



**TESTIMONY**

Presented by

**Caryn Resnick  
Acting Commissioner**

on

**Oversight: Senior Center Model Food Budgets**

before the

**New York City Council  
Committee on Aging**

on

**Wednesday, February 27, 2019  
10:00 A.M.**

at

**250 Broadway, 14<sup>th</sup> Floor Committee Room  
New York, NY 10007**

Good morning, Chairperson Chin and members of the Aging Committee. I am Caryn Resnick, Acting Commissioner for the New York City Department for the Aging (DFTA). I am joined by Michael Bosnick, Deputy Commissioner for the Division of Planning and Technology. I would like to thank you for this opportunity to provide testimony on the topic of senior center model food budgets.

We are grateful for the Administration's partnership with the Council, championed by your leadership and advocacy. This collaboration has led to an increase in DFTA's annual funding by more than \$90 million, representing 60 percent growth in the agency's City Tax Levy baselined budget. As a result of this investment:

- We implemented senior center model budgets with an addition of \$10 million in new baselined funds beginning in FY '18 for the DFTA portfolio;
- We stabilized case management staffing through an infusion of \$7.3 million to provide more competitive salaries, which have helped reduce high turnover rates, improved service delivery, and ensured continuity and quality of care;
- We doubled DFTA's existing allocation to \$8 million for caregiver programs to provide more support to caregivers and care receivers with the creative flexibility they need to access these services;
- We expanded Multi-Disciplinary Teams comprised of professionals from Adult Protective Services, law enforcement, medical centers, financial institutions, and community based organizations, through a \$1.5 million increase in baselined funding – these teams were established in all five boroughs, strengthening the City's ability to address complex elder abuse cases in a coordinated fashion; and
- We committed an initial \$3.2 million increase in DFTA's baseline budget to focus on geriatric mental health as part of the suite of groundbreaking initiatives under ThriveNYC, including one program that embeds mental health practitioners in senior centers across the City, and another program that combats social isolation among homebound older adults.

## **DFTA SENIOR CENTER NETWORK OVERVIEW**

As the largest Area Agency on Aging in the nation, DFTA currently funds senior centers at 249 sites across the five boroughs at approximately \$150 million annually, serving about 173,000 older New Yorkers in FY '18. Senior centers provide meals at no cost to seniors, though modest contributions are accepted and are completely voluntary, and an environment where older New Yorkers can participate in a variety of recreational, health promotional, and cultural activities, as well as receive counseling on social services and obtain assistance with benefits. Each day, 25,000 older adults receive meals at senior centers, and another 5,000 participate in activities without taking a meal.

All DFTA sponsored senior centers serve food that meets City and State nutritional standards, and meals that are culturally relevant to program participants are available citywide. The majority of senior centers cook on site, some programs cater, and other centers prepare meals for other programs. Kosher meal programs are available at senior centers in all five boroughs. A number of senior centers in Brooklyn, Manhattan and Queens serve meals that are culturally appropriate to their Chinese constituents, including senior centers in Chairperson Chin's district. In Queens, Korean Community Services of Metropolitan New York, Inc. (KCS) provides Korean meals at the DFTA senior center they operate in Flushing in Council Member Vallone's district, as well as at another site in Corona. In the Bronx, several senior centers serve Spanish and Latin American fare, as the preference of their constituents. Other senior centers offer Indian, Italian, Southern, and Caribbean meals to meet constituents' needs. Through cultural sharing and exchanges enriched by educational programming and translation services, senior centers foster sensitivity and appreciation for different cultures among a diverse membership, which break down cultural barriers in centers that have undergone demographic changes.

DFTA engaged Fordham University to conduct an analysis of the impact of participation in senior center activities on the overall health and well-being of older New Yorkers. The study followed older adults who were participants in senior centers, as well as older adults who had not participated in a senior center for at least one year. Findings indicated that senior center members are achieving positive outcomes. Senior center participants reported improved physical and mental health, increased participation in health programs, frequent exercising, and positive behavior change in monitoring weight and keeping physically active. Participation in a senior center also helped to reduce social

isolation. The older adult population served by senior centers are among those with the lowest incomes, the fewest resources, the poorest health, the greatest social isolation, and the most need for services. The findings of this study indicate that senior centers are attracting this group that has multiple needs, and senior center members experience improved physical and mental health, not only in the time period after joining a senior center, but maintain or even continue to improve even one year later. This is a very important finding, given the decline in health and social activity in this age group, especially among those with low incomes. Maintenance of health and social activity, rather than a decline, is a major benefit of senior centers.

### **SENIOR CENTER MODEL BUDGET**

In June 2018, DFTA discussed the senior center model budget process before this Committee. We stated that the overarching goal of the initiative is two-fold: to increase resources to ensure strong programming across the network of 249 senior centers; and to increase equity among centers by making more uniform the level of financial support provided to each of them. In line with the broader vision of promoting fairness and equity, the Administration added \$10 million in new baselined funds for the senior center portfolio starting in FY '18. This significant investment in the DFTA network was designated to help create parity in our senior center budgets, and provide adequate funding to achieve an expanded array of programming across the senior center system.

DFTA and the Mayor's Office of Management and Budget (OMB), with input from our network of providers and other stakeholders, conducted a thorough analysis of the existing line-item budgets and spending patterns across our portfolio of 249 senior centers. As a result, we identified several characteristics that exemplify high-quality programs, highlighting strong leadership and staff, as well as a rich array of health and education programming. We then compared existing budgets to the funding patterns that support the key attributes of high-quality programs, and calculated the need for each center based on where their current budgets compare to the 'model.'

The model budget reflects that every center needs adequate funding to provide threshold levels of quality programming, and to pay competitive wages to attract and retain high-quality staff. The network of 249 senior centers was divided into five groups based on Average Daily Participants, in recognition of the fact that there are certain costs that vary based on the size of a center, such as the

need for modestly more staff to run a very large center compared to a very small one. At the same time, the model accounts for certain fixed costs for running a center, irrespective of Average Daily Participants. The resulting amounts given to each center were divided between an amount for 'program staff' and another for 'programming,' based on each center's areas of need. However, funding remained flexible across line items, within certain parameters; thus, allowing centers to identify their most critical needs and submit proposals accordingly.

We are pleased to report that a large number of providers have told us that the infusion of funding given to them has made a marked difference in the levels, types and quality of programming they can offer. Various centers have used the funds to rightsize salaries and bring on board one or more new staff members to expand and enrich programming.

#### **SENIOR CENTER FOOD MODEL BUDGET**

At this time, we are engaged in the second and final phase of the model budget process, centered on food and related staff costs. DFTA is working with stakeholders and with OMB to determine the amount of funding needed for food purchase and for adequate numbers of food staff receiving competitive salaries, in order to provide high-quality meals with cultural diversity throughout the senior center network. Though their major focus is on home delivered meals, we have also engaged Guidehouse (formerly PricewaterhouseCoopers Public Sector Practice) to provide additional support to DFTA and OMB's analysis.

I would like to summarize progress to date:

1. DFTA has been seeking stakeholder input concerning food and food costs, and held a focus group with providers this past January. We have received invaluable information and insights from umbrella organizations involved in aging services, as well as seniors who attend senior centers. According to the focus group discussion, senior centers take pride in their ability to deliver quality, diverse food. New York City has one of the most diverse populations in the country, as well as some of the highest food prices nationally. These programs help older New Yorkers stay engaged in their communities and offer a place where they feel at home. In

relation to food service, centers also face challenges related to staffing, facilities, menu planning, and reporting.

2. We have worked with Guidehouse to collect information concerning food and related staff costs, efficiencies, innovations, and practices in other large cities so that we can learn from their successes and challenges. In New York City, challenges include differing perspectives on what meals should be served; increased expectations among older adults, resulting in shopping around for the best meal and programming; balancing generational preferences regarding food, as older seniors prefer traditional congregate meals and younger generations focus on nutrition; and varied food costs across the system.
3. Staff from our agency and from OMB visited and did outreach to senior centers to engage directors, other staff and attendees about their food programs, including what works well and what needs to be improved and how to achieve those improvements. The centers are of varied sizes and are located in different boroughs. Some serve meals prepared on site and others serve catered meals. The sites include Brookdale Senior Center in Council Member Eugene's district; KCS Flushing Senior Center in Council Member Vallone's district; and West Brighton Senior Center in Council Member Rose's district.
4. Similar to the Phase I senior center model budget work, DFTA has been working with OMB on an extensive data analysis to determine what constitutes adequate funding levels for purchasing and preparing food, as well as adequate salaries for hiring and retaining qualified food-related staff. In this analysis, we are comparing the cost of preparing regular meals and kosher meals, controlling for the size of senior centers, and looking at centers cooking in their own kitchens versus using caterers.

Through this multi-faceted approach to learning about food programming, we will attain results that will allow us to ensure that dollars are expended wisely and effectively, while at the same time, senior centers are given flexibility to structure their programs in a way that can best meet the needs of their communities and the desires of seniors opting for a meal. We are working with OMB on this analysis, and expect to have results to share later this spring.

**CONCLUSION**

Thank you again for this opportunity to provide testimony on senior center model food budgets. I look forward to our continued efforts together to address the needs of older New Yorkers. I am pleased to answer any questions you may have.



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**Testimony of United Neighborhood Houses  
Before the New York City Council Committee on Aging  
Council Member Margaret Chin, Chair**

**Oversight: Senior Center Model Food Budgets**

**Presented by Tara Klein, Policy Analyst  
February 27, 2019**

Thank you for convening today's hearing. My name is Tara Klein, and I am a Policy Analyst at United Neighborhood Houses (UNH). UNH is the membership organization of New York's settlement houses. We mobilize our members and their communities to advocate for good public policies, and we promote strong organizations and practices that keep neighborhoods resilient and thriving for all. Our goal is to strengthen and sustain settlement houses' contribution to the economic vitality, health, and cultures of their communities and New York City.

Today, UNH's membership includes 40 settlement houses in New York City and two in upstate New York. The work we do strengthens the capacity of more than 30,000 employees and volunteers working across 680 locations to continue providing necessary services for people of multiple generations with programs that provide skills, education, social services, health, arts, and connection to community and civic engagement opportunities for over 765,000 New Yorkers who visit settlement houses each year. UNH members provide a wide variety of services to support older adults, including operating 41 senior centers and 8 home delivered meals programs.

