

CITY COUNCIL  
CITY OF NEW YORK

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TRANSCRIPT OF THE MINUTES

Of the

COMMITTEE ON AGING

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March 23, 2022  
Start: 2:37 p.m.  
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HELD AT: REMOTE HEARING - VIRTUAL ROOM 3

B E F O R E: Crystal Hudson, Chairperson

COUNCIL MEMBERS:

Eric Dinowitz  
Linda Lee  
Christopher Marte  
Darlene Mealy  
Kristin Richardson Jordan  
Lynn C. Schulman  
Tiffany Caban

A P P E A R A N C E S

Lorraine Cortes-Vazquez, DFTA Commissioner  
Jose Mercado, DFTA Chief Financial Officer  
Dorothy Jiang  
Farhana Hussain  
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Helen Ahn  
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James O'Neal  
Jeanette Estima  
Tara Klein  
Brianna Paden-Williams  
Judith Castillo  
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Lauren Wade  
Peter Kempner  
Shanta Lawson  
Stuart Sherman  
Aaron Rooney  
Wendell Walters  
Peter Chang  
MJ Okma  
Sherrise Palomino

2 SERGEANT LUGO: PC recording good.

3 SERGEANT POLITE: Recording to the cloud  
4 all set.

5 SERGEANT LUGO: Thank you. Good afternoon,  
6 everyone. Welcome to today's remote New York City  
7 Council fiscal 2023 preliminary budget hearing of the  
8 Committee on Aging.

9 At this time, would all panelists please  
10 turn on your videos?

11 To minimize disruption, please place  
12 electronic devices to vibrate or silent.

13 If you wish to submit testimony, you may  
14 send it to [testimony@council.nyc.gov](mailto:testimony@council.nyc.gov). Again, that's  
15 [testimony@council.nyc.gov](mailto:testimony@council.nyc.gov).

16 Thank you for your cooperation. Chair  
17 Hudson, we are ready to begin.

18 CHAIRPERSON HUDSON: [GAVEL] Good  
19 afternoon. My name is Crystal Hudson, and I serve as  
20 Chair of the Committee on Aging. Welcome to the  
21 Committee's hearing on the fiscal 2023 preliminary  
22 budget for the Department of the Aging, of DFTA, and  
23 the 2022 preliminary Mayor's Management Report, or  
24 PMMR. Thank you to Commissioner Cortes-Vazquez for  
25 joining us.

2           Following testimony and questions with  
3 DFTA, we will testimony from the public at  
4 approximately 3:30 p.m.

5           Thank you to those older adult advocates  
6 who have joined us today. I'll keep my comments here  
7 brief and request that the Commissioner keep her oral  
8 testimony to about 10 minutes so we can move on to  
9 questions from Council Members and the public.

10           Older adults and the older adult service  
11 network have faced unprecedented challenges in the  
12 past 2 years due to COVID-19. As the pandemic ebbs, I  
13 look forward to working collaboratively with  
14 providers and the administration to help New York's  
15 1.7 million older adults make a strong recovery from  
16 this difficult period. DFTA has a critical role to  
17 play in assessing and meeting the needs of older  
18 adults and collaborating with the service network and  
19 the Council to harness best practices and scale  
20 innovative approaches.

21           DFTA's fiscal 2023 preliminary budget is  
22 almost 460 million dollars, down 105 million dollars  
23 from the fiscal 2022 current budget. After a short  
24 period where the Department's budget finally exceeded  
25 1/2 of 1 percent of the city's overall budget, it's

2 fiscal 2023 total falls again below that threshold.  
3 The 53 million dollar Recovery Meals programs which  
4 provides home-delivered meals to older adults  
5 previously served by the citywide Get Food program is  
6 set to expire this year. We heard earlier this month  
7 that perhaps 3,000 older adults may require these  
8 meals in fiscal 2023, and I look forward to hearing  
9 updates on these figures and how the budget will  
10 change to accommodate those in need.

11           The budget also lacks over 43 million in  
12 one-time Council discretionary funding for senior  
13 services ranging from elder abuse prevention programs  
14 to support for diverse populations from Holocaust  
15 survivors to immigrants to LGBTQ older adults across  
16 all 5 boroughs.

17           While DFTA should be commended for making  
18 good on the prior administration's commitment to  
19 raise the home-delivered meal reimbursement rate with  
20 a baseline 9.4 million dollars. This is the only new  
21 need in the preliminary budget.

22           DFTA sustains a 2.6 percent cut or PEG  
23 driven by the removal of 12 vacant position, a swap  
24 of city funds for federal revenues, and a slowed  
25 rollout of the Geriatric Mental Health program. These

2 are concerning cuts at a time when DFTA surely needs  
3 greater resources to conduct its work in the recovery  
4 from COVID-19.

5           Unfortunately, the inability of Older  
6 Adult Centers, or OACs, to accommodate more than 25  
7 percent capacity has made their reopening a more  
8 protracted affair. Data trends in the PMMR confirm  
9 this view and suggests that the Department has a long  
10 way to go to restore its pre-pandemic service levels  
11 across nearly all its core programs such as older  
12 adult participation at centers and home care and case  
13 management.

14           That said, there's an important  
15 opportunity to reach additional older adults thanks  
16 to the new 3-year contracts for both OACs and  
17 Naturally Occurring Retirement Communities, or NORCs.  
18 These contracts while long-time coming expand the  
19 service network by a combined 31 sites.

20           I look forward to hearing how  
21 enhancements the Council fiercely advocated for last  
22 year including opening new sites, baselining  
23 immigrant serving centers, adding funds for marketing  
24 and outreach, and expanding technology and mental  
25

2 health services are being advanced by the Department  
3 today.

4 DFTA's capital commitment plan, the  
5 smallest in the city, totals 49 million dollars over  
6 5 years. The Council funds half of these projects.  
7 With 308 total OACs and NORCs now in the network,  
8 this funding seems too small to properly address all  
9 needs. I believe the capital program should be  
10 enhanced to help refurbish centers and connect older  
11 adults to much-needed technology.

12 The needs of older adults cross beyond  
13 the doors of DFTA's programs into the world of  
14 cultural institutions, housing, employment,  
15 transportation, and more. We don't have time to waste  
16 in enriching these connections and placing greater  
17 opportunities in front of our city's older adults.

18 I'd like to thank the Committee staff  
19 who've helped prepare this hearing, Daniel Kroop,  
20 Senior Financial Analyst; Dohini Sompura, Assistant  
21 Director; Crystal Pond, Assistant Deputy Director;  
22 Christopher Pepe, Counsel; Vera Mjeku, Policy  
23 Analyst; and my Chief of Staff Casie Addison, and  
24 Director of Policy and Budget Initiatives Andrew  
25 Wright.

2 I'd like to acknowledge that we're joined  
3 here today by Council Members Marte, Lee, Schulman,  
4 Dinowitz, Richardson Jordan, and Mealy.

5 CRYSTAL POND, MODERATOR: Thank you,  
6 Chair. My name is Crystal Pond, and I am Assistant  
7 Deputy Director to Human Services Division which  
8 oversees the Aging Committee.

9 Before we begin, I want to remind  
10 everyone that you will be on mute until you are  
11 recognized to speak at which time you will be unmuted  
12 by the Zoom host. If you mute yourself after you have  
13 been unmuted, you will need to be unmuted again by  
14 the host. Please be aware that there could be a delay  
15 in muting and unmuting so please be patient.

16 During the hearing, if Council Members  
17 would like to ask questions, please use the Zoom  
18 raise hand function, and you will be called on to  
19 speak. We will be limiting Council Member questions  
20 to 5 minutes including responses.

21 Before we begin testimony, I will  
22 administer the oath to all members of the  
23 administration who will be offering testimony or will  
24 be available for questions. I will read the oath and  
25 call on each of you individually for a response. Do



2 you affirm to tell the truth, the whole truth, and  
3 nothing but the truth before this Committee and to  
4 respond honestly to Council Member questions?

5 Lorraine Cortes-Vazquez, Commissioner for the  
6 Department for the Aging.

7 LORRAINE CORTES-VAZQUEZ: I do.

8 CRYSTAL POND, MODERATOR: Thank you. Jose  
9 Mercado, Chief Financial Officer for DFTA.

10 JOSE MERCADO: I do.

11 CRYSTAL POND, MODERATOR: Thank you.

12 Commissioner Cortes-Vazquez, you may begin when  
13 ready.

14 LORRAINE CORTES-VAZQUEZ: Thank you very  
15 much. Good afternoon, Chair Hudson, Chair Brennan,  
16 and the Members of the Aging and the Finance  
17 Committees.

18 I'm joined this morning as you just met,  
19 Jose Mercado, our Chief Financial Officer. As  
20 Commissioner for the Department for the Aging, I  
21 thank you for this opportunity to discuss DFTA's  
22 preliminary budget for fiscal year '23. In addition  
23 to working to eliminate ageism and ensure the dignity  
24 and quality of life of older New Yorkers, providing  
25 high quality services and resources are among the

2 Department's top priority. To support this work, our  
3 FY-23 preliminary budget, as you have mentioned  
4 earlier, is 459.7 million dollars in funding, of  
5 which 273 million are city tax levy funds. Of this  
6 total allocation, 229.6 million supports Older Adult  
7 Centers, 50.8 million is directed for home-delivered  
8 meals, 38 million for case management, 34.4 million  
9 to support home care services for older adults who  
10 are in need of care to remain in their home and in  
11 their community. These individuals are not Medicaid  
12 eligible. 15 million for NORCs, which are Naturally  
13 Occurring Retirement Communities and their  
14 (INAUDIBLE), 8.1 million for caregiver services that  
15 support family or individuals who care for an older  
16 adult to ensure that they can remain in-home and in  
17 their community.

