you Mr. Kepner. By  
16 the way, you mentioned, and we talked about this  
17 today, some of-- We can collect the data or the  
18 agency will-- will get the information that that  
19 person is a veteran, but what do they do with it?

20 MR. KEMPNER: Right.

21 CHAIRPERSON HOLDEN: And that's-- that's some of  
22 the hurdles that the Commissioner mentioned and the  
23 staff was mentioning. And that is a major hurdle.  
24 What agency-- By your experience, what agency is  
25 probably the most lax with that? That they-- I

2 mean, is it the police department? Because I-- you  
3 know, we heard that already. Like, what do they do  
4 with it?

5 MR. KEMPNER: I don't know what any of them do  
6 with it, frankly.

7 CHAIRPERSON HOLDEN: You're not going to get in  
8 trouble here. Don't worry about it.

9 MR. KEMPNER: [LAUGHS] I don't want to name  
10 names. No, but it simply asking the question, and  
11 taking out city agencies for a second, I had a recent  
12 conversation with another legal services provider.  
13 And when I was telling a story about a client who we  
14 found out had worked-- had-- had served in the  
15 military, we discovered that he had served during a  
16 period of wartime, he had an honorable discharge, he  
17 was facing eviction. And we realized that he was  
18 eligible for VA pension. And that is what solved his  
19 problem. That is the key that unlocked the door to  
20 those benefits.

21 And I was telling another legal services provider  
22 in another part of the country this story. And she  
23 said to me, "Oh, we asked people whether or not they  
24 served in the military." And then we-- we put it on  
25

2 a shelf. And we don't know what to do with that  
3 information.

4 And so that is key. Asking the question is  
5 great, but how do you apply that information to  
6 solutions for those clients? And so, simply-- And  
7 hearing from the-- from DVS on this, where they get  
8 numbers, what are those numbers mean? If those  
9 people on the other side of the line aren't trained  
10 and provided resources for those veterans, and that  
11 specific contact information is given over to DVS, so  
12 they can engage with those veterans and help them  
13 find solutions.

14 CHAIRPERSON HOLDEN: So if you-- If we could  
15 talk, you know, and maybe we can meet at one point so  
16 I could pick your brain about what areas we need to  
17 do, what are some of the solutions? Because I'd like  
18 to address that on this Committee. Certainly, you're  
19 on the front lines. And you see-- Do you have any  
20 experience with Veteran Treatment Courts?

21 MR. KEMPNER: I do have some experience. I used  
22 to actually sit on the Advisory Council for the  
23 Brooklyn Veterans Treatment Court some years ago.  
24 And-- And that's actually-- And I know that folks  
25 slip through the cracks, especially with the NYPD.

2 But the courts are actually a great example of  
3 screening for military service and then diverting  
4 people to the right programs. I would love to see  
5 that in the civil courts, in addition to the criminal  
6 courts. You know, if a veteran is facing eviction,  
7 and we ask everybody who's coming through the  
8 eviction process and the housing courts whether they  
9 are somebody in their household served in the  
10 military, we can ensure that those folks are hooked  
11 up with legal services providers, that are providing  
12 specific services for veterans, that they're given  
13 over to CBOs who have the SSVF program that has  
14 eviction prevention grants for veterans who are  
15 facing eviction. You know, if the eviction is  
16 inevitable, having them, you know, be provided with  
17 possibility of getting a HUD VASH section eight  
18 voucher. And so really, at all points of contact  
19 with all of these systems, whether they're city  
20 agencies, or the courts, screening for military  
21 service is really key.

22 CHAIRPERSON HOLDEN: Right. Because I-- We've  
23 visited Rikers a few weeks ago, the veterans on  
24 Veterans Day, and we, you know, we had about 100--  
25 over 100 men in the room. And we asked them about



2 Veteran's Treatment Court, only four out of the  
3 probably 100, four or five raised their hands that  
4 they were dealing with it.

5 Now, I know some cases are ineligible. But there  
6 should be probably half of them should have raised  
7 their hand. And I think that's-- that's another  
8 hurdle that we have to overcome. And we have to get  
9 to the bottom of, you know, what, if they do check  
10 off a box, you know, when they are arrested, if the  
11 police officer interviews, checks off the veterans  
12 box, what happens to that? Again, and that's why I  
13 was dealing with the Queen's DA on this to try to get  
14 that. But any recommendations you could make, I'd  
15 like to hear it. Thanks so much. Thank you.

16 MR. KEMPNER: All right. Thank you,  
17 Councilmember.

18 COMMITTEE COUNSEL: All right. Thank you.  
19 Seeing no one else. I'd like to note that written  
20 testimony which will be reviewed in full by committee  
21 staff may be submitted to the record up to 72 hours  
22 after the close of this hearing by emailing it to  
23 testimony@Council.NYC.gov. Chair Holden, we have now  
24 concluded public testimony for this hearing.

2 CHAIRPERSON HOLDEN: Thank you so much everyone  
3 who testified, and looking forward to our next  
4 hearing. This hearing is adjourned.

5 [GAVEL]

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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 12/26/2023