**To adequately support senior nutrition, UNH recommends adding \$20 million into senior center congregate meal programs and \$15 million into home delivered meals programs, for a total of \$35 million in new investments in the FY 2020 City budget.**

**Importance of Meal Programs for Older New Yorkers**

Meal programs are critical for older adults, as good nutrition is a key determinant of health outcomes as people age. Unfortunately, hunger among older adults in New York City remains high, with approximately 11% percent of New York City residents over age 60 experiencing food insecurity. This figure is even more striking in the Bronx, where 24% of older residents experience food insecurity.<sup>1</sup>

Access to congregate and home delivered meals are a key part of the strategy to decrease food insecurity among older people:

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<sup>1</sup>[https://www.hungerfreeamerica.org/sites/default/files/atoms/files/NYC%20and%20NYS%20Hunger%20Report%202018\\_0.pdf](https://www.hungerfreeamerica.org/sites/default/files/atoms/files/NYC%20and%20NYS%20Hunger%20Report%202018_0.pdf) (2018 report)



- **Congregate Meals** - Both neighborhood and innovative senior centers typically offer daily lunch meals to their participants, with some centers also offering a breakfast or dinner option. Many older adults rely on senior centers as their main or only meal of the day, and they value their daily social interactions with the kitchen staff and other seniors.
- **Home Delivered Meals** - For those individuals who have difficulties leaving their homes and struggle to cook meals for themselves, they can receive home-delivered meals either five days per week (a hot meal) or two days per week (a frozen meal that is then reheated). Citymeals on Wheels partners with home delivered meal programs to provide weekend and holiday meals. In addition to providing nutritious meals, home delivered meal programs have the added benefit of acting as a regular wellness-check on an older individual who might be homebound and socially isolated. According to Citymeals on Wheels, over half of home delivered meal recipients live alone. UNH's *Aging in the Shadows* report identifies living alone as a significant risk factor for experiencing social isolation, which has its own health risks for older adults.<sup>2</sup>

Settlement houses that operate senior centers and home delivered meal programs in the UNH network strive to offer the highest quality meal options while being responsive to the needs and preferences of older adults. In recent years, programs have seen a greater need for variety in their meal offerings, mainly around providing culturally appropriate meals, including Kosher and halal meals, and meals that are culturally relevant such as Chinese meals or Korean meals. Individuals with diabetes, food allergies, and other chronic health conditions also need meals that address their unique nutritional needs.

### **Meal Costs and Reimbursement Rates**

Unfortunately, providers face a major barrier in serving meals to seniors due to cost and low DFTA reimbursement rates. True meal costs for programs include raw food, disposables, supplies, kitchen maintenance, equipment, emergency repairs, exterminations, inspections, and staff, and for home delivered meals also include vehicle maintenance, gas, and heating/cooling systems, and parking costs and tickets. Costs also include OTPS and indirect such as rent, utilities, and organizational needs like human resources.

DFTA contracts do not cover the full cost of providing meals, making it difficult for providers to run effective programs that adequately support their populations. Organizations will often incur deficits to meet the needs of their communities and ensure seniors receive meals. Daily attendance at senior centers tend to fluctuate, which also has an impact. One UNH member has said they are contracted to provide 65 daily lunches at their senior center but regularly provide over 90 due to increased attendance. They are not reimbursed by DFTA for those additional incurred costs. There is an outsized impact on programs that serve culturally appropriate or relevant meals or therapeutic meals, as these often cost more than standard meals. According to Hunger Free America's most recent annual report, 34 percent of food pantries and kitchens in New York City were forced to turn people away, reduce their portion sizes, and/or limit their hours of operation due to a lack of resources.<sup>3</sup>

<sup>2</sup> [http://www.unhny.org/literature\\_239781/UNH\\_Aging\\_in\\_the\\_Shadows](http://www.unhny.org/literature_239781/UNH_Aging_in_the_Shadows)

<sup>3</sup> [https://www.hungerfreeamerica.org/sites/default/files/atoms/files/NYC%20and%20NYS%20Hunger%20Report%202018\\_0.pdf](https://www.hungerfreeamerica.org/sites/default/files/atoms/files/NYC%20and%20NYS%20Hunger%20Report%202018_0.pdf)

A national evaluation of Administration on Aging (AOA) Nutrition Programs in 2015 found that the average true cost of a congregate meal was \$10.69 and the average cost of a home delivered meal was \$11.06.<sup>4</sup> However, across DFTA meal programs, while there is great variation in reimbursement rates across programs, the average reimbursement rate per meal is about 20% lower than the national average, and those rates are even lower for programs in UNH’s network:

	<b>National Average Reimbursement Rate (2015)</b>	<b>DFTA Network Average Reimbursement Rate (2018)</b>	<b>UNH Network Average Reimbursement Rate (2018)</b>
<b>Congregate Meals</b>	\$10.69	\$9.06	\$7.98
<b>Home Delivered Meals</b>	\$11.06	\$8.42	\$8.12

The differences are even more urgent when considering that the cost of living is higher in New York City, and the U.S. Consumer Price Index for food has increased each year since 2015.<sup>5</sup>

Thanks to the Council’s support, in FY 2019 an additional \$2.84 million was added to the home delivered meal program, which helped bring reimbursement rates up system-wide by about 46 cents per meal. Unfortunately, this money was not baselined and was not included in the preliminary FY 2020 budget.

And while we are appreciative of the infusion of \$20 million in baselined funds into senior centers under the City’s “model budget” process, the first \$10 million round of this funding stipulated that meals and kitchens were ineligible for funding. The second \$10 million has yet to be allocated and is urgently needed, outside of this conversation on meals, and must be allocated immediately.

**Kitchen Staff**

While these numbers on their own offer clear justification of the need for additional funding, there are stories and people behind the numbers, in the older New Yorkers who rely on meal programs for nutrition and socialization, and in the cooks and kitchen staff who provide the meals.

Kitchen staff work very hard at very low pay. They are expected to do more than just prepare and serve food. Kitchen staff are administrators, working to complete inventory, order supplies, create menus that cover nutritional requirements, supervise volunteers who help in the kitchen, and complete other mandatory paperwork. At the same time, many cooks lack these administrative job skills, do not have a high school diploma, or cannot read in English. Programs fill this need by having directors and other senior center staff fill in on an ad-hoc basis. Cooks must also be customer service representatives to serve meals to senior center attendees.

While some senior centers have several staff members in the kitchen to share these responsibilities, small senior centers often have just one cook running the entire kitchen. If that cook is out sick or is taking personal time there is no substitute – the senior center director (who is not a cook) will often fill in.

<sup>4</sup> <https://www.acl.gov/sites/default/files/programs/2016-11/NSP-Meal-Cost-Analysis.pdf>

<sup>5</sup> <https://www.usinflationcalculator.com/inflation/food-inflation-in-the-united-states/>

For kitchens that prepare both congregate and home-delivered meals, staff often cook 3 meals per day and will work more than 12 hour days. Programs have expressed having to make a difficult financial choice between hiring more staff for low pay or overworking existing staff.

Meal programs in the UNH network report paying kitchen staff around the minimum wage, with raises only given when DFTA provides funding for a COLA or the minimum wage increase. One UNH member expressed anger over feeling “forced to reinforce poverty” due to these low reimbursement rates and consequential low salaries.

This low pay has led to high turnover rates, with many staff opting to work at higher-paying institutions like schools and colleges or at restaurants (some UNH programs mentioned recent turnover at restaurants due to an uptick in fears of deportation for undocumented immigrants). Hiring is difficult, with one program reporting a job posting for an assistant cook that was unfilled for 6 months.

### **City Budget Concerns and Procurements**

We understand the City budget is constrained by a \$750 million Program to Eliminate the Gap (PEG) this year. While we certainly understand the City’s fiscal constraints, it is urgent that DFTA not face cuts under the PEG. DFTA programs have been underfunded for many years. Only recently have DFTA and the Council begun to address these long-standing deficiencies through new funding and looking to redesign programs. DFTA is currently preparing to re-procure the home delivered meal system, to be followed by senior centers. To build a system that adequately addresses the growing older adult population, and with programs that are currently very financially strained, we cannot afford to lose any funding.

### **Recommendations**

In order to meet the nutritional needs of New York City’s growing older adult population, support a decently-paid workforce, and ensure programs are paid for the true costs of running a meal program, **UNH recommends the FY 2020 budget include an additional \$20 million for senior center congregate meal programs and \$15 million for home delivered meal programs, for a total of \$35 million in new investments.**

Further, contracts should have regular cost adjustors to account for rising food costs and inflation, and should be adjusted regularly as the number of older New Yorkers increases. The City should also explore supporting job training programs to support kitchen staff in their administrative responsibilities.

Finally, the FY 2020 must also **include the second round of \$10 million in senior center model budget money** that was previously promised.

Thank you for your time. For questions, I can be contacted at 917-484-9326 or [tklein@unhny.org](mailto:tklein@unhny.org).



Making New York a better place to age

**New York City Council  
Committee on Aging  
Chair, Council Member Margaret Chin  
February 27, 2019  
Senior Center Meals Model Budget Hearing**

LiveOn NY is a nonprofit membership organization representing 100 community-based organizations that serve over 300,000 older New Yorkers annually through senior centers, congregate and home-delivered meals, NORCs, affordable senior housing, elder abuse prevention services, caregiver supports, transportation and case management. Thank you Chair Chin and the Aging Committee for the opportunity to testify.

LiveOn NY is encouraged and encouraged the recent initial investments in senior centers, which are the core of strong communities. We also recognize and are encouraged by the joint work between the Office of Management and Budget (OMB) and DFTA examining the senior center meals system.

That said, as it stands the overall DFTA budget accounts for less than 1% of the total city budget, a point that is only exacerbated by the fact aging New Yorkers are the now fastest growing demographic. Further, New York City spends 20% below the national average on senior meals – that means they are only paying for 4 out of every 5 needed meals. This does not reflect fairness for older New Yorkers, senior center kitchen staff or the nonprofits that serve older New Yorkers. *In order for New York to truly be the fairest big city, it must be a #FairCity4AllAges.*

#### **FY19 “Model Senior Center” Budgets**

In FY19 DFTA undertook a model senior center analysis and distributed \$10 million for “model senior center” budgets late in the fiscal year. Providers were not able to allocate this funding for meals or meal staff. Of note:

- 249 senior centers were included the “model senior center budget” analysis.
- 26 out of the 249 received **no funding** because they were deemed at or above the “model” amount.
- For the 223 centers that did get funding, it was to be directed in two areas: direct staffing and consultants. “Direct Staffing” does not include kitchen or meal staff, which has caused salary disparity among programs. The funding could not be used for meal costs either, or other expenses to run a kitchen.
- 38 additional programs were not evaluated in the “model senior center” budget process, and thus received **no funding**. In that group are former discretionary funded sites that are now under DFTA (11 centers), former NYCHA (4 centers), “social clubs” (17) and other social service programs (6). Many, if not all, of the sites not evaluated in the “model senior center” budget process are held to the same standards as the sites that were evaluated, yet were not given funding as the others were. The appropriateness of this decision must be evaluated and reconciled moving forward.
- In addition to this baselined \$10 million distributed late in FY19, the city has promised an additional \$10 million “by 2021” through this “Model Senior Center Budget” process.