18 Through the support and advocacy of  
19 important stakeholders, we have also advanced many  
20 efforts to help New Yorkers, many who were not known  
21 to DFTA in the midst of this unprecedented pandemic.  
22 The last year challenged us to do more with our  
23 existing resources. That work that the Department has  
24 done has been a source of pride for me, the staff,  
25 and the City. This work was possible because of the

2 effective partnerships with networks of providers  
3 dedicated to serving older New Yorkers.

4           Some notable successes include during the  
5 pandemic 7.8 million wellness calls were conducted to  
6 reduce social isolation and also to provide  
7 information and links to clients on vital resources  
8 and support, meals, and mental health services. We  
9 distributed close to 20,000 tablets through the Older  
10 Adult Centers and other DFTA programs, 10,000  
11 initially for NYCHA residents and another 10,000 for  
12 older adults through our various programs. This  
13 effort ensured that older adults have the tools and  
14 skills necessary to keep abreast of the myriad of  
15 virtual programming that was developed during the  
16 pandemic and to connect with their family and  
17 friends.

18           The recent investment of 48 million  
19 dollars and the recent RFP for Older Adult Centers  
20 and NORCs, DFTA added as you well noted 31 new sites  
21 to our network, the first expansion of this size in  
22 20 years. This expansion included 178 locations  
23 within 3 neighborhoods, a key goal of the RFP. We  
24 were able to baseline 13 discretionary funded centers  
25 in the network for a total of roughly of 5.1 million

2 dollars. Those are centers that serve smaller  
3 affinity and ethnic communities, and we made a  
4 commitment to the former finance chair and the former  
5 chair of the Aging Committee that we would develop  
6 capacities within those communities.

7           We're also incredibly grateful for the  
8 ongoing support of the City Council, which in FY-22  
9 awarded 46.3 million dollars in discretionary funding  
10 allowing us to make even greater investment in often  
11 underserved and unserved communities. As I mentioned,  
12 we baselined 5.1 million of these investments, and I  
13 urge you to allocate these funds as well as the 46.3  
14 million to aging service. The addition of  
15 discretionary funding will allow us to enhance and  
16 diversify educational, art, and recreational programs  
17 much needed for this growing population.

18           Our home-delivered meals program is  
19 another vital component in DFTA's network of  
20 services. Not only do home-delivered meals provide  
21 nourishment to homebound older adults across the 5  
22 boroughs, the interaction with the delivery person,  
23 which for many of our clients may be the only direct  
24 human interaction of the day, supports our ongoing  
25 efforts to combat social isolation, which was only

2 exacerbated during this pandemic. In the midst of the  
3 pandemic, the contact between the driver and the  
4 older adult was suspended for the safety of both.  
5 Meals were left at the door so to combat that social  
6 isolation during this time, we relied on services  
7 such as Friendly Voices and those wellness calls I  
8 mentioned. Home-delivered meals eligibility  
9 regulations as you may know are set by the state.  
10 Therefore, only adults who meet those criteria can  
11 receive home-delivered meals. These programs are able  
12 to address the most critical, overarching goals that  
13 DFTA has had in the last 2 years, which has been to  
14 increase meal options for recipients, increasing the  
15 availability of culturally and religiously aligned  
16 meals such as vegetarian, halal, kosher, Latin, and  
17 Pan-Asian. We also promote the provision of uniformly  
18 high-quality meals made from good food sources. In  
19 2021, over 4.3 million meals were delivered by our  
20 providers. Let it be known that through this  
21 pandemic, home-delivered meals continued without  
22 interruption. During the same time, the number of  
23 meal options expanded, and we have a seen a doubling,  
24 now 27 percent, in the number of frozen meals served.  
25 Chilled meals were also added as a choice this year,

2 and, to date, more than 102,000 have been served.  
3 Each of these options in addition to a variety of  
4 food enables the older adult to make decisions about  
5 when and how they want to eat their meals. Your  
6 support, for which we are grateful, has made an  
7 increase in reimbursement rates for home-delivered  
8 meals possible. This funding will bring reimbursement  
9 rates to \$10.68 retroactive to January 2022, and it  
10 will raise the rates to \$11.78 beginning in fiscal  
11 year 2023. This investment totaling 2.3 million  
12 dollars in FY-22 and 9.4 million dollars in FY-23.

13           As mentioned above, last year we  
14 successfully completed the RFP for Older Adult  
15 Centers and Naturally Occurring Retirement  
16 Communities and our network of providers. We are so  
17 happy with the enthusiastic response and results. The  
18 RFP embodies the goals of the Community Care Plan,  
19 all centered on keeping older New Yorkers in good  
20 physical and mental health and in a strong sense of  
21 well-being in order to live safely in their  
22 communities and homes. Several key goals were  
23 innovative programming with an emphasis on  
24 collaboration as you mentioned, Councilwoman, with  
25 other neighborhood groups and other community

2 resources such as libraries, museums, and others. The  
3 other important feature was to increase marketing and  
4 outreach to connect people to services and to try to  
5 address transportation deserts and to always to reach  
6 a diversified population of older New Yorkers and  
7 increase virtual programming to reach people unable  
8 or reluctant to travel to physical sites. We added 31  
9 new sites to the network, far exceeding the  
10 commitment of 25 new sites mentioned in the Community  
11 Care Plan. Our existing Older Center network has  
12 grown from 249 to 272, and the NORC network has  
13 increased from 28 to 36. Overall, the network has 308  
14 locations across the 5 boroughs. Within these awards,  
15 we baselined 13 discretionary funded centers to our  
16 network. These included organizations which dealt  
17 with small communities or ethnic communities such as  
18 India Home in Queens, SAGE in Harlem and the Bronx,  
19 Vision Urbana in Lower Manhattan. We are finalizing  
20 on the lease and we expect all 155 OACs and  
21 (INAUDIBLE) NORCs to be in the community district. We  
22 have 178 sites in 3 communities which was a major  
23 goal of this RFP. The goal was to expand funding to  
24 narrow inequity historical underfunding and to make  
25 sure that we have services in the 3 communities.

2           The pandemic has been a strain on all of  
3 us, our families, and our community. This has led to  
4 increased social isolation and vulnerability for all  
5 adults. In March 2020, we started wellness calls and  
6 as you know, I've just said, we've made 7,8 million o  
7 those calls, but these calls serve more than just an  
8 entry point for social isolation and a method to  
9 combat social isolation, but they also are an entry  
10 point for referral to services, to food, to friendly  
11 visiting, elder abuse programs, mental health, and  
12 other services.

13           Again, in partnership with mental health  
14 advocates, we're really appreciative of their support  
15 and the City's support and the City Council's support  
16 that we are able to expand the Department for the  
17 Aging's Geriatric Mental Health program with a focus  
18 on 3 neighborhoods most impacted by COVID-19. It is  
19 important to note that DFTA began geriatric mental  
20 health services in 2009, well in advance of any  
21 coordinated citywide efforts that focus on mental  
22 health services. The Geriatric Mental Health program  
23 supports clients who struggle with depression,  
24 anxiety, and other mental health needs. Currently,  
25 the program operates in 48 centers. With the



2 expansion, we'll be able to operate in 88 centers  
3 across the city. What we're pleased about is that we  
4 created a model called Hub and Spoke, which allows us  
5 to go into communities that might traditionally and  
6 centers that might traditionally not be eligible to  
7 serve as a geriatric mental health site according to  
8 the State Department of Mental Health. According to  
9 the last (INAUDIBLE) of the Mayor's Report on  
10 Community Health, 62 percent of older adults  
11 receiving clinical services experienced a clinical  
12 improvement in depression after 3 months, 42  
13 experienced significant improvement in anxiety after  
14 3 months of services. These are essential services  
15 with evidence that they work.

16 Another key mental health intervention  
17 program is our Friendly Visitor. It focused largely  
18 on homebound adults who are active with DFTA-  
19 contracted case management programs. The program  
20 matches older adults facing the negative effects of  
21 social isolation with well-trained and well-matched  
22 volunteers. They spend time engaging social  
23 interactions and maintain a long-term relationship.  
24 The program expands the older adults' connection to  
25 their community and helps prevent the isolation of an

2 older adult from declining into depression and  
3 loneliness. During the pandemic, we continued these  
4 services, but obviously these essential services were  
5 continued virtually or telephonically. I encourage  
6 all of you and anyone that you know to sign up as a  
7 volunteer. You can call Aging Connect at 212-244-  
8 6469.