#### **The Importance of NYC Senior Center Meals**

- Senior centers provided 7.6 million senior center meals in FY17.<sup>i</sup>
- 56% of seniors report that meals eaten at the center make up ½ or more of their daily food intake and nutrients for the day from these meals.<sup>ii</sup>
- 13.6% of New Yorkers over the age of 60 lived in food insecure households and that number is rising.
- Seniors are underenrolled in SNAP - among those living with hunger, the under-enrollment rate of SNAP benefits is around 40%.

- Meals also offer socialization and improve lives, as isolation has been found to be a greater predictor of morbidity than obesity and provide critical nutrition services for seniors of all backgrounds, language capacities, religions, and socioeconomic status.

## The importance of NYC Home Delivered Meals

- This year, providers will distribute over 4.6 million home delivered meals.
- The majority of seniors utilizing the program tend to be women, living alone, receiving meals that on average account for ½ or more of their total food for the day.
- Nationally, 59% of meal recipients live alone – and the person delivering the meal is often the only person they will see that day.<sup>iii</sup>
- Home delivered meals are critical for supporting older adults to age independently.

## Challenges for the System

- **Inadequate funding for Staffing:** Despite congregate meals being core to the spirit of the Older Americans Act, senior center kitchens citywide are far understaffed across the board and often must rely on volunteers to perform core functions to sustain the program. Further, salaries and funding are not commensurate with the numerous responsibilities required to run a kitchen including food preparation, cooking, serving meals, menu planning and submissions, inventory, ordering, accounting, managing volunteers and numerous other responsibilities required to operate a kitchen. Kitchen staff are critical to the senior center and were excluded in the model budget funding last year.
- **Underfunding of Raw Food Costs:** Based on data from FY17, NYC paid nonprofits for senior and home delivered meals at a rate 20% below the national average. Specifically, for congregate meals, DFTA reimbursed providers on the average at \$9.06 compared to the 2015 national average rate of \$10.69. For home delivered meals, DFTA reimbursed providers on the average \$8.24 compared to the national average rate of about \$11.06. **This means the city is paying for only 4 out of every 5 meals.** From 2008-2013 alone, the cost of food increased by 11% according to the Consumer Price Index, however the nonprofits struggle to keep pace with food and service costs and what NYC is below the national average in what it pays to feed hungry seniors.
- **Inadequate Funding for Culturally Competent Meals:** Further, almost 50% of older New Yorkers are foreign born according to a recent Center for an Urban Future study, reflecting a significant need for meals that are culturally appropriate to an array of backgrounds. Providers are required, not to mention eager, to offer menus that are culturally appropriate and nutritious, but do not have adequate funding to do so as this requirement brings a fiscal implication: in 2015, DFTA stated that, “in DFTA’s HDML network, each catered Kosher [meal] is on average \$1.38 more than non-Kosher catered meals.” Similar to Kosher meals, Halaal, gluten free, vegetarian, vegan, or other cultural or nutritional needs have an associated cost-increase.
- **There is no set funding for upgrades for equipment and other repairs for critical kitchen equipment including ovens, refrigerators and HVAC systems.** Because of the lack of process, certainty, and funding about whether requests for repairs or upgrades will even be responded to or entertained, centers typically purchase or upgrade equipment only when something breaks. This is disruptive to service delivery, particularly in the kitchen and is inefficient and preventable. These costs and needs are heightened in NYCHA senior centers and programs, which have critical additional infrastructure and repair needs.

- **There is no baselined funding in contracts to meet minimal health and safety standards for senior centers.** Many inspections and services are required annually or several times a year, including extermination, grease trap cleaning and grease removal, hood cleaning, fire suppression systems, maintenance of HVAC systems and refrigerators and freezers. Providers have also reported that annual deep power cleanings of kitchens are necessary to prevent against rodent infestations. Other expenses include sewage back up problems and security alarm service and maintenance. While there may be some very small amounts in budgets under “Other Occupancy” costs, these routine annual expenses are estimated at well over \$10,000 a year, and providers do not have anywhere close to this in their budgets, even though they are required and routine.

## Recommendations

1. **Add \$20 million in baselined funding to DFTA for congregate meals.** This funding will increase meal costs closer to the national average, increase funding for providers to appropriately pay and staff their kitchens and add funding for the costs for equipment and services required to safely operate a kitchen. This funding is needed immediately since kitchen staff were specifically excluded from the model budget funding for senior centers last year.
2. **Add \$15 million in baselined funding to DFTA for home delivered meals.** This funding will increase meal costs closer to the national average, increase funding for providers to appropriately pay and staff and service needs, as well as address increased need as the population increases. We recognize that DFTA, thanks to the Council’s support, added \$2.84 million in FY 2019 for home delivered meals, however this funding was not baselined and was one time funding.
3. **No PEGs for DFTA.** Across the board reductions through the recently announced Program to Eliminate the Gap (PEG) disproportionately and unfairly affect small agencies, such as DFTA, which receives such a small portion of the city budget to begin with. To avoid cutting direct services to older New Yorkers and the staff that serve them, DFTA should not be subject to PEGs.
4. **Expedite the additional \$10 million promised for senior centers immediately.** Allocating these funds quickly is integral to meeting current need and to ensuring that all programs can compete in the coming RFP, projected to be released in calendar year 2020. Given the decades of underfunding, the need for this increased funding among non-profit providers is both urgent and immediate. We see no reason for the city to hold this funding. It should be expedited as soon as possible.
5. **Evaluate and fund senior center programs that were excluded from the Model Senior Center budget process.** If the purpose was to rightsize contracts and provide a more equal playing field for centers in anticipation of the next RFP, all applicable senior center programs should be included in this process and given the opportunity to secure funds needed to run a quality Senior Center. DFTA, OMB and the Council should discuss next steps to address the 38 programs not included in the initial process. *Further, all DFTA programs, including these 38 programs, should be included in any meal funding analysis.*
6. **Engage Providers in the city’s efforts to address senior hunger.** Both DFTA and OMB have referenced that the city is in the process of conducting a meals study which will advise them on next steps and new funding specifications for senior meal programs. We recognize DFTA’s initial steps on provider engagement, which are appreciated. However, there is no clear indication of timing, focus, or provider engagement specifically around home delivered meals. This has understandably caused great angst in the senior service network. We strongly urge the city to engage providers in this process to construct a meaningful and transparent process for both congregate and home delivered meals, as both RFPs are to be released in the near future.



Making New York a better place to age

7. **Fully fund city contracts.** The \$10 million allocated to senior centers late last year was greatly appreciated as an important first step. That said, the city needs to fully fund contracts that are representative of the costs to run a center, including meals/meal preparation, meal staff, rent, transportation, OTPS, technology, facility costs or other costs that are required to run a senior center, and allow for innovation to create new programs.
8. **Pay Nonprofits on time.** The recent Comptroller Report titled *Running Late: An Analysis of NYC Agency Contracts* clearly relays what our members have been telling us for years: chronic late payments consistently puts strain on nonprofit human service providers throughout the City. Of note, DFTA submitted 98.9% of its contracts retroactively, meaning all but 3 DFTA contracts arrived at the Comptroller's Office, the final step in the process, for registration after the contract start date. Nonprofits are hamstrung by these problems, often mirroring their clients by living payroll to payroll, uncertain when payment for services will finally arrive. Innovation and strategy is impossible when organizations are essentially loaning the City funds to cover the cost of serving the most vulnerable. Further, because professionals are spending countless hours navigating the contractual bureaucracy, they are unable to use their key skills, strengths and creativity to move this City forward.
9. **Support agency-wide investments in the human services sector.** LiveOn NY is a member of the Human Services Advancement Strategy Group (HSASG). The Council and Administration have made important investments in the sector over the past two years, as well as expanded program investments, while also tackling systems issues through the Nonprofit Resiliency Committee. More work needs to be done including increasing indirect expenses, fringe benefits, insurance, and occupancy costs which are all areas that are critical to the fiscal, administrative, and operational integrity of the sector. We are also calling for trend factor/cost escalation formulas in all new procurements for the duration of the contract.

We look forward to working with City Council, DFTA, all city agencies and the Administration to make New York a better, and fairer, place to age through a strong network of community based services.

*LiveOn NY's members provide the core, community-based services that allow older adults to thrive in their communities. With a base of more than 100 community-based organizations serving at least 300,000 older New Yorkers annually. Our members provide services ranging from senior centers, congregate and home-delivered meals, affordable senior housing with services, elder abuse prevention services, caregiver supports, case management, transportation, and NORCs. LiveOn NY advocates for increased funding for these vital services to improve both the solvency of the system and the overall capacity of community-based service providers.*

*LiveOn NY also administers a citywide outreach program and staffs a hotline that educates, screens and helps with benefit enrollment including SNAP, SCRIE and others, and also administers the Rights and Information for Senior Empowerment (RISE) program to bring critical information directly to seniors on important topics to help them age well in their communities.*

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<sup>i</sup> New York State Office of the State Comptroller congregate Meal Services for the Elderly study, 2018

<sup>ii</sup> ACL Research Brief Number 8, September 2015 "Older Americans Benefit from Older Americans Nutrition Programs"

<sup>iii</sup> Meals on Wheels of America, Delivering So Much More than Just a Meal Fact Sheet, United States, 2018



New York City Council  
Committee on Aging

Oversight: Senior Center Model Food Budgets

February 27, 2019

Good morning Chairperson Chin and members of the Aging Committee. Thank you for the opportunity to testify today. My name is Molly Krakowski and I am the Senior Director of Government Affairs at JASA. JASA's mission is to sustain and enrich the lives of aging New Yorkers in their communities, enabling them to live safely at home and connect with the people, places and experiences that provide meaning. JASA's programming promotes independence, safety, wellness, community participation and an enhanced quality of life for New York City's older adults. Our varied programs provide a continuum of care to over 40,000 clients annually.

Over the past 50 years, JASA has developed a comprehensive, integrated network of services including case management, NORC supportive services, housing, licensed mental health, legal services, Adult Protective Services, advocacy, home care, senior centers, home delivered meals, and special services for caregivers and victims of elder abuse.

JASA currently has contracts for 22 senior centers with the New York City Department for the Aging, DFTA. These senior centers operate in Manhattan (1), The Bronx (8), Brooklyn (9) and Queens (4). Each center is unique, varying in size, demographics, and programs. The senior centers provide an inviting setting, appreciative of the diversity of the communities in which they are based, offering engaging activities, health and wellness programs, and culturally appropriate meals.

We are pleased to have an opportunity today to address our general concerns with the senior center congregate meal service as well as specific concerns related to current reimbursement rates.



DFTA senior centers operate with different reimbursement rates across agency contracts. A 2017 study, "Separate and Unequal: An Analysis of Disparities in New York City Senior Center Funding" by Union Settlement, showed that of the nearly 250 DFTA senior centers included in their analysis, 37 centers receive in the lowest range of cost per meal reimbursement, at \$3-\$6 per meal, and by contrast, the highest rate of reimbursement topped \$18. All of JASA's 22 senior centers fall into the lowest reimbursement rate category.

In addition, there is an added expense for providing culturally appropriate kosher meals. Of JASA's 22 senior centers, 3 centers provide a kosher meal options, and thirteen exclusively kosher center. Funding has not kept pace with the growing expense; our vendors are asking for increases, which are not unreasonable given the rising cost of food.

The senior center contracts do not cover the full cost of the meal, and this underfunding of services impacts on meal quality. As senior center members report, there is a direct correlation between the meals and center utilization.

In January, JASA participated in a roundtable discussion with other aging service providers and DFTA. The meeting provided an opportunity to share concerns about congregate meal services and envision new possibilities going forward. We explored alternate models for meal service delivery and flexibility, as ways to increase center utilization and appeal to individuals who have different eating habits and/or are not yet fully retired. Many centers would like to offer evening meals, salad bars and choices for vegan or alternative meals. We also discussed the "dining experience," and the challenge of operating programs in run down and poorly lighted facilities.

There was general agreement that the greatest impediment to improving and modernizing the meals' service and positively impacting senior center utilization is lack of adequate funding. Providing additional meal options are costly, the DFTA reimbursement rates for meals are too low, and many facilities will require significant capital dollars (unavailable to many of the rental sites in which senior centers are housed). JASA joins with aging advocates in proposing a minimum investment of \$20 million in baselined funding for DFTA congregate meals. This funding will bring meal costs closer to the national average, allow senior centers to operate with adequate funding for food service delivery and staffing, and provide an enhanced experience to participants.

The first phase of the senior center model budget helped to begin to address the salary inequity for some staff and the insufficient and varying funding across DFTA contracts. Unfortunately, not all DFTA contracted senior centers were included in the initial

evaluation. The first round of funding for the model budget only included senior centers that received DFTA contracts through the 2012 senior center RFP. This model budget funding eligibility excluded 38 senior centers (4 are operated by JASA) that originally received funding through the New York City Council and were subsequently baselined in the City budget, as well as NYCHA social clubs. Most of these 38 senior centers operate with the same requirements as any other DFTA contracted senior center. The funding needed to improve the congregate meal service is essential. However, so is the need to extend the senior center model budget process to those centers excluded from the first phase of new funding that supported increased salaries and programming dollars. Of course, all DFTA programs providing congregate meals, including these 38 programs, should be included in any meal funding analysis.

Finally, as the City tightens funding this year, we ask that DFTA not be subject to any PEGs. The agency is already less than half of one percent of the budget, and any cut to DFTA will have a disproportionately negative effect on the community-based aging services network's ability to meet the needs of New York's growing and diverse population of older adults.

Molly Krakowski  
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212 273-5260



**TESTIMONY: UJA-FEDERATION OF NEW YORK**

**New York City Council  
Committee on Aging  
Oversight: Senior Center Model Food Budgets  
Honorable Margaret Chin, Chair**

**Submitted by:  
Abbe Pick  
UJA-Federation of New York**

**February 27, 2019**

On behalf of UJA-Federation of New York, our network of nonprofit partners and those we serve, thank you, Chairperson Chin and members of the Aging Committee, for the opportunity to submit testimony on the importance of supporting New York City's older adults. I am Abbe Pick, Planning Executive at UJA-Federation of New York.

Established more than 100 years ago, UJA is one of the nation's largest local philanthropies. UJA's mission is to fight poverty; connect people to their communities and respond to crises both locally and around the world. UJA supports nearly 100 nonprofit organizations serving those that are the most vulnerable and in need of programs and services.

UJA-Federation thanks Chairperson Chin and members of the Committee on Aging for your ongoing efforts and commitment to address funding for senior services. We were pleased to see the Council's continued and necessary support for the Department for the Aging (DFTA) Core Services and Initiatives, and appreciate funds committed by the Administration in the FY 2019 budget. These investments continue to help human services providers maintain programs, services and resources for New York City's older adults.

### **Senior Center Congregate Meals and Staffing**

UJA-Federation thanks the City Council and Chairperson Chin for securing baselined funding for DFTA in FY 2018. We were particularly encouraged that \$20 million was allocated to develop "model budgets" for senior centers; \$10 million was already released and an additional \$10 million was promised by 2021.

With nearly 30,000 individuals visiting senior centers daily, these sites play an important role in connecting older adults to services and community supports. The "model budget process" was meant to right-size senior center budgets, particularly to bolster staff salaries and help implement programming; however, these funds neither supported all of New York City's senior centers, nor did they cover the full cost of services. Funding for meals and kitchen staff was not included, despite a noted increased rate of food insecurity among older adults. In FY20 the city must make a serious commitment to fund the full scope of services needed to support a robust senior center, including kitchen staff and meal costs. The next projected RFP for senior centers is set to be released in 2020. It is important that these funds are committed prior to the RFP so that future awards account for the full cost of running a successful senior center.

New York City funds congregate meal reimbursements at a rate that is 20 percent lower than the national average. Additional investment is needed to adequately fund staffing, address the unfunded costs of running senior center kitchens, and provide culturally competent meals, such as kosher or halal, so that senior centers can meet demand, comply with DFTA requirements and best serve their clients. Furthermore, some of the senior centers in our network have reported running out of food for weekend and holiday meals. More resources are clearly needed to ensure that individuals receive the nutritious meals they need to thrive. **We urge the Council to work with the Administration to invest an additional \$20 million for congregate meals in the FY20 budget.**

### **Increase the Reimbursement Rates for Home Delivered Meals**

Beyond simple meal provision, home-delivered meals provide important social contact for those who are confined to their homes. Recipients of home delivered meals are chronically disabled

due to heart disease, mobility challenges, diabetes, arthritis or severe vision impairment and are reliant on these supports. Regular meal deliveries provide health and psychological benefits beyond nutrition, and can act as an access point for other critical support services, which help older adults continue to live in their homes. However, New York City funds home delivered meals at rate that is 20 percent below the national per meal average. This low rate neither allows for programs to expand their services to meet increasing demands nor are they able to adequately provide culturally competent meals to their clients. We thank the Council for working with the Administration to invest \$2.8 million in one-time funding in FY19 for home delivered meals for seniors. However, **an infusion of \$15 million by the Administration in FY 20 to support home delivered meals is further required to address these needs.**

### **Investing in Food Supports**

UJA's network of nonprofit partners provides vital food services and supports to all New Yorkers throughout the five boroughs. It is also through our partners that UJA is the largest provider of kosher food in New York City. As demonstrated by our Digital Pantry System, UJA believes in the importance of food choice and access to culturally competent meals. Our Digital Pantry System integrates access to kosher food with a central warehouse inventory system that allows clients to order food either at a pantry site, or from the convenience of their own home. Clients are able also to select a pick-up time for their food package, making the system work best for them.

There are over 500,000 people living in poor or near-poor Jewish households in New York City. The high cost of a kosher meal – which on average is 30% more expensive than a non-kosher meal – presents a unique challenge for many of our agencies in their work with clients who observe these dietary laws. SNAP recipients often exhaust their SNAP allotments by the last week of the month, but for those observing kosher dietary laws, benefits may run out much sooner.

While food insecurity rates among most New Yorkers have declined, rates among older adults have increased. Between 2015 and 2017, 10.9 percent of all seniors experienced food insecurity, in New York City.<sup>1</sup> Federal cuts to SNAP in 2013 further decreased the amount of SNAP benefits that New Yorkers receive each month, resulting in increased reliance on the Emergency Food Assistance Program (EFAP) to get adequate nutrition throughout the month. Because of this increased reliance on EFAP, according to a report by the Food Bank for New York City, 66 percent of food pantries and soup kitchens saw an increase in first time visitors and 63 percent saw an increase in elderly clients. Sixty-two percent of food pantries also saw an increase in families with children in September 2018 as compared to September 2013.<sup>2</sup> Additionally, many food pantries struggle to obtain an adequate food supply, especially proteins (meat, poultry and fish), fresh fruits and vegetables and dairy.<sup>3</sup>

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<sup>1</sup> Hunger Free America. *The Uneaten Big Apple: Hunger's High Cost in NYC*. November 2018.

[https://www.hungerfreeamerica.org/sites/default/files/atoms/files/NYC%20and%20NYS%20Hunger%20Report%202018\\_0.pdf](https://www.hungerfreeamerica.org/sites/default/files/atoms/files/NYC%20and%20NYS%20Hunger%20Report%202018_0.pdf)

<sup>2</sup> Food Bank for New York City. *Reflections of Hunger from the Front Lines*. November 2018.

[https://1giqgs400j4830k22r3m4wqg-wpengine.netdna-ssl.com/wp-content/uploads/Legislative-Breakfast\\_Key\\_Findings\\_final.pdf](https://1giqgs400j4830k22r3m4wqg-wpengine.netdna-ssl.com/wp-content/uploads/Legislative-Breakfast_Key_Findings_final.pdf)

<sup>3</sup> Id.

However, the high cost of a kosher meal presents a unique challenge for many of our partner agencies in their work with clients that observe these dietary laws. Providing culturally sensitive meal services for seniors is a priority for UJA, and we are particularly concerned about reimbursement rates for kosher meals. The cost of kosher meals is higher than the current DFTA reimbursement rate, and our agencies that provide these kosher meals to the elderly struggle to cover the higher costs. This also makes it difficult for service providers to meet the needs of other diverse senior communities throughout the City. Although increased investment in FY15 alleviated some of this burden, providers of kosher meals continue to feel strained.

As many as one-in-four seniors living at home are nutritionally at risk; adequate nutrition is necessary to ensure better resistance to illness and disease as well as increased mental capacity and overall health. As evidenced by the increasing rates of food insecurity among seniors and increased nutritional requirements there is an immense need for access to nutritional and culturally appropriate meals for this population both at home and in congregate settings.