9           In addition to the pivots made to address  
10 the pandemic itself, DFTA was a key partner with the  
11 efforts of the Vaccine Command Center among other  
12 agencies in the COVID-19 vaccine rollout. DFTA  
13 activated the provider network to contact individual  
14 older adults to distribute information about the  
15 vaccine as well as to assist and schedule their  
16 appointments including in-home vaccinations. DFTA and  
17 its provider network along with other community-based  
18 organizations who are trusted voices in the community  
19 worked together to increase awareness and mitigate  
20 misinformation via calls, emails, fliers, town halls,  
21 and meetings. In December, DFTA launched the Stop  
22 Rampage PSA campaign, a COVID vaccination PSA for  
23 older New Yorkers. Rampage is a clever opportunistic  
24 avatar who desires to prey on vulnerable older  
25 adults. The PSA's goal was to provide information and

2 to have older adults take control of their decisions  
3 by speaking to their doctors about vaccination and  
4 whether they should vaccinate and why. It was  
5 translated to Spanish and Yiddish to match those  
6 communities with high unvaccinated rates. It has been  
7 featured on television, newspaper, print and digital  
8 sites, social media, and outdoor media like bus  
9 shelters. The English and Spanish PSA are currently  
10 airing on local television. The vaccination efforts  
11 themselves have included participation of over 35  
12 older adult clubs, over 40 mobile vaccination units  
13 along with hundreds of provider partners and their  
14 staff supporting outreach to adults in New York. We  
15 also supported the NORC Vaccine (INAUDIBLE)  
16 initiative, an in-home vaccination project, and  
17 increasing vaccination within 3 neighborhoods. This  
18 effort continues as DFTA is partnering with Health  
19 and Hospital's Test and Trace division to deploy  
20 mobile vaccination and clinical sites throughout the  
21 5 boroughs.

22 I cannot reiterate enough how important  
23 our provider community and our network has been  
24 through this process, from calling older adults to  
25 scheduling appointments, disseminating information,

2 none of this work could be done without the support  
3 of our providers in the community.

4 I continue to be proud of the great work  
5 that DFTA and providers accomplished with our  
6 resources. The last 2 years have highlighted the  
7 resiliency of older adults as well as system gaps  
8 that should be strengthened in order to allow older  
9 adults to live in their communities for as long as  
10 they desire. I presented that (INAUDIBLE) services,  
11 funding needs to support the growing needs of this  
12 vastly growing and ever-changing older adult  
13 population, but what I never lose sight of is that as  
14 I make this presentation all that data represents our  
15 individual people, people who have served the city  
16 with dignity and distinction, that have helped shape  
17 and build the communities that they've lived in or  
18 that they currently live in, and continue to serve  
19 this city through their volunteer and civic service,  
20 people who never lose sight of the importance of  
21 their vote and thereby are a major part of the voting  
22 rate in this city, individuals who are our neighbors,  
23 active members of our churches, synagogues, mosques,  
24 and other religious institutions. They are our  
25 family, our mothers, our grandmothers, aunts, and

2 uncles, and as recently stated by Speaker Adams the  
3 jewels of our city. That is what this data  
4 represents.

5 I look forward to our continued  
6 partnership to explore ways to match services to meet  
7 these increasing demands. Never forget, this  
8 population is growing. By 2030, there will be more  
9 people over the age of 60 than under the age of 18.  
10 We're excited to continue to work with you to  
11 innovate services, to expand services, to respond to  
12 the changing needs of this population and our city.  
13 Together we can do this. As always, I'm grateful to  
14 the Chairs of the Committee for your advocacy, your  
15 continued support, and I welcome your questions. I  
16 made it under 10 minutes. I was talking so fast. Go  
17 ahead.

18 CHAIRPERSON HUDSON: Thank you for that.

19 LORRAINE CORTES-VAZQUEZ: You're welcome.  
20 Now can I just take a breath before you start asking  
21 me questions.

22 CHAIRPERSON HUDSON: Take a breath, drink  
23 your water, coffee, whatever you need to do.

24 LORRAINE CORTES-VAZQUEZ: I wanted to  
25 honor the 10-minute rule. Go ahead. I'm ready.

2 CHAIRPERSON HUDSON: We do very much  
3 appreciate that.

4 You good?

5 LORRAINE CORTES-VAZQUEZ: I'm fine.  
6 Perfect now. Thank you.

7 CHAIRPERSON HUDSON: Okay. So DFTA's  
8 fiscal 2023 preliminary plan includes only 1 new  
9 need, to raise the home-delivered meals rate which  
10 was a commitment of the previous administration.  
11 What's DFTA's vision for older adults as they recover  
12 from the pandemic and how is that expressed in this  
13 budget?

14 LORRAINE CORTES-VAZQUEZ: I think we  
15 mentioned this in the last budget. We have had  
16 ongoing discussions with OMB about 2 things. The  
17 growing need obviously for the home-delivered meals  
18 population, and as I think I've said before, I may  
19 have said it to you individually or to the group,  
20 naturally we have an 800 person increase annually.  
21 That was pre-pandemic. When we did a calculation  
22 early in the pandemic, we estimated that it would  
23 reach 1,500. Our current numbers are that we know  
24 that the demand of home-delivered meals will increase  
25 to about 3,000 a year. If that pace continues, that's

2 the conversation we have with OMB. They're aware that  
3 this is not one time, that this is systemic and  
4 longstanding, and we are in partnership with them to  
5 keep that discussion going, and we also know that the  
6 companion piece to home-delivered meals is case  
7 management agencies because they are the entry point.  
8 That is the trajectory moving forward. That's the  
9 magnitude. In addition to that, Councilwoman Hudson,  
10 we have worked very closely with OMB and looking at  
11 recovery meals because we see that in recovery meals,  
12 last time we spoke it was about 11,000. Every week it  
13 keeps going down. We're now under 10,000 or very  
14 close to 10,000, but we know that many of those  
15 individuals are going to find themselves needing  
16 home-delivered meals, not being food insecure. That's  
17 one issue that we're dealing with, but with the fact  
18 that they might find themselves now in need and  
19 (INAUDIBLE) and unable to provide their own daily  
20 needs.

21 CHAIRPERSON HUDSON: Thank you. The prior  
22 administration launched the 5-year Community Care  
23 Plan centered on new contracts for Older Adult  
24 Centers and Naturally Occurring Retirement  
25 Communities, OACs and NORCs as we call them, leading

2 to the creation of 31 new sites. Are all 308 sites  
3 open, and what is their current maximum capacity and  
4 when will the Council receive the profile of OACs and  
5 NORCs discussed late last year?

6 LORRAINE CORTES-VAZQUEZ: They're all  
7 registered with the exception of one. All of the  
8 contracts are fully registered with the exception of  
9 one, which has to do with the financial control board  
10 beyond our control. Everybody else has been  
11 registered through the Comptroller's office we're  
12 pleased to say. They're all ready to operate. We're  
13 hoping that they operate.

14 In terms of fully opening, as you know,  
15 there was a desire early on for all of the centers to  
16 open. We were doing really well in terms of seeing  
17 that progressive reopening growth and then Omicron  
18 came and we went right back down to a low physical  
19 plant issue and many, many centers closed. What I can  
20 say with great happiness and pride is that the work  
21 with the Department of Health has realized that they  
22 just allowed us to eliminate the 25 percent capacity  
23 mandate and now allowing us to open at 100 percent  
24 with some guidelines obviously, masking and some  
25 other recommended guidelines, many that are already



2 in place, but that may be a game-changer so as we see  
3 the city reopening and more people feeling  
4 comfortable, we believe that there will be a full  
5 reopening of the centers definitely by the summer and  
6 as the weather gets better.

7 CHAIRPERSON HUDSON: Okay. Sorry. Did I  
8 miss the current maximum capacity?

9 LORRAINE CORTES-VAZQUEZ: Jose, can you  
10 tell us what the current maximum capacity is in terms  
11 of (INAUDIBLE)?

12 JOSE MERCADO: Do you want the units or  
13 actually (INAUDIBLE) whether they're at 100 percent  
14 in terms of they can actually operate at 100 percent?

15 LORRAINE CORTES-VAZQUEZ: No, no. The  
16 units. Is that what you're asking, for service  
17 levels?

18 CHAIRPERSON HUDSON: Yes, service levels  
19 (INAUDIBLE)

20 LORRAINE CORTES-VAZQUEZ: Service levels,  
21 Jose, the real number.

22 JOSE MERCADO: Yeah, I'll get that in a  
23 minute.

24 LORRAINE CORTES-VAZQUEZ: Okay. I'll look  
25 for it also.

2 CHAIRPERSON HUDSON: Then the, well, I'll  
3 give you a second for that.

4 LORRAINE CORTES-VAZQUEZ: Yeah, we have  
5 that number. I'm just trying to look for it.

6 JOSE MERCADO: Yeah, I'll continue. I'll  
7 find it.

8 CHAIRPERSON HUDSON: No problem. While you  
9 look at that, also when can we receive the profile of  
10 the OACs and NORCs that were discussed late last  
11 year?

12 LORRAINE CORTES-VAZQUEZ: I think that  
13 that was provided, but I will make sure that you get  
14 that total list. If you remember, let me just say  
15 that when new Council Members came in right after the  
16 election, we put together all of the services of each  
17 district. We used community district maps and we  
18 overlaid them with Councilmatic and we put all of the  
19 services in a particular district. We have that for  
20 the 51 Councilmatic districts. We've given that to  
21 each one of you, but I'll make sure that you get a  
22 comprehensive list of all them. All right?

23 CHAIRPERSON HUDSON: All right.

24 JOSE MERCADO: So we have currently an  
25 average participation rate of 15,800.

2 LORRAINE CORTES-VAZQUEZ: On a daily  
3 basis.

4 JOSE MERCADO: On a daily basis, correct.

5 CHAIRPERSON HUDSON: Okay.

6 LORRAINE CORTES-VAZQUEZ: Which is a tad  
7 lower than it was pre-pandemic.

8 CHAIRPERSON HUDSON: Do you have the exact  
9 difference?

10 LORRAINE CORTES-VAZQUEZ: I can tell you,  
11 Jose can do the math, the pre-pandemic rate was  
12 anywhere between 23,000 and 25,000 depending on the  
13 season. That distinction's probably making up for the  
14 fact that for this quarter of the year, centers have  
15 been not operating fully.

16 CHAIRPERSON HUDSON: Right. Okay. Thank  
17 you. I appreciate that. How's DFTA using the 2  
18 million dollars for additional marketing and outreach  
19 funds added last year to get older adults back into  
20 centers?

21 LORRAINE CORTES-VAZQUEZ: That was a focal  
22 point of the RFP so thank you for asking that. Right  
23 now, we've been working with each one of the programs  
24 and asking them what are they doing, you know, what  
25 are some of the strategies that they're employing,

2 and Luella Miles (phonetic) who is the Assistant  
3 Commissioner for the Bureau of Community Programs and  
4 her staff have been having those conversations and  
5 what we're going to do with some of that data is pull  
6 together a work group so that we could get some of  
7 the best practices and make sure that they're  
8 employed throughout the city, but they involve all of  
9 the things, like social media, use of other community  
10 partners, use of local television ads and things of  
11 that nature.

12 CHAIRPERSON HUDSON: Okay, and just going  
13 back to the average participation rate, do you expect  
14 that number, the 15,800, to change by the end of this  
15 fiscal year?

16 LORRAINE CORTES-VAZQUEZ: I think that  
17 we'll see that change start being reflected in the  
18 beginning of the next fiscal year, in '23, right, and  
19 I'll tell you why. Because part of this year was a  
20 pretty dormant period so we do see that that will  
21 increase, but we'll see a more realistic number by  
22 2023, probably July, August, what realistically may  
23 be average daily participation rate.

24 JOSE MERCADO: Just a reminder that we  
25 were capped at 25 percent and we just lifted that cap

2 on Monday to 100 percent so that's the reason why,  
3 like the Commissioner mentioned, it'll be a slow  
4 growth.

5 CHAIRPERSON HUDSON: Okay.

6 LORRAINE CORTES-VAZQUEZ: Yeah.

7 CHAIRPERSON HUDSON: I mean potentially,  
8 there's a couple months until June or July so  
9 (INAUDIBLE) Okay.

10 LORRAINE CORTES-VAZQUEZ: I think it'll be  
11 a combination of 2 things. It'll be one, the lifting  
12 of the cap, the other thing is warmer weather. Knock  
13 on wood that they'll be no more setbacks.

14 CHAIRPERSON HUDSON: Yes. DFTA has a  
15 transparency issue in not reporting its senior center  
16 services utilization rate indicator even though it is  
17 marked critical. Will DFTA provide this data to the  
18 Council?

19 LORRAINE CORTES-VAZQUEZ: Yes. I'll get  
20 back to you as to why we haven't done that, and it  
21 might be because programs were closed for so long,  
22 but I'll get back to give you a clear answer as to  
23 why that's so.

24 CHAIRPERSON HUDSON: Okay. Just getting  
25 into the PEG a little bit, vacancies. Vacancy rate

2 currently at DFTA is 11 percent which is higher than  
3 the citywide average of 3 percent. What's being done  
4 to staff up these approximately 36 vacancies and  
5 what's the impact of these vacancies on contracted  
6 older adult programs?

7 LORRAINE CORTES-VAZQUEZ: I'm going to  
8 answer that 2 ways. When we did the PEG, 11 of those  
9 positions are PEG-created positions, right.

10 CHAIRPERSON HUDSON: Right.

11 LORRAINE CORTES-VAZQUEZ: And what we did  
12 was we distributed those vacancies across the bureau  
13 so that there was no one bureau and, in particular, I  
14 was very protective of the Bureau of Community  
15 Programs which is what I call the heart of DFTA which  
16 is where most of the programs are under, but we're  
17 being very, very diligent. Also, again with OMB,  
18 impressing upon them the need to one, support and  
19 approval all of our grant-funded positions and also  
20 working with them on the number of staff vacancies  
21 and the impact it has on us. We do not expect to see  
22 anything moving forward, any downfall, but should  
23 programs get fully operated we're going to closely  
24 monitor that to make sure that we do not have  
25 slippage in contract management services.

2 CHAIRPERSON HUDSON: Okay. Getting into  
3 the...

4 JOSE MERCADO: I just want to put one  
5 thing out, please. It was a PEG of 12, not 11.

6 LORRAINE CORTES-VAZQUEZ: Right, but she  
7 was talking about the 11 vacancies. It doesn't  
8 matter. Thank you.

9 CHAIRPERSON HUDSON: Okay. Then for the  
10 GetFood Recovery Meals, a 53 million dollar program  
11 which provides home-delivered meals to older adults  
12 previously served by GetFood is set to expire at the  
13 end of fiscal 2022. We heard earlier this month that  
14 there are thousands of older adults in the program  
15 who may need to be transferred to DFTA's baseline  
16 home-delivered meals program in the next fiscal year.  
17 What is the current estimate of how many older adults  
18 will need these meals come July? I know we touched on  
19 it in the last hearing.

20 LORRAINE CORTES-VAZQUEZ: Thank you for  
21 that. We're working very closely with the Deputy  
22 Mayor and others on a very aggressive transition  
23 plan. Right now, and I think I mentioned this at the  
24 last hearing, we are doing a survey of the now 10,300  
25 people on the program. We are also working very

2 closely with coming up with different off-ramps.  
3 Those that are known to DFTA and those that are not  
4 known to DFTA. Those known to DFTA, there's an  
5 aggressive outreach plan with the provider who had a  
6 relationship with that individual to bring them back  
7 to those services. Those who were not known to DFTA,  
8 we're doing some assessments and looking to see who  
9 needs home-delivered meals, who can provide these  
10 services on their own and no longer need the program,  
11 and we will give you a full detailed, the plan has  
12 already started. On Monday, we're sending out the  
13 first set of cards through our 3 providers. The  
14 driver will deliver those cards which is the first  
15 basis of the survey. We will start tabulating that  
16 and then have a sense of what the magnitude of the  
17 problem may be.

18 CHAIRPERSON HUDSON: Okay.

19 LORRAINE CORTES-VAZQUEZ: Did that answer  
20 you?

21 CHAIRPERSON HUDSON: The 3,000 transfers,  
22 are they different from the overall rising need?

23 LORRAINE CORTES-VAZQUEZ: No. They are,  
24 let me answer that clearly. The 3,000 that we  
25 mentioned that will need home-delivered meals..



2 CHAIRPERSON HUDSON: Right.

3 LORRAINE CORTES-VAZQUEZ: It may include  
4 some of these. We don't have a definitive number of  
5 which of these may need additional home-delivered  
6 meals. We started looking at, we had 3,000 people who  
7 potentially could be qualified for home-delivered  
8 meals. That's what I testified the last hearing. Of  
9 that, 1,800 of them said I don't want intervention.

10 CHAIRPERSON HUDSON: Right.

11 LORRAINE CORTES-VAZQUEZ: I don't want to  
12 give information so we have 1,200 that potentially  
13 are being assessed to see if they do become part of  
14 the 3,000 or not. We don't have that picture yet.

15 CHAIRPERSON HUDSON: Okay. Can you remind  
16 me when you expect to have that picture?

17 LORRAINE CORTES-VAZQUEZ: I believe that  
18 the cards come back a week after, you know, the  
19 following week we get the cards back, it takes us a  
20 few days to tabulate the data, and I would say no  
21 more than 2 weeks. We should have a sense in 2 weeks  
22 of the magnitude of the problem, how many will need  
23 homecare assessment and then how many will continue  
24 to need recovery meals.

2 CHAIRPERSON HUDSON: And that's 2 weeks  
3 from...

4 LORRAINE CORTES-VAZQUEZ: Two weeks from  
5 this Monday because this Monday the cards go out...

6 CHAIRPERSON HUDSON: The past Monday or  
7 Monday coming?

8 LORRAINE CORTES-VAZQUEZ: Monday starting,  
9 Monday, starting this Monday.

10 CHAIRPERSON HUDSON: Monday coming?

11 LORRAINE CORTES-VAZQUEZ: Monday coming.

12 CHAIRPERSON HUDSON: Okay. All right. Just  
13 want to make sure we know exactly which date after  
14 the 2 weeks...

15 LORRAINE CORTES-VAZQUEZ: Yeah. The cards  
16 go out. The reason it takes a week to get them back  
17 is because deliveries are made once a week...