**Conclusion:**

UJA-Federation of New York respectfully urges your consideration and support of these vital programs that assist our city's most vulnerable and neediest individuals and the organizations that serve them. Thank you for your time. Please contact me at [picka@ujafedny.org](mailto:picka@ujafedny.org) with any questions.



**Testimony of  
Rocky Chin  
AARP NY Executive Council**

**New York City Council  
Committee on Aging**

**Congregate and Home Delivered Meals  
February 27, 2019**

**City Hall  
New York, New York**

**Contact: Chris Widelo (212) 407-3737 | [cwidelo@aarp.org](mailto:cwidelo@aarp.org)**

Chairperson Chin and members of the Aging Committee, my name is Rocky Chin and I am a member of AARP's Executive Council. On behalf of our over 800,000 members age 50 and older in New York City, I want to thank you for the opportunity to talk about congregate and home delivered meals in NYC.

Today you will hear from many advocates and organizations that will detail the specific challenges and funding gaps that are faced by our senior centers providing congregate meals and providers of home delivered meal across the city. AARP wants to echo those concerns and the need to improve funding to ensure these critical programs can continue to meet the current and future needs of our rapidly aging city.

To that end, I would like to use our time to highlight the demographic need for why we need to do better in the area of nutrition for older adults in NYC.

Today, AARP, in partnership with the Center for an Urban Future, will release a new detailed brief about the aging of the population in cities and counties across New York State. Our analysis finds that older adults are the fastest-growing segment of the population statewide. Over the past decade, the number of New Yorkers aged 65 and over increased by 647,000, or 26 percent. During the same period, the state's overall population grew by just 3 percent. There are now more New Yorkers ages 65 and older statewide than there are children under the age of 13.

I have included a few maps at the end of the printed testimony to illustrate the aging trend in NYC for those 65+ and 85+. Additionally, this older population is much more diverse. In New York City, the older immigrant population has grown even faster, increasing 42 percent over the past decade.

Older persons face special obstacles in maintaining an optimal diet. As individuals age, their caloric needs decline, but their need for nutrients does not.



Therefore, older persons must consume foods that are nutrient-rich. Life changes such as loss of a spouse can reduce appetite, as can a diminished sense of taste or smell. Frailty can make it difficult to prepare meals, medical conditions can necessitate special dietary restrictions, and lack of income can compound all these problems by making nutritious foods hard to afford.

Our congregate and home delivered meal programs are on the front line of ensuring older adults in NYC receive a well-balanced meal every day. It is also a key component of independence and aging in place. For some, it is too often the only hot meal they will consume. Without congregate and home delivered meals, thousands of NYC residents would go hungry every day. It is crucial that the city keeps pace with the increased costs associated with providing this essential service. And, we need to make sure that that the meals we are serving are culturally appropriate.

We cannot continually ask our senior centers providing congregate meals and home delivered meal providers to do more with less. You will hear first-hand accounts today from providers about the obstacles they face every day. Increased food cost, unfunded mandates on kitchens, staffing, culturally appropriate meals and everything in between. Our meal providers deserve the support to address their current needs and be positioned for success as more New Yorkers age in place.

When it comes to nutrition, NYC has made great strides to streamline the SNAP process for low-income residents across the city who meet eligibility requirements. We should take great pride that in our public schools, students have access to nutritional meals, free of charge. And, during the summer, anyone under the age of 18 can receive free breakfast or lunch at hundreds of public schools, parks, pools, and libraries across the city. Isn't it time that New York City strives to ensure that no older adult goes without a nutritious meal? A step toward that goal is ensuring that our core programs, congregate and home

delivered meal, are positioned for success and a major part of that is adequate funding.

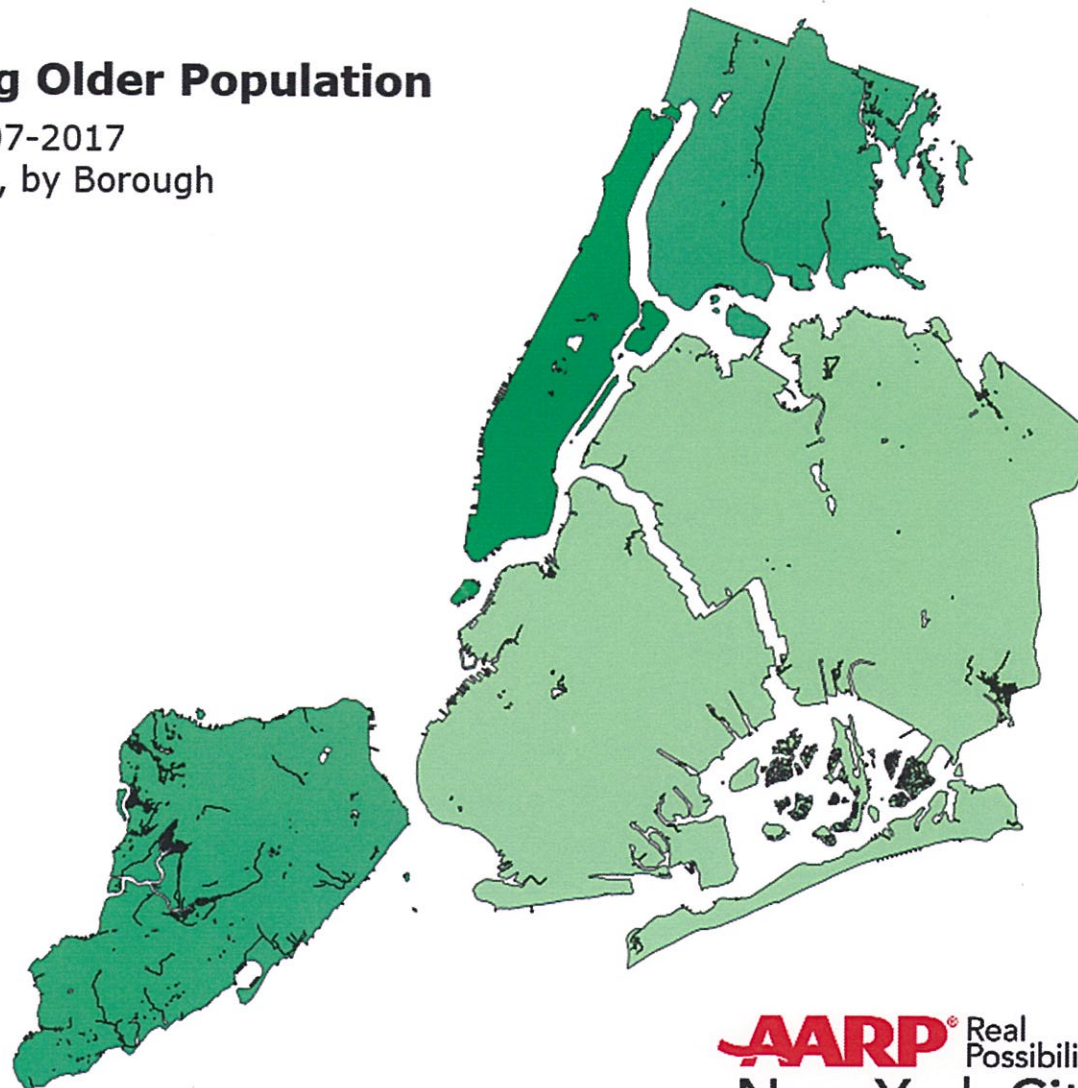
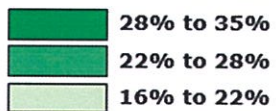
Thank you for the opportunity to testify today.

## NYC's Booming Older Population

Percent Change 2007-2017

Population Age 65+, by Borough

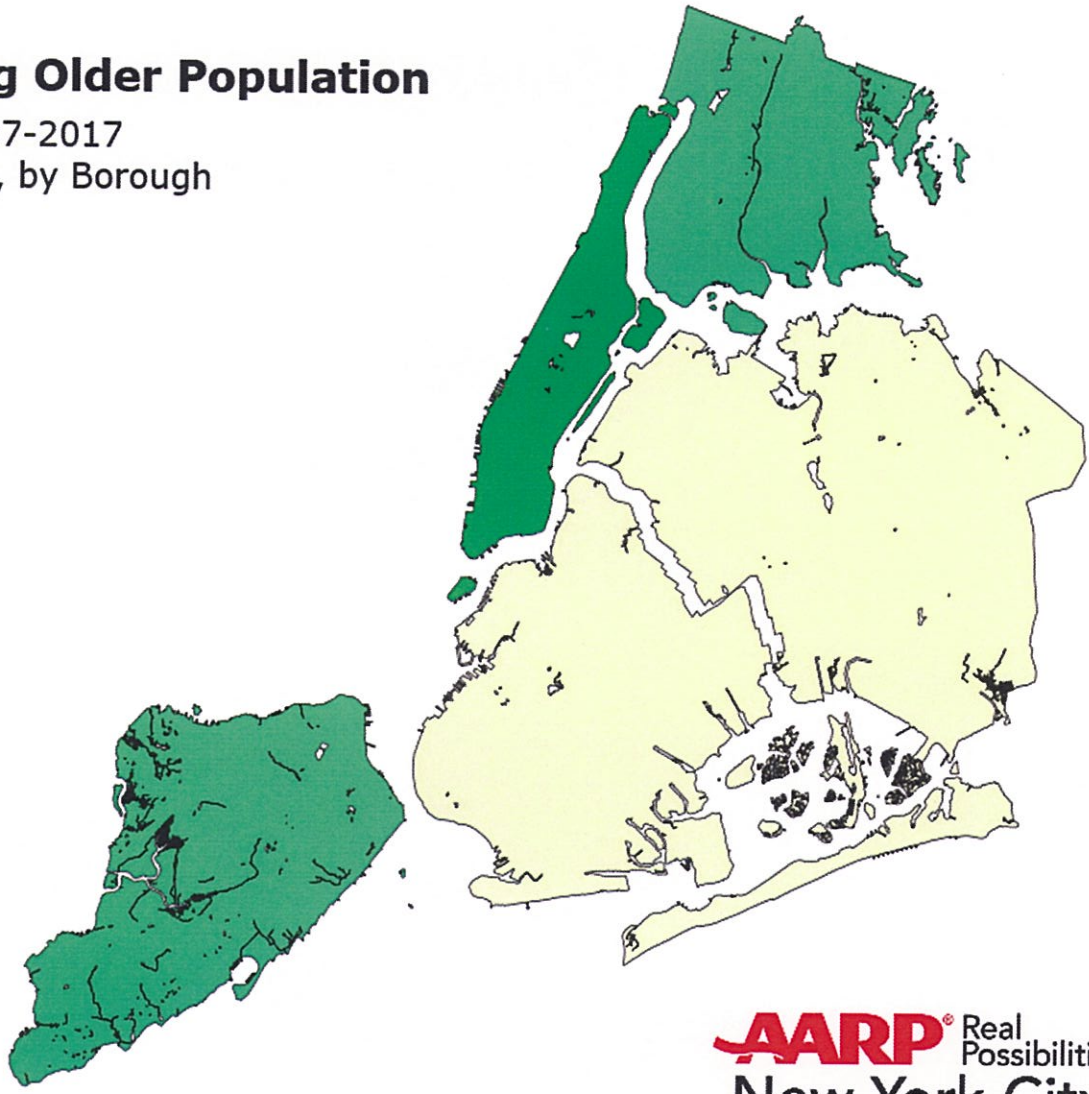
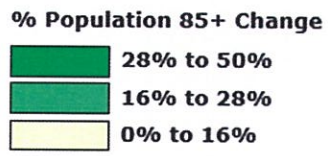
% Population 65+ Change