18 CHAIRPERSON HUDSON: Yeah, I got that.

19 LORRAINE CORTES-VAZQUEZ: When we get them  
20 back, it takes us a few days to tabulate the results.

21 CHAIRPERSON HUDSON: Okay.

22 LORRAINE CORTES-VAZQUEZ: And those  
23 results are being tabulated by the 3 providers. We're  
24 really happy about that part this year. To your  
25 point, the last hearing, what we did was give them an

2 educational bit on the card also as to why the  
3 assessment is necessary to educate them because they  
4 might not know, to reduce their reluctance to getting  
5 an assessment.

6 CHAIRPERSON HUDSON: Right.

7 LORRAINE CORTES-VAZQUEZ: Hopefully.

8 CHAIRPERSON HUDSON: Yeah, I think that'll  
9 be an important...

10 LORRAINE CORTES-VAZQUEZ: Yeah, and that  
11 was a recommendation between you and one of the  
12 providers, which was an excellent recommendation.

13 CHAIRPERSON HUDSON: Great. I'm glad  
14 you're listening. What's the estimated cost to serve  
15 these folks and then are more providers needed or  
16 just enhancements to the baselined contracts that  
17 exist already?

18 LORRAINE CORTES-VAZQUEZ: I think, to be  
19 honest with you, the 3 providers who took this on at  
20 a week's notice and within one week it was fully  
21 operational, they have done an exceptional job, and I  
22 believe the reason it went so smoothly is because  
23 they had experience in home-delivered meals, each one  
24 of them, and are also familiar with why and how we  
25 deliver meals, and a great sensitivity and being in

2 tune with the population. I don't believe that we  
3 will need additional providers for this program. I  
4 think that the current providers were able to serve  
5 at the peak 22,000 and now it's 10,000 they're able  
6 to manage the capacity.

7 CHAIRPERSON HUDSON: Okay. Just a few more  
8 questions from me and then I'm going to move on to my  
9 Colleagues. The fiscal 2023 preliminary budget  
10 baselines the 9.4 million to raise the home-delivered  
11 meals reimbursement rate to \$11.78 per meal. Thank  
12 you for helping to accomplish a longstanding Council  
13 and non-profit provider priority there. I know that  
14 was a long time coming so we appreciate that. In the  
15 PMMR, DFTA writes that due to invoicing delays, home-  
16 delivered meal service appears lower in fiscal '22  
17 than the same period in fiscal '21 with about 2,500  
18 few clients. What's the updated information on the  
19 first 4 months of fiscal '22 and what are the year-  
20 to-date totals for both the number of clients and  
21 meals served?

22 LORRAINE CORTES-VAZQUEZ: Jose, do you  
23 want the up-to-date, and also when you're at that,  
24 can you talk about the invoicing, the delay, and the  
25 magnitude of it?

2 JOSE MERCADO: Sure. The first quarter,  
3 it's 1,315,000 meals. For the year-to-date, we're at  
4 2,155,000 meals.

5 CHAIRPERSON HUDSON: Hold on. 2 million  
6 and 55?

7 JOSE MERCADO: Yeah. It's 2155... I'll give  
8 you the full numbers. It's 1,315,327 which is the  
9 first quarter. Year-to-date is 2,155,951. There was a  
10 delay in invoicing because we gave an advance of 1  
11 quarter to all providers so they were not timely in  
12 submitting their submissions, and we've had several  
13 meetings with them, with 6 out of the 15, we've met  
14 consistently to try to get update invoices so we've  
15 been working on that to ensure that's happening, and  
16 our goal is to make sure that they are at least 1  
17 month. We're actually like 2 to 3 months behind on  
18 some providers.

19 CHAIRPERSON HUDSON: Okay. I'm sorry. I  
20 just want to make sure I understand. I have the  
21 numbers, 1,315,327, that's for which fiscal year?

22 JOSE MERCADO: That is for current fiscal  
23 year, July through October for fiscal year '22.  
24 Again, it's the first quarter, July through October.  
25 Year-to-date which actually goes up until December.

2 CHAIRPERSON HUDSON: Yep. Got it. Okay,  
3 great. Thank you.

4 LORRAINE CORTES-VAZQUEZ: As I said  
5 before, the invoicing is important to us because it  
6 means if we don't have a good sense of what dollars  
7 are being spent we could inadvertently leave dollars  
8 on the table which we could use to shift around where  
9 the greatest needs exist.

10 CHAIRPERSON HUDSON: Okay. The higher  
11 rates do not increase the home-delivered meal  
12 program's capacity. There were 220 people on the  
13 waitlist in November 2021. Do you know what the  
14 waitlist is now?

15 LORRAINE CORTES-VAZQUEZ: I will get you  
16 the actual waitlist (INAUDIBLE)

17 JOSE MERCADO: Commissioner, there is no  
18 one on the waitlist right now. We've been  
19 transitioning all people on the waitlist to  
20 (INAUDIBLE)

21 LORRAINE CORTES-VAZQUEZ: Everybody with  
22 food insecurity gets a meal immediately, and that is  
23 where we end up with the conversation about triaging  
24 so they may be waiting to be assessed for other

2 services, but food insecurity is addressed  
3 immediately.

4 CHAIRPERSON HUDSON: Okay. I think we're  
5 getting like a little bit of interference. Social  
6 isolation is a well-established correlate of worsened  
7 health outcomes for older adults. Improved mental  
8 health can help older adults get better. Yet, this  
9 budget slows the rollout of the previous  
10 administration's Geriatric Mental Health program with  
11 a 1.4 million dollar PEG in fiscal 2022. What message  
12 is the administration sending by cutting geriatric  
13 mental health services, and how much would it cost to  
14 provide clinician access in every Older Adult Center  
15 and Naturally Occurring Retirement Community?

16 LORRAINE CORTES-VAZQUEZ: Right now, one  
17 of the things that we're doing is that we're ready to  
18 scale up the expansion as close to July 1st as  
19 possible, and we've been working with staff to do  
20 that. We've hired staff within the department to help  
21 the programs expand because we're going from 48 sites  
22 to 88, and that takes some time to wrap up. All of  
23 that to say is that the commitment to geriatric  
24 mental health has not waned. It's just been the  
25 process of, in other words, all the funding is not

2 coming upfront. It is being scaled so that it keeps  
3 pace with the ability for us to open and grown the  
4 sites. We've already started the ramp up with the  
5 administrative support for this expansion, and our  
6 commitment is to open as many new programs as we can  
7 in July.

8 CHAIRPERSON HUDSON: Okay. Do you know how  
9 much it would cost to provide clinician access in  
10 every Older Adult Center and Naturally Occurring  
11 Retirement Community?

12 LORRAINE CORTES-VAZQUEZ: To expand to 108  
13 sites, we did that analysis. I'll look it up and  
14 provide that for you after this hearing. Okay?

15 CHAIRPERSON HUDSON: Okay. Thank you.

16 LORRAINE CORTES-VAZQUEZ: Remember,  
17 because the geriatric mental health site and the  
18 conditions of the site are regulated by the state we  
19 have a limit as to how many actual sites can service  
20 geriatric mental health center so that is why we have  
21 this hub and spoke model so that we bring older  
22 adults to some of these sites rather than not have  
23 services available to them.

24 CHAIRPERSON HUDSON: Okay. I'll end there  
25 for now. I want to make sure I get to my Colleagues.



2 We'll start with Council Member Lee followed by  
3 Council Member Schulman, Council Member Mealy, and  
4 then Council Member Richardson Jordan. Just as a  
5 reminder to please use the Zoom raise hand function  
6 and you'll be added to the queue. If you can keep  
7 your questions to about 5 minutes including answers,  
8 that's always the goal, but I totally understand if  
9 it goes over a little bit so don't worry too much  
10 about it. Please wait for the Sergeant-at-Arms to  
11 tell you when your time begins and then the Sergeant  
12 will let you then know when your time is up, but I  
13 think you're all seasoned at this by now. With that,  
14 I think we'll start with Council Member Lee.

15 SERGEANT POLITE: Time starts now.

16 COUNCIL MEMBER LEE: I will try to get  
17 this done in 5 minutes. Hi, Commissioner, how are  
18 you? Good to see you again.

19 I have a bunch of questions so I don't  
20 know what's the best way. I'll try to quickfire them  
21 out. I'll start with the last point that you just  
22 brought up. Curiosity wise, because I used to run an  
23 Article 31 plus the DFTA, but I know that when it  
24 comes to the satellite centers, they're usually much  
25 looser in terms of regulations in terms of the space,

2 so are there other reasons why the numbers would be  
3 low or are there other barriers or challenges you  
4 guys are seeing on the ground in terms of why there  
5 aren't services offered? Just out of curiosity, of  
6 the clinicians that you're partnering with, how many  
7 of the languages are being offered also?

8 LORRAINE CORTES-VAZQUEZ: That's part of  
9 the requirement. They have to provide services in the  
10 language of that particular community, and that's  
11 something that we're monitoring very, very closely,  
12 Council Member Lee.

13 Let me go back to the original question.  
14 The only limitation is, you're right, we loosened the  
15 requirements for satellites. The only limitation for  
16 a satellite would be space so they have no ability to  
17 have any space to have some kind of privacy then  
18 that's the only limitation, which is why some sites  
19 that were what we would call social clubs before will  
20 probably not be included in that constellation of  
21 sites, but you're absolutely right, which is why we  
22 like this hub and spoke model. You know it well. I  
23 think what I'll do is send a copy of the design to  
24 the Committee so that everybody's familiar with it.

2 COUNCIL MEMBER LEE: Okay. Also really  
3 quickly, for the home-delivered meals because I know  
4 that you guys know this better than anyone, but first  
5 of all thank you because 11.78, bringing that up to  
6 the national urban rate is great, but I think those  
7 numbers have been like that for a while so in terms  
8 of the increased food costs, gas prices, all the  
9 things that go into providing the meals on wheels,  
10 how do you think that's going to impact that cost? Do  
11 you foresee it going above the 11.78 and then also  
12 the second part of that question is for a lot of the  
13 subcontractors, is there a mechanism or a way that  
14 DFTA is able to make sure that subcontractors are  
15 also getting a fair portion of that funds because I  
16 think depending on who the contractor is, they get  
17 various rates and different rates and so, either way,  
18 the subcontractors still have the same costs because  
19 they're still providing meals so is there a way or  
20 mechanism that DFTA can place in order to make sure  
21 that the subs are also getting their fair share of  
22 funding?

23 LORRAINE CORTES-VAZQUEZ: You know from  
24 personal experience at KCS how that became my number  
25 1 issue, parity and funding, and I made sure that KCS

2 was not getting a subpar rate for the work that they  
3 were doing so my answer to you is yes, it's something  
4 that I'm extremely vigilant on to make sure that the  
5 subcontractors, particularly our non-profit  
6 subcontractors, are getting a fair price for those  
7 services. You know that from our personal experience.

8           Secondly, we're in close conversations  
9 with OMB about the inflation rate and so right now  
10 the 11.58 or .68 did take into account some  
11 inflationary figures overall so we're talking to them  
12 because they know that the 2 things that have  
13 escalated in costs are things that are key to home-  
14 delivered meals, which is food costs and gasoline, so  
15 that's an ongoing conversation with OMB around the  
16 home-delivered meals, which is estimated at about a 7  
17 percent inflationary rate.

18           COUNCIL MEMBER LEE: Also, I know that  
19 obviously with the state budget happening also, are  
20 there things that you guys are advocating for on the  
21 state budget given foresight in terms of rising costs  
22 and is there anything that you submitted to your  
23 Colleagues at the state for new support or new  
24 funding that perhaps we at the city could help  
25 champion because I think Chair Hudson and I are

2 definitely all about putting more money into DFTA and  
3 so if there's any new initiatives or new funding, if  
4 you could let us know about that as well?

5 LORRAINE CORTES-VAZQUEZ: Thank you very  
6 much for that question. I welcome any advocacy  
7 support that we get. We enjoy a very strong  
8 relationship with Assemblymember Ron Kim who's the  
9 head of the Aging Committee.

10 SERGEANT POLITE: Time expired.

11 LORRAINE CORTES-VAZQUEZ: I suggest that  
12 we start talking in tandem. The thing that we've  
13 asked them for is, no surprise to anyone here, the  
14 increasing need for home-delivered meals, the state  
15 has millions of dollars in unmet needs funds which  
16 right now are not allocated on a formula basis.  
17 Therefore, it's done at the discretion of the State  
18 Office of the AG so we're asking them to consider  
19 applying a formula to it so that New York can get  
20 closer to its fair share, and I must say that Senator  
21 Krueger as well as Assemblyman Ron Kim have been very  
22 supportive about that so we've also asked them for  
23 money for case management. You can't ask for money  
24 for home-delivered meals without asking for money for  
25 case management services, and that is one of the

2 things that we're looking. Because I do listen, to  
3 pick up on one of the conversations that you had with  
4 us rather directly was to look at how is it that  
5 we're looking at case management agencies and do we  
6 have an opportunity to expand the pool as well as to  
7 reflect more community-based ethnic sponsors, and  
8 we're looking at that very closely, particularly with  
9 the case management RFP that's going up so I thank  
10 you for that suggestion.

11 Those are the 2 things that we're  
12 advocating for. I'd be more than happy to send you  
13 the points and then we're also looking at the state  
14 for some additional support around Department of  
15 Transportation and Vision 0 requirements around  
16 senior centers.

17 COUNCIL MEMBER LEE: Okay. Just one real  
18 quick question. Sorry, Chair Hudson, if I could ask  
19 one quick question. Aside from the traditional  
20 geriatric mental health services that have been part  
21 of the budget, are there any other, given that  
22 there's going to be ongoing needs with the seniors in  
23 terms of the mental health, social, emotional front,  
24 are there any other programs that you're looking at,  
25 maybe not so formal with the Article 31s but any

2 other additional mental health-related programs that  
3 you're planning on adding?

4 LORRAINE CORTES-VAZQUEZ: Yeah. Thank you.  
5 We're looking at Friendly Visiting. I think it's a  
6 great supplemental program. It has a much broader  
7 reach. We're also looking at Friendly Voices and  
8 seeing how can we modify Friendly Voices to make it  
9 more of a sustained relationship like Friendly  
10 Visiting other than a one-time relationship, and  
11 those are the kind of things that we're looking at  
12 other than the geriatric mental health centers.

13 COUNCIL MEMBER LEE: Thank you.

14 CHAIRPERSON HUDSON: Is that everything,  
15 Council Member Lee? Okay. Cool. I'll come back to  
16 you. I'll kick it over to the other Crystal on the  
17 line, Crystal Pond.

18 CRYSTAL POND, MODERATOR: Thank you. We'll  
19 now hear form Council Member Schulman.

20 SERGEANT POLITE: Time starts now.

21 COUNCIL MEMBER SCHULMAN: Thank you very  
22 much. Thank you, Chair Hudson, for doing this hearing  
23 and Commissioner. So a question for you. Vaccinations  
24 for COVID among seniors who are 65 and above is  
25 pretty low. Has any thought been given to

2 coordinating with the Department of Health and Mental  
3 Hygiene in terms of home-delivered meals and hooking  
4 them up with at-home vaccines?

5           LORRAINE CORTES-VAZQUEZ: The rate  
6 citywide, Councilwoman, is not low. What's low is the  
7 rate among those who participate in DFTA programs,  
8 which is something that we're looking at. Lower than  
9 what we would like to see. I believe that the rate is  
10 somewhere around 70 percent. I'll confirm that. with  
11 the Department of Health's Track and Trace division,  
12 we are being very aggressive again about the in-home  
13 vaccination program that we have that has been  
14 successful, and we're looking to expand that.

15           COUNCIL MEMBER SCHULMAN: What I'm saying  
16 is that can there be a coordination between those  
17 that get meals at home and then offering them the at-  
18 home vaccines?

19           LORRAINE CORTES-VAZQUEZ: That is the  
20 first line of approach that we use...

21           COUNCIL MEMBER SCHULMAN: Okay. All right.

22           LORRAINE CORTES-VAZQUEZ: We have to get  
23 the consent of the older adult to get vaccinated.

24           COUNCIL MEMBER SCHULMAN: Also, the  
25 federal monies ran out today around folks who are



2 undocumented and being able to get the vaccines and  
3 all that so I want to know what plans that you might  
4 have in place for older adults who are undocumented?

5 LORRAINE CORTES-VAZQUEZ: The beauty of  
6 the work that we do is we do not ask status  
7 questions. All questions that we ask about any kind  
8 of identifying, it's all voluntary, and the only  
9 that's mandatory is age, and it's the only one that  
10 we ask.

11 COUNCIL MEMBER SCHULMAN: The money for  
12 the vaccinations for these folks has gone away, the  
13 federal money has gone away so is the city going to  
14 be money in to do that for older adults or do you  
15 have any idea about any of that?

16 LORRAINE CORTES-VAZQUEZ: I will have to  
17 get back to you on that. We work closely with the  
18 vaccine center, but I've not seen what kind of  
19 provisions we're going to make as a sanctuary city to  
20 address that.

21 COUNCIL MEMBER SCHULMAN: Okay. The other  
22 question I have is how do you assess the success of  
23 the senior centers that are under your auspices in  
24 terms of the programs they offer and what they do in  
25

2 the community and how they interact with community-  
3 based organizations?

4 LORRAINE CORTES-VAZQUEZ: Thank you for  
5 that question. When I first got here, one of the  
6 first things that one of the providers said to me was  
7 Lorraine, DFTA has an excellent way. We evaluate  
8 programs every year, and you evaluate programs on  
9 data which are quantifiable, not qualitative, and so  
10 one of the things that we did year before last or  
11 last year, I can't even remember when, was pull  
12 together a work group so that we could build in  
13 quality questions in our evaluation to make sure that  
14 we're not just counting, to give you number of meals,  
15 but some data on customer satisfaction, data on the  
16 quality of those meals. The other thing that we're  
17 looking at with this work group is looking at  
18 evidence based. What is the difference if you receive  
19 these services, what's your financial standing,  
20 looking at how does your life improve with that, and  
21 so those are the kinds of things that we're looking  
22 at right now and figuring out how do we build those  
23 into our assessments and then how do we build them  
24 into our annual review.

2 COUNCIL MEMBER SCHULMAN: When you have  
3 that data, can you share that with the Council? I  
4 think that would be helpful.