**AARP**® Real Possibilities  
New York City

# NYC's Booming Older Population

Percent Change 2007-2017  
Population Age 85+, by Borough



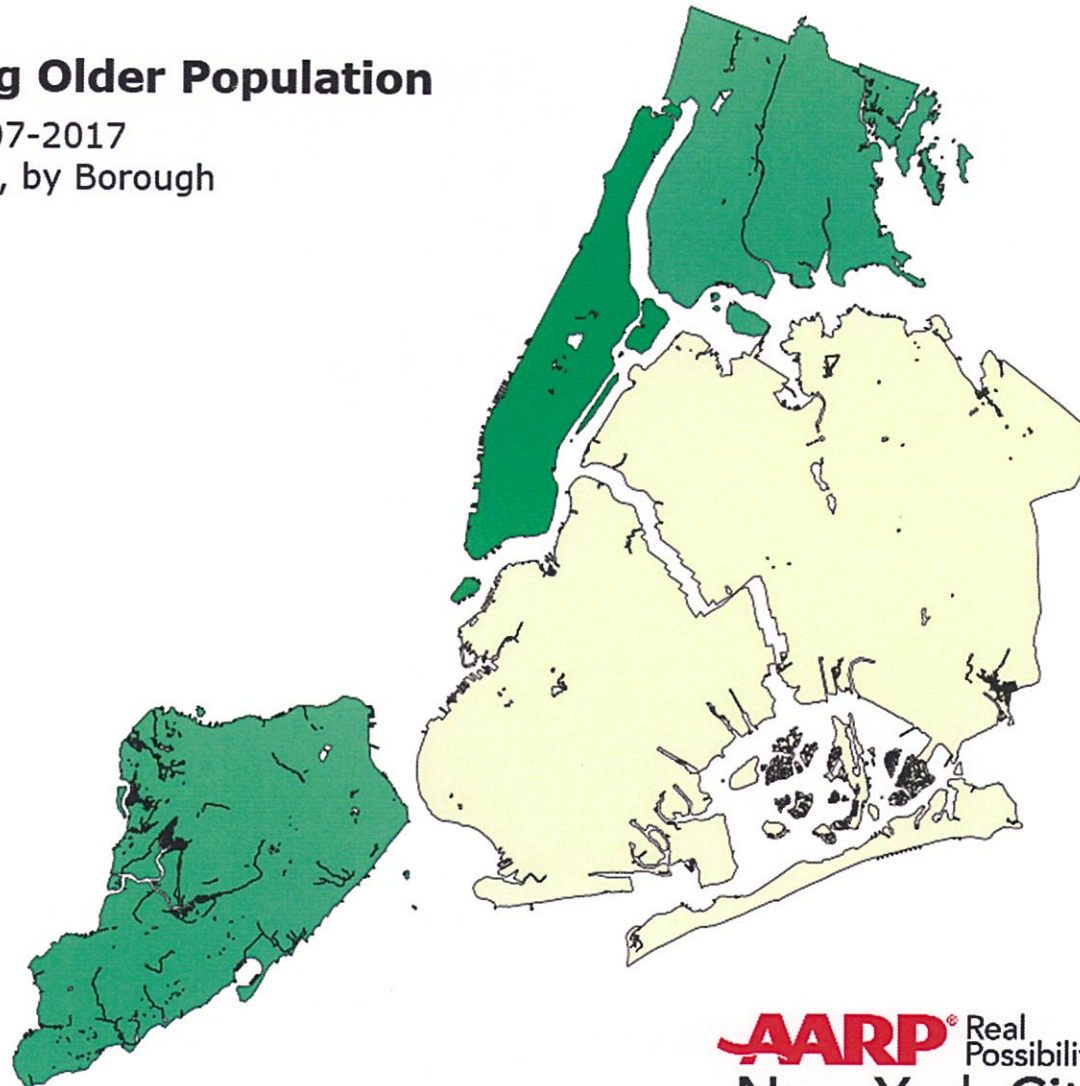
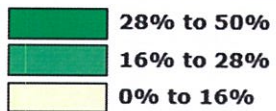
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## NYC's Booming Older Population

Percent Change 2007-2017

Population Age 85+, by Borough

% Population 85+ Change



**AARP**® Real Possibilities  
New York City



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**Testimony from Selfhelp Community Services, Inc.  
New York City Department for the Aging  
Hearing on the Model Senior Center Food Budget  
February 27, 2019**

My name is Katie Foley and I am the Director, Public Affairs at Selfhelp Community Services.

Thank you to the Aging Committee Chair Margaret Chin and the members of the committee for the opportunity to testify on the model senior center food budget at NYC senior centers.

Selfhelp was founded in 1936 to help those fleeing Nazi Germany maintain their independence and dignity as they struggled to forge new lives in America. Today, Selfhelp has grown into one of the largest and most respected not-for-profit human service agencies in the New York metropolitan area, with 26 sites throughout Manhattan, Brooklyn, Queens, the Bronx, and Nassau County. We provides a broad set of services to more than 20,000 elderly, frail, and vulnerable New Yorkers each year, while remaining the largest provider of comprehensive services to Holocaust survivors in North America. Selfhelp offers a complete network of community-based home care, social service, and senior housing programs with the overarching goal of helping clients to live with dignity and independence and avoid institutional care.

Our services are extensive and include: specialized programs for Holocaust Survivors; ten affordable senior housing complexes; four Naturally Occurring Retirement Community (NORC) programs; three intensive case management programs; five senior centers; home health care; client centered technology programs including the Virtual Senior Center; court-appointed guardianship; the Selfhelp Alzheimer's Resource Program (SHARP); and New York Connects, which provides seniors and people with disabilities with the information and support they need to remain living independently in their own homes.

Selfhelp operates five senior centers throughout Queens, including one of the City's first innovative senior centers. Together, our centers have over 10,000 members and we serve over 200,000 meals each year. We strongly believe in the role that senior centers play in providing high quality nutritious meals, engaging activities, and health and wellness programming.

We are grateful for the Council's long standing and ongoing support for senior centers and for always emphasizing the needs of older adults in policy decisions and budget allocations. In today's testimony, I will focus on our priorities on meals at Selfhelp's five New York City senior centers.

**Model Budget**

We commend the Department for the Aging (DFTA), Office of Management and Budget, and the City Council for the ongoing commitment to senior centers since the beginning of the model budget process. Funding for the City's senior centers is a critical step to stabilizing one of the core programs that supports older New Yorkers, including many immigrant seniors.

Selfhelp is requesting that the remaining \$10 million that has been committed to the model budget process be allocated this year, instead of FY21. Allocating the remaining funding will have a very positive impact on the operations of our programs, and is critical before the next RFP for senior centers to be released in calendar year 2020.

We remain concerned that other costs beyond salaries were not included in the model budget process, in particular for food, which is a significant cost for senior centers. We hope that the allocations in the subsequent years will focus on food, rent, OTPS, and other associated costs.

We know that there continues to be a need for accessible and nutritious meals for older adults in all boroughs. We serve over 200,000 meals each year at our five senior centers and request for additional funding. We request \$20 million in additional funding to increase funding for the reimbursement rate for meals (which is currently 20% below the national average), adequately fund staffing, and address the unfunded costs of running senior center kitchens so that seniors can eat nutritious, culturally competent meals. This funding is particularly important for culturally-competent meals, such as the kosher meals provided at our Austin Street Senior Center in Forest Hills. Since these meals are catered, we have less flexibility preparing the kosher meals, and rising food costs were not included in the model budget process.

Overall, we are appreciative of past investment in senior center staffing through the model budget process. The investment helped address an ongoing issue related to salary parity that had been a challenge for Selfhelp since the case management salaries were raised. We hope that additional investments in the next few years will move us toward the goal of 'right-sizing' staffing resources within all DFTA-funded programs, including NORCs. Our four NORC programs serve more than 1,300 people. It is difficult to recruit and retain highly trained staff without salary parity across all DFTA-funded programs.

### **Budgeting**

Selfhelp appreciates DFTA's partnership regarding the realities of budgeting constraints when facing unplanned expenses and repairs. Our staff budgets for planned expenses, such as rent, and staffing and food costs. However, when an unexpected cost arises, such as when equipment breaks or there is damage to the building, we often face a challenge in covering the costs in a timely manner.

Our contract with DFTA allows us to budget for standard expenses, as well as income expected to be brought in through voluntary contributions from members to cover additional expenses. In order to raise necessary funds to cover unplanned and unexpected expenses, each center conducts fundraising campaigns. When a senior center faces an unexpected, unbudgeted need, such as a broken refrigerator, it is often the center's responsibility to pay for the repairs out of accruals or fundraising. However, some

of the budget line items are restricted in use and some accruals are not fungible. This rigidity makes it a challenge to fund the most pressing needs when they arise.

As such, we support the creation and expansion of a fund to be allocated by DFTA to assist senior centers with small capital repairs and upgrades, including new ovens and repairs to ventilation and air conditioning systems. This fund would allow senior centers the flexibility they need to make unplanned small repairs and upgrades throughout as needed and with appropriate oversight by DFTA.

### Conclusion

Thank you for the opportunity to testify today. On behalf of the 20,000 clients we serve, I am grateful for the Council's support on so many important programs.





**Testimony of Stanley M. Isaacs Neighborhood Center  
Gregory J. Morris, Executive Director  
Oversight Hearing - Senior Center Model Food Budget  
February 27, 2019**

I'd like to thank Chair Margaret Chin for her leadership and the opportunity to provide testimony. I'm Gregory J. Morris, President and Executive Director of the Stanley M. Isaacs Neighborhood Center, a multi-service non-profit organization embedded within two public housing developments in upper Manhattan.