5 LORRAINE CORTES-VAZQUEZ: Yeah, we can  
6 share with you what we're looking at and what we're  
7 trying to assess and then we can share with you data  
8 once we have it, of course.

9 COUNCIL MEMBER SCHULMAN: Okay. All right.  
10 Thank you very much, Commissioner.

11 CRYSTAL POND, MODERATOR: Thank you,  
12 Council Member. I just want to acknowledge that  
13 Council Member Mealy was next for questions but she  
14 had to hop off for a second so we hope to get her  
15 back soon. In the meantime, we'll turn to Council  
16 Member Richardson Jordan.

17 SERGEANT POLITE: Time starts now.

18 COUNCIL MEMBER RICHARDSON JORDAN: Hi.  
19 Thank you for the presentation first all. I wanted to  
20 ask specifically a bit more about the geriatric  
21 mental health, and I understand you may not have  
22 specific numbers, especially because of the hub and  
23 spoke model, but are you able to give us a little  
24 more information as to what level of scaling up is  
25 going to happen with the cuts versus the level of the

2 scaling up that could happen if there were not those  
3 cuts?

4                   LORRAINE CORTES-VAZQUEZ: Currently, the  
5 48 sites cost us about 2.9 million dollars and so  
6 you're looking at service levels. I don't have that.  
7 I can get that to you, but we believe that we could  
8 scale up to the 88 sometime by no later than the fall  
9 and we could have all staff in place and all sites  
10 assessed and things of that nature. The goal is to be  
11 very aggressive during the summer. I will get you the  
12 numbers of the service expectation, but I can also  
13 give you the number for the service levels that we  
14 have currently. I don't have that with me right now.  
15 I'm sorry. Is that satisfactory?

16                   COUNCIL MEMBER RICHARDSON JORDAN: Sorry.  
17 I was placed on mute again, but, yes, I definitely  
18 understand. Thank you.

19                   LORRAINE CORTES-VAZQUEZ: I make a  
20 commitment to get that to you right after this  
21 hearing.

22                   COUNCIL MEMBER RICHARDSON JORDAN:  
23 Appreciate it.

24                   LORRAINE CORTES-VAZQUEZ: You're welcome.

2                   CRYSTAL POND, MODERATOR: Thank you,  
3 Council Member. We'll now turn to Council Member  
4 Caban.

5                   SERGEANT POLITE: Starting time.

6                   COUNCIL MEMBER CABAN: First of all, thank  
7 you to the Chair. Thank you to the Committee Staff.  
8 Commissioner, it is lovely to see you. Thank you for  
9 all of the hard work that you put in every day. I  
10 will be brief. We've all been hopping around from  
11 hearing to hearing so I apologize if you hit any of  
12 this in your testimony. In New York City, we know  
13 that 1 in 5 older women are living below the federal  
14 poverty line, and the National Institute on  
15 Retirement Security reported that women over the age  
16 of 65 are 80 percent more likely than men to be  
17 experiencing poverty and furthermore by 2030, it's  
18 anticipated that 1 in 5 New Yorkers will be older  
19 than 60 which I'm sure folks have mentioned time and  
20 time again in this space and others, but what's the  
21 agency to address and combat this particular issue?  
22 Specifically, what resources is the agency allocating  
23 within its budget to strengthen the resource of the  
24 safety net for older women in our city?

2                   LORRAINE CORTES-VAZQUEZ: Income security  
3 is right up there with food insecurity for the  
4 Department for the Aging and so we're addressing that  
5 in 3 ways. The one way that we address that is to  
6 make sure that every older adult, woman or male, has  
7 access to all of those benefits that contribute to  
8 their income security, whether it's SNAP or any of  
9 those kind of benefits. The other thing that we have  
10 is we just developed an initiative is around  
11 workforce. One of the statistics you didn't mention  
12 was the number of women that get laid off early and  
13 it starts happening at 47 so the number of women who  
14 are unemployed and in the workforce who are able to  
15 work is an alarming number, and many people only have  
16 Social Security, right, because most people don't  
17 have pensions anymore and very few people have the  
18 ability to do savings and so for us, making sure that  
19 people who want to work can work so we're starting a  
20 whole workforce initiative. Right now, we are just  
21 submitting a proposal to Americor. We have a senior  
22 employment program, and we're going to be working  
23 with the Mayor's Office on Workforce to basically  
24 make sure that this issue of older workers,

2 particularly older women, is part of a larger  
3 workforce agenda.

4           Also, the thing that I never forget and I  
5 ask each one of you to be a partner with us in is  
6 combating ageism. The reason all of this is in place  
7 is because older, it's the last human rights scourge.  
8 You'll tire of me saying this, but I will say this  
9 over and over. It's the last human rights  
10 discrimination that we have not tackled as a society,  
11 and older people get marginalized purely because of  
12 age, which then has a major impact on particularly  
13 and Latina women who are the lowest of all of those  
14 in the income strata.

15           COUNCIL MEMBER CABAN: This isn't a  
16 question but a brief comment I'll add with my  
17 remaining time is that yes, and I also hope from a  
18 holistic perspective that our neighbors and loved  
19 ones who are aging then also get to retire at a good  
20 age where they can enjoy their families and  
21 grandbabies and all that good stuff with dignity and  
22 find joy (INAUDIBLE) enjoy their day to day.

23           LORRAINE CORTES-VAZQUEZ: (INAUDIBLE) when  
24 they have a level of income security.

2 COUNCIL MEMBER CABAN: That's right.  
3 That's right. Well, thank you. I'm going to yield the  
4 rest of my time.

5 CRYSTAL POND, MODERATOR: Thank you,  
6 Council Member. Chair, no other Council Members have  
7 their hands raised to ask questions.

8 CHAIRPERSON HUDSON: Okay. Thanks. I think  
9 I have a few more, but I do want to get to the public  
10 questions, and I know Council Member Lee does as  
11 well. Commissioner, are you staying for the full  
12 hearing or were you going to drop off after our  
13 questions?

14 LORRAINE CORTES-VAZQUEZ: I will make sure  
15 that we listen to the testimony so that I can respond  
16 to it, but I will have to leave by 4:15 because I  
17 have caregiving responsibilities. I have a 92-year-  
18 old mom that I have to make sure that I get to see up  
19 in the Bronx.

20 CHAIRPERSON HUDSON: Okay. Certainly, all  
21 of us on this call understand that. If the members of  
22 the public will allow, I think I have a few more  
23 questions and Council Member Lee does as well. I  
24 don't know if we can get just like, I guess you don't  
25 have the emojis. I only see Lauren nodding yes.



2 Nobody else's camera is on, but like some kind of  
3 general consensus. I just want to make sure folks are  
4 okay with that.

5 Okay. Cool. I see enough thumbs. Awesome.  
6 I appreciate everyone's patience.

7 Council Member Lee, do you want to go  
8 first and then I can close out?

9 COUNCIL MEMBER LEE: Go ahead. Sorry.

10 CHAIRPERSON HUDSON: Okay. No problem.

11 Okay, I want to talk just a little bit about case  
12 management and homecare. The PMMR presented  
13 concerning indicators for homecare and case  
14 management. Homecare service levels fell 10.6 percent  
15 in the first 4 months of the fiscal year when  
16 comparing the same period last year. Case management  
17 totals fell 9.3 percent over the same period. The  
18 most recent waitlist data shows 346 awaiting homecare  
19 and 1,400 awaiting a full case management assessment.  
20 Do you know what the figures are now?

21 LORRAINE CORTES-VAZQUEZ: I'll get you  
22 those figures. I don't have that. What I can tell you  
23 is that many of the homecare services went down  
24 because due to the pandemic, homecare attendants  
25 unable to go to attend to older adults of their own

2 pandemic issues and needs or family needs so we know  
3 that that impacted us greatly. We also know that the  
4 waiting list for homecare usually centers around, and  
5 it's a real challenge for us, it's a conversation  
6 that we have with OMB all the time is right now we  
7 are capped at 20 hours per week and the pandemic has  
8 indicated for us that people who are again non-  
9 Medicaid eligible are requesting and needing  
10 additional homecare hours and so that is one of the  
11 things that we're looking at very closely. When I  
12 give you the numbers right after this, and I'm so  
13 sorry I don't have that number with me, I was  
14 thinking more of budget figures, what we will is  
15 we'll tell you the number of people waiting for  
16 homecare and the number waiting for increased hours.  
17 I thought you were going to ask me about the homecare  
18 RFP.

19 CHAIRPERSON HUDSON: Okay. I guess as long  
20 as we can get that from you immediately after the

21 (INAUDIBLE)

22 LORRAINE CORTES-VAZQUEZ: You'll get that  
23 immediately.

24

25

2 CHAIRPERSON HUDSON: Okay. Do you know  
3 then budget-wise how much would it cost to clear the  
4 homecare and case management waitlist?