Isaacs Center provides access to critical programs and social services to residents and community members year-round, through our Senior Center, Naturally Occurring Retirement Community (NORC), and Meals on Wheels program, operating at the Isaacs/Holmes New York City Housing Authority developments in upper Manhattan. As a provider of services to older adults for nearly 60 years, we have a unique understanding of the growing challenges and changing needs of this population, and recognize that older adults living in public housing experience these challenges much more acutely. Those we serve are more vulnerable to falls/accidents, experience ongoing food and financial insecurity, and suffer from higher rates of chronic illnesses.

It is widely known that senior centers and community based organizations embedded within NYCHA developments, like Isaacs Center, are funded approximately at 80 cents for every dollar spent, through their human services contracts. Organizations like ours are routinely forced to make difficult decisions between waiting for government to make necessary investments that directly impact our ability to provide safety net services to our constituency, and allocating dollars from other areas of the organization where we can, thereby negatively impacting our overall fiscal health and sustainability.

**While the infusion of \$10 million in Model Budget funding into the aging services sector is a promising first step, it does not nearly achieve the Administration's stated purpose of funds – to “right-size” the operational budgets of senior centers/programs across the City. Notably, the Isaacs Center's portion of that \$10 million was approximately \$36,000 for the first fiscal year of the model budget implementation.**

As noted in the Council's Finance Division FY '19 Preliminary Budget briefing paper<sup>1</sup>, “...*The Fiscal 2018 Adopted Budget included \$10 million to help senior centers better cover costs and begin to standardize funding to ensure adequate and equitable staffing and programming across all providers. The \$10 million was viewed as an important first step towards the achieving these important goals, and OMB has expressed that right-sizing is best viewed as a three-year, phased-in project that by full implementation in Fiscal 2021 will rise to a total baselined investment of \$20 million...*”

We appreciate the Administration's efforts to now infuse additional funding for food costs that were originally not included, but believe that a projected total baselined investment of \$20 million will barely scratch the surface of need throughout the sector. Additionally, given the Department for the Aging's (DFTA) intention to issue RFPs in the upcoming year for senior centers and home delivered meals contracts, it is imperative that their content aligns with the stated purpose of model budget funding – to “right-size” the system.

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<sup>1</sup> <https://council.nyc.gov/budget/wp-content/uploads/sites/54/2018/03/FY19-Department-for-the-Aging.pdf>

Isaacs Center is a pioneer for the City's Meals on Wheels (MOW) program that provides nutritious meals to over 1,000 homebound seniors every day - many of whom reside in public housing - and is an essential component of assuring food security and health for our most vulnerable. Costs for these programs do not simply include the preparation of the meal itself. MOW programs rely on drivers and deliverers, who are rarely compensated at higher than minimum wage to serve as a lifeline for our homebound elderly. Additional costs include food storage and equipment, as well as trainings and personnel to conduct recruitment and outreach, ensuring that programs are not underutilized by eligible older adults. It is significant to note that the Model Food Budget process did not address several key costs including salaries of kitchen staff, rising food prices, and additional expenses for therapeutic meals aligned with individual medical needs of older adults.

**To that end, we offer two key recommendations in this budget cycle.**

- 1. Hold the Administration accountable for staying true to the designated purpose of funds. If the intent of model budget funding is to "right-size" the system, \$20 million is simply not enough to cover the meal and social service costs across the sector, in support of high quality services to older adults. Engage and partner with nonprofit leaders to undergo a citywide analysis to determine the true cost of providing meals, as well as comprehensive case management and programming, with the intention of using the analysis to fully fund these services in the FY '20 Adopted Budget for DFTA.**
- 2. Require DFTA to design their upcoming Home Delivered Meals and Senior Center RFPs such that they both include additional points for those organizations which have significant community experience in the delivery of service to older adults and to those who partner strategically with others to create cost efficiencies in the system.**

We look forward to working with Members of the Committee on Aging, as well as leadership at DFTA, to ensure that the sector's ability to provide quality meals and case management services for our City's most vulnerable are not compromised in this upcoming fiscal year and beyond. Thank you for the opportunity to provide testimony for the record.



**Testimony of Kings County District Attorney Eric Gonzalez**

**Regarding “Marijuana Legalization: Equity and Justice for NYC”**

**Submitted to the New York City Council Committees on Public Safety, Justice System,  
Civil and Human Rights, and Consumer Affairs and Business Licensing**

**February 27, 2019**

Thank you for the opportunity to submit testimony regarding the critically important issue of “Marijuana Legalization: Equity and Justice for NYC.” The Kings County District Attorney’s Office is committed to righting the injustices created by decades of discriminatory enforcement of marijuana laws.

As this City Council knows, marijuana enforcement disproportionately affects communities of color in New York City, as it does throughout the country, even though rates of marijuana usage are similar among Black, Hispanic, and white individuals. Arrests and convictions for even low-level marijuana offenses create harmful collateral consequences, impairing an individual’s ability to gain or maintain employment, schooling, housing and other public assistance, and immigration status. These consequences are particularly draconian at a time when the federal government has exacted cruel policies against immigrants.

Marijuana enforcement becomes even more indefensible when one considers that they have resulted in little—if any—demonstrable benefit to public safety, while imposing great costs

to the government. My Office estimates that each misdemeanor marijuana case we process costs approximately \$2,000. Given the need to focus our scarce resource on crimes that harm public safety, this is an unsupportable expenditure.

This is why my Office has implemented policies of declining to prosecute low-level marijuana offenses and expunging past criminal convictions. In July 2014, the late Kings County District Attorney Kenneth Thompson announced that, under most circumstances, this Office will decline to prosecute the vast majority of marijuana possession cases. In DA Thompson's memo to his staff, he stated that the goal of the policy was to ensure that:

(1) the limited resources of this Office are allocated in a manner that most enhances public safety; and (2) individuals, especially young people of color, do not become unfairly burdened and stigmatized by involvement in the criminal justice system for engaging in non-violent conduct that poses no threat of harm to persons or property.

My Office remains wholly committed to these principles, and in May 2018, I expanded this policy to include declining to prosecute cases involving smoking in public. We continue to prosecute cases where the individual poses a threat to public safety or creates a genuine nuisance to the community, such as smoking marijuana in a moving vehicle or in a place and manner that exposes children to marijuana smoke. Since this policy change, the number of marijuana possession cases we prosecuted declined from 349 in January 2018 to five in October – a drop of 98.5 percent.

Furthermore, in an effort to correct the policies of the past, my Office launched our Marijuana Expungement Initiative, the first program of its kind in New York State, to erase past convictions and vacate outstanding warrants for misdemeanor marijuana possession offenses in Brooklyn. The program, in partnership with the Legal Aid Society, Brooklyn Defender Services, Brooklyn Law School, and the Center on the Administration of Criminal Law at New York

University School of Law, allowed participants to meet with a defense lawyer at no cost and file a motion to erase their low-level marijuana convictions or to vacate an outstanding bench warrant. My Office consented to motions after review and asked a judge to vacate the past convictions. The program led to the expungement of 28 convictions, and the clearing of 1,422 misdemeanor warrants and 3,146 summonses warrants.

The racial disparities that exist in marijuana enforcement, and the harm that such enforcement has brought to communities of color, is also why I support not just decriminalization, but also the legalization of recreational marijuana for adults over 21 years old in New York State. I am pleased that Governor Cuomo and state lawmakers are considering such legislation. However, the creation of an entirely new market will have significant impacts—both positive and negative—on the communities we serve, and therefore, marijuana legislation must be carefully debated and drafted with meaningful input from all stakeholders, including law enforcement.

If recreational marijuana does indeed become legalized in New York, it is critical that the legislation includes corrective measures, such as expungement of past convictions for marijuana offenses and social equity programs that promote racial, ethnic, and gender diversity when issuing licenses. The state must ensure that communities disproportionately harmed in the past by unjust enforcement can participate in and benefit from the newly legalized market.

I also urge lawmakers to impose civil rather than criminal penalties in most cases involving smoking in public places. Most jurisdictions that have legalized recreational marijuana impose civil fines for public consumption, with the exception of Colorado, Nevada, and Washington D.C., which impose criminal fines. None of these states arrest individuals for public consumption. I believe that criminal penalties should be imposed for public consumption only

where danger to public safety is demonstrated, such as smoking in a moving vehicle and in places with young children (*e.g.*, inside daycare centers and schools). In these more serious cases, my Office would encourage diversion so that the individual is not saddled with a criminal record.

Data shows that while the overall number of citations and arrests for marijuana offenses have steeply declined in states that have legalized recreational marijuana, racial disparities continue to exist in the number of citations issued for public consumption, as well as arrests for unlawful sale and possession in large quantities. So that we can better understand and prevent discriminatory enforcement, my Office will collect statistics regarding our continuing prosecutions for marijuana offenses, and I urge the city and state to mandate the same for all enforcement and regulatory agencies.

Finally, I urge the state to earmark specific tax revenue towards scientific research regarding driving under the influence of marijuana. The lack of research in this area has created much confusion and debate nationwide about whether the legalization of marijuana has increased dangerous driving. As with alcohol, we must strive to better understand the correlation between marijuana impairment and driving ability so that we can make informed decisions on how to best protect our roadways.

I thank you again for the opportunity to submit this testimony.



2095 Broadway, Suite 409, New York, NY 10023 • Phone: 212-874-6633 • [www.pssusa.org](http://www.pssusa.org)

### **NYC City Council Testimony – 2.27.2019**

Established in 1962, PSS is a multiservice nonprofit that has built the capacity of older adults, their families and communities to thrive. PSS operates 9 senior centers, 2 senior residences (including the Grandparent Family Apartments), the Circle of Care program helping families care for someone with dementia or advanced age. Of the 9 PSS senior centers throughout the Bronx and Upper Manhattan, 6 are located in NYCHA Centers.

### **Needs/issues**

Additional funding for Senior Center meals budgets is imperative. These budgets have not been adjusted in more than five years. Increases in costs of living, minimum wage, gas, etc. have caused supplies and food prices to increase and has left Senior Centers in the position of doing more with less yet expectations and competition from other senior programs has made the environment stricter and more competitive. The inability to provide competitive salaries to some of the hardest working individuals of these programs also leaves Senior Centers with a very difficult task of finding interested staff who will work for a low wage. At the same time, they must meet all the expectations which include, a need to be literate in nutrition guidelines, measurements/serving sizes, inventory and other paperwork on top of the ability to be able to cook for large groups of people and have a personality for customer service.

It is also not just Cooks who suffer in this funding gap. Most centers cannot afford proper help either which means one person is relied on to prep, cook and clean after sometimes 100 people for one meal alone. If an assistant does exist, the hours are also minimal, and it is a struggle to meet the minimum wage requirement which makes finding a qualified and reliable person a challenge. Besides this, Custodians are also included in this budget although their work goes far beyond the kitchen. There may be many people who can clean a floor but finding someone who takes pride in their work and enjoys working with older adults who is also reliable means needing to pay competitively.

We are asking that the model budget funding designated to the food budget portion be provided to Senior Centers ASAP and will accommodate the need for higher salaries for qualified staff and more staff in these areas.

We thank the Council for your time and attention to this matter and ongoing support of PSS and our clients.

For more information, contact:

Anya Herasme, Senior Director of Older Adult Services  
917-734-4661 or [aherasme@pssusa.org](mailto:aherasme@pssusa.org)

**Visit [www.pssusa.org](http://www.pssusa.org) for more information**



PRESBYTERIAN SENIOR SERVICES

TESTIMONY ON FEBRUARY 27, 2019 TO AGING SERVICES COMMITTEE OF NEW YORK CITY COUNCIL AT 250 BROADWAY, NEW YORK, NEW YORK

BY THEODORA ZIONGAS, M.A., ASSISTANT EXECUTIVE DIRECTOR FOR OLDER ADULTS AND COMMUNITY SERVICES, HAMILTON MADISON HOUSE

Good morning,

My name is Theodora Ziongas and I am the Assistant Executive Director for Older Adults and Community Services at Hamilton Madison House. HMH was established in 1898 as a voluntary, nonprofit settlement house dedicated to improving the quality of life of the Two Bridges/Chinatown community of Manhattan's Lower East Side. The neighborhood is a federally designated poverty area with a constantly changing mixture of ethnic groups and a lack of adequate services and resources. The House speaks the many languages of the community and serves more than 8,000 children and adults annually.

We want to thank the NY City Council for their continuing support of senior programs and the Chair of the Aging Committee, Honorable Margaret Chin for being such a strong advocate for older adults. I remember the year of the senior and how great strides were achieved to increase funding for seniors and caregivers in NYC, but we still face many challenges.

Services provided to the seniors aged 60 and over in the community served by Hamilton Madison House comprise a large part of our program offerings. In addition to the Smith and Knickerbocker NORC programs, we operate the large Senior Center at 100 Gold Street as well as 3 satellite senior center sites. The meals provided at our senior centers are critical to the health and well-being the seniors in our community. We are consistently oversubscribed for both the breakfast and lunch services, creating many challenges for us as we struggle to meet the growing needs of our community. Over the past five years, we have provided a total of 620,633 meals, approximately 30,000 above what we had projected (average of 5% additional meals annually). Health is wealth and our goal is to provide the support allowing our seniors to remain as active and engaged in their communities for as long as possible, with as much dignity as



possible. We are facing increasing challenges in achieving our goals as prices for nutritious food increase and the number of seniors seeking our services increases. The cost of raw food has risen in the past few years yet the allocation has not. The cost of paper goods instead of Styrofoam is another added expense. Although we offer many health promotion activities, education/recreation and other casework and health management services, the meals are the important glue that binds all of this together. As seniors come to our centers for our nutritious meals, they will remain for our exercise programs, they socialize and create new friendships, decrease their emotional isolation and maintain important connections to the community. They will turn to us if they have additional needs as well since we become a trusted local resource.

We cannot continue to provide the level of service we do without additional funding in the years ahead. Not only are the prices for nutritious food increasing, we are serving more individuals each year. Continuity is also vital as we struggle to maintain committed kitchen and custodial staff at our centers. Additional funding for cost of living increases is also essential in allowing us to do so. In our case, meeting the needs of our diverse population also requires hiring bilingual staff which often is a challenge and additional funding is vital to helping us maintain this dedicated staff.

Thank you very much for this opportunity to testify. I am also accompanied today by 13 seniors from our various senior centers and two of these, Mr. Ma and Mr. Lu would like to testify as well.

Contact Information:

Theodora Ziongas, M.A.

Assistant Executive Director for Older Adults and Community Services

Hamilton Madison House

50 Madison Street

New York, NY 10038

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**New York City Council FY 2020 Preliminary Budget Hearing**

**March 12, 2019**

**New York City Council Committee on Aging**

**Honorable Margaret Chin, Chair**

**Testimony of Korean Community Services of Metropolitan New York, Inc.**

The ethnic Home-Delivered Meal Program is an important lifeline of nutrition for home bound immigrant seniors and is a crucial service because healthy meals are a vital component in improving mental and physical health among older adults. Hunger and malnutrition are major contributors to the decline in geriatric resistance to disease or recovery from illnesses as seniors age; such contributors may also cause unexpected immobility. The Meal Program at Korean Community Services of Metropolitan New York (KCS) focuses on under-served homebound seniors and adults in-need who do not have immediate family or caretakers to provide them with balanced and nutritious meals. Homebound Asian American immigrant clients are particularly isolated due to the lack of caregivers, existing language barriers, cultural differences, and lack of social contact. These at-risk seniors also have additional special needs and no one to tend to them. The Home-Delivered Meal Program (HDML) allows us to provide balanced and nutritious food to the elderly community members so that they can remain in their own homes and not be forced to move into an institution. Under the current system in place since 2009, our existing HDML program provides social contact as well as essential nutrition. Our dedicated program staff, delivery crew and volunteers visit homes not only to deliver meals, but also to provide daily social interaction, which in-turn helps the isolated, monolingual homebound community members to interact with others, all the while receiving balanced meals.

However, our unique HDML program faces the daily challenge of delivery due to the increasing number of meals, frequent change of delivery schedule, unexpected weather, traffic, etc., as well as struggling with rising raw food costs, increased hourly wages, high maintenance costs of special hotshot vehicles, low reimbursement rates as a subcontractor, and a low collection rate of the \$1.25 contribution. These deficits increase rapidly especially when it comes to special ethnic food due to ethnic ingredients.

The current reimbursement rate of Korean and Chinese home-delivered meals as a subcontractor ranges from \$5.42 to \$6.45, which is far below the average reimbursement rates of Nation, DFTA and UNH Network Agencies, which are \$11.06, \$8.42 and \$8.12 respectively, according to UNH data. In FY 2018, our cost per home-delivered meal was \$8.78 with \$1.08 as deficit per home-delivered meal to KCS. For FY 2019, a \$61,500 deficit is already estimated for average 200 ethnic home-bound meals delivered every day.

KCS has made efforts to fill the increasing financial gap by applying for foundational grants and institutional fundraising. We hope DFTA can reflect the rise in cost of providing **special ethnic meals**, which cost more than a regular meal, regardless of the provider's status as a subcontractor or a contractor. An increase of \$1.08 per meal only covers the bare minimum meal cost excluding any possibility of a raise in compensation for our hard-working kitchen staff and delivery crew. This

<p><b>KCS Main Office</b> Adult Daycare   Afterschool   Immigration   ESOL   203-05 32<sup>nd</sup> Avenue Bayside, NY 11361 Tel: (718) 939-6137 Fax: (718) 886-6126</p>	<p><b>Corona Senior Center</b> Korean Mutual Aid Society 37-06 111<sup>th</sup> Street Corona, NY 11368 Tel: (718) 651-9220 Fax: (718) 478-6055</p>	<p><b>Flushing Senior Center</b> 42-15 166<sup>th</sup> Street Flushing, NY 11358 Tel: (718) 886-8203 Fax: (718) 886-8205</p>	<p><b>Public Health and Research Center   Workforce Development</b> 2 W 32<sup>nd</sup> Street, Ste. 604 New York, NY 10001 Tel: (212) 463-9685 Fax: (212) 463-8347</p>	<p><b>Brooklyn Project</b> 8710 5<sup>th</sup> Ave. 1FL Bay Ridge, NY 11209 Tel: (718) 630-0001 Fax: (718) 630-0002</p>	<p><b>Mental Health Clinic</b> 42-16 162<sup>nd</sup> Street, 2FL Flushing, NY 11358 Tel: (718) 366-9540 Fax: (718) 534-4149</p>
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**KCS**  
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increase will only go toward reducing the financial gap due to extremely low reimbursement rate among subcontractors and the increased costs associated with serving culturally appropriate special ethnic food.

Thank you for the testimonial opportunity and your time.

Sincerely,

Helen Ahn, Director of KCS Senior Centers

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| Immigration | ESOL |  
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**Corona Senior Center**  
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Appearance Card

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Date: \_\_\_\_\_

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Name: LUI, YOK TIM

Address: 47 DELANCEY STREET

I represent: Madison Hamilton Senior Center

Address: Madison Street

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Name: THEODORA ZIOPEAS

Address: \_\_\_\_\_

I represent: Hamilton Madison Home

Address: 50 Madison St.

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Name: Edward Ma

Address: 333 Pearl St. #10H

I represent: City Hall Sr. Center - Hamilton Madison

Address: 100 Gold St, NY 10038 Haus

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Name: TARA KLEIN

Address: \_\_\_\_\_

I represent: UNITED NEIGHBORHOOD HOUSES

Address: \_\_\_\_\_

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Name: BRENDA GARDNER

Address: 168 GRAND STREET ST 16A

I represent: CAC OPEN DOOR SENIOR CENTER

Address: SAME AS ABOVE

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Name: BRENDA GARDNER

Address: 309 W. 57th St. NYC, NY 10019

I represent: AARP & MYSELF

Address: \_\_\_\_\_

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in favor  in opposition

Date: 2-27-19

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Name: Michael Boshack

Address: Deputy Commissioner, Planning & Technology

I represent: DFA

Address: \_\_\_\_\_

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in favor  in opposition

Date: 2.27.19

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Name: Caryn Resnick

Address: Acting Commissioner

I represent: BFTA

Address: \_\_\_\_\_

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in favor  in opposition

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(PLEASE PRINT)

Name: Andrea Cianfrani

Address: LIVE ON NY

I represent: \_\_\_\_\_

Address: \_\_\_\_\_

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in favor  in opposition

Date: \_\_\_\_\_

(PLEASE PRINT)

Name: ABIGAIL PICK

Address: 130 EAST 59 ST.

I represent: UGA FEDERATION NY

Address: \_\_\_\_\_

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in favor  in opposition

Date: \_\_\_\_\_

(PLEASE PRINT)

Name: Molly Krakowski

Address: \_\_\_\_\_

I represent: JASA

Address: \_\_\_\_\_

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in favor  in opposition

Date: \_\_\_\_\_

(PLEASE PRINT)

Name: Ricky CHAN

Address: 175 Montgomery St 16 A

I represent: AARP

Address: \_\_\_\_\_

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