5 LORRAINE CORTES-VAZQUEZ: We have those  
6 numbers.

7 CHAIRPERSON HUDSON: You have those  
8 numbers now or you have those numbers to give to me  
9 after?

10 LORRAINE CORTES-VAZQUEZ: We have those  
11 numbers, but we don't have the numbers (INAUDIBLE)

12 CHAIRPERSON HUDSON: I know you don't have  
13 the other ones but this one is a budget one.

14 JOSE MERCADO: We're working with OMB on  
15 calculating what those numbers are so we'll share.

16 CHAIRPERSON HUDSON: You're talking about  
17 the costs to clear the homecare and case management  
18 waitlist?

19 JOSE MERCADO: Correct. Right. We've been  
20 working on that.

21 CHAIRPERSON HUDSON: Okay. Got it. Just to  
22 be clear, those numbers will come with the other  
23 numbers then?

24 LORRAINE CORTES-VAZQUEZ: When you finish,  
25 what I'll do is I'll run down all of the data that I

2 promised you and you'll confirm if it's that or if I  
3 missed anything. Okay?

4 CHAIRPERSON HUDSON: Okay. That's fair.

5 It's been wonderful to see some of the Older Adult  
6 Centers moving towards more virtual service  
7 offerings, but there's still no unified directory of  
8 virtual services to my knowledge, which by definition  
9 can be accessed remotely from anywhere older adults  
10 are. Why hasn't DFTA centralized virtual older adult  
11 services and does it have a plan to do so?

12 LORRAINE CORTES-VAZQUEZ: Yes, we do have  
13 a plan to do so. As a matter of fact, we're starting  
14 a library where people can share their resources  
15 because we also saw what a benefit it was and how it  
16 could become almost budget neutral. Before I could  
17 have a master photographer only if my budget allowed  
18 it, but now because of virtual programming I can have  
19 a master photographer and I can use those services in  
20 any other center, and we are working out those kinds  
21 of agreements but we have plans of creating what we  
22 call the DFTA Library, particularly to address that  
23 issue so that everybody could have access to a  
24 variety of programs but also to some of those  
25 programs that were limited because some people had

2 higher recreational budgets than others so that is  
3 something that this pandemic clearly taught us. The  
4 companion issue with that is for us to be advocates  
5 with the state to make sure that we start getting  
6 affordable internet access, but one of the biggest  
7 barriers for us outside of getting virtual  
8 programming outside of the facilities is individual  
9 homes and, as you know, internet is pretty cost  
10 prohibitive, particularly for older adults who live  
11 on fixed incomes.

12 CHAIRPERSON HUDSON: Absolutely. What  
13 about the live programming?

14 LORRAINE CORTES-VAZQUEZ: The live  
15 programming, we don't have a plan for that, but what  
16 we do have a plan because I don't know how you can  
17 share live programming, and that may be my own  
18 technological limitations, but we could look at that,  
19 but what we are looking at, we're working in  
20 partnership with the Mayor's Office of Media and  
21 Entertainment to try to see if we can use some of  
22 those channels to have live programming on a regular  
23 basis around some of those services that we do  
24 virtually, and that's a conversation that we've  
25 already started.

2 CHAIRPERSON HUDSON: Okay. Will DFTA  
3 commit to new indicators that we can evaluate the  
4 reach and demographic information of those attending  
5 virtual services?

6 LORRAINE CORTES-VAZQUEZ: You want me to  
7 commit to that right now?

8 CHAIRPERSON HUDSON: Yeah. Why not?

9 LORRAINE CORTES-VAZQUEZ: We will give you  
10 data on a regular basis of all of the virtual  
11 programming that we have and we'll also inform you of  
12 how far we've moved on creating this library. We'll  
13 keep you abreast on how far we are and what  
14 advancements we've made.

15 CHAIRPERSON HUDSON: Okay, we'll take that  
16 a strong start. Following Council advocacy, 5.5  
17 million dollars was added this year to support  
18 another 10,000 tablets for older adults. We're just  
19 continuing on the technology area here. What's the  
20 rollout for this, and are all the tablets in older  
21 adults' hands? How does DFTA track the usage of the  
22 tablets to ensure older adults are sticking with  
23 them?

24 LORRAINE CORTES-VAZQUEZ: So far, there  
25 are about 19,000-something distributed to senior

2 centers already. I have total confidence that the  
3 older adult clubs as well as the service providers  
4 have them in the hands of the older adults. That has  
5 been extremely helpful to us. What we're trying to  
6 negotiate now with the internet provider is to give  
7 us more access and time on the free internet service  
8 so we're under negotiations with them about that  
9 because we've done the training, we provided the  
10 tablet, and if the internet is not available for an  
11 entire year then it becomes a hardship for  
12 individuals to use it outside of their center or  
13 hotspots across the city.

14 CHAIRPERSON HUDSON: Right. How are you  
15 tracking this though?

16 LORRAINE CORTES-VAZQUEZ: How are we  
17 tracking the use of the tablet? That's an excellent  
18 question. I cannot answer that for you.

19 CHAIRPERSON HUDSON: Okay, but you'll get  
20 back to me?

21 LORRAINE CORTES-VAZQUEZ: Of course, I  
22 will.

23 CHAIRPERSON HUDSON: Okay.

24 LORRAINE CORTES-VAZQUEZ: I don't even  
25 know that I should say this out loud. I'll figure out

2 how we are tracking it. I'm sure that (INAUDIBLE)  
3 people are tracking it. Jose, throw me a lifeline  
4 here.

5 JOSE MERCADO: Sure. We partner with T-  
6 Mobile so we actually have information on the usage  
7 of these tablets so we can share that.

8 CHAIRPERSON HUDSON: Okay. Yeah, that  
9 would be helpful.

10 LORRAINE CORTES-VAZQUEZ: Thank you, Jose.

11 JOSE MERCADO: No problem.

12 CHAIRPERSON HUDSON: You can always call a  
13 friend. Don't worry. I'll give you unlimited call  
14 your friends.

15 LORRAINE CORTES-VAZQUEZ: Yeah, thank you.

16 JOSE MERCADO: (INAUDIBLE) network, right?

17 CHAIRPERSON HUDSON: Okay. I guess just  
18 more generally how does technology fit into your  
19 capital planning so, for example, is there any effort  
20 to provide tablets or computer technology to every  
21 older adult club or NORC or to every older adult in  
22 need? Is that part of the planning process?

23 LORRAINE CORTES-VAZQUEZ: That will be  
24 part of the planning process, and I'll tell you why.  
25 We, as I said earlier and as you said earlier,



2 virtual programming has just enhanced our capacity,  
3 our reach, and the quality of the recreational and  
4 educational programming available so that will  
5 definitely be part of our future state, but, again, I  
6 go back to that is like giving me a car without  
7 gasoline. We need to make sure that we have  
8 accessible internet so that as we start expanding  
9 this that older adults across the city can have  
10 access to accessible internet.

11 CHAIRPERSON HUDSON: All older adult clubs  
12 and NORCs do have access to accessible internet.  
13 Correct? Or do we have data on?

14 JOSE MERCADO: We know, for example, that  
15 a lot of those have access to the internet. We don't  
16 know the extent of the access. Remember, it's like  
17 you can build infrastructure but the issue becomes  
18 more about when they're home, when they want to go  
19 online.

20 CHAIRPERSON HUDSON: Sorry. I'm asking  
21 about the older adult clubs and NORCs and things like  
22 that.

23 JOSE MERCADO: Right. We're looking to  
24 figure out how many of these actually have internet  
25 access, how many don't, but that's a question that

2 was asked of us so we're looking into exactly what  
3 extent they all have. We know that basically the  
4 majority of the budgets do have internet access in  
5 order to basically function within their own  
6 infrastructures and provide the day-to-day  
7 operations, but, again, we're looking into that.

8 LORRAINE CORTES-VAZQUEZ: We know that  
9 they all have access but it's what's the bandwidth.  
10 We know they have access because they have to deal  
11 with us electronically, but it's what's the bandwidth  
12 to support.

13 JOSE MERCADO: Yeah, it's beyond that.  
14 Correct. It's beyond bandwidth though.

15 CHAIRPERSON HUDSON: Okay. Going to  
16 caregiving services, DFTA's directed contracted  
17 caregiver programs which support those caring for an  
18 older person and grandparents caring for children  
19 served about 3,500 folks in the first 4 months of  
20 fiscal 2022, similar to last year. Given that the  
21 city has said there are upwards of 1.3 million  
22 caregivers in New York City, what are you doing to  
23 reach this population?

24 LORRAINE CORTES-VAZQUEZ: We are very  
25 proud of the robust home caregiver program that we

2 have, and an additional 10 million dollars was  
3 allocated in 2018 for our caregiving services, and as  
4 a result of some of that funding we were able to add  
5 respite care which was a service we were never able  
6 to provide before so it is one of those ongoing  
7 conversations because as we want people to remain in  
8 their community, caregiver support is an essential  
9 piece of that.

10 CHAIRPERSON HUDSON: Okay, and is there  
11 any additional funding for respite care, which the  
12 city's Local Law 97 survey reported as one of the  
13 most frequently stated needs cited by caregivers? Are  
14 we doing anything about that?

15 LORRAINE CORTES-VAZQUEZ: The program  
16 still exists, and the contractors have money for  
17 respite care. We're working on seeing how we could  
18 expand that.

19 CHAIRPERSON HUDSON: Do you know the  
20 amount?

21 LORRAINE CORTES-VAZQUEZ: The current  
22 amount? Jose, do we have the current amount of the  
23 homecare contracts, I'm sorry, caregiving contracts?  
24  
25

2 JOSE MERCADO: Yeah, we can share that  
3 with you. I'll share it. I don't have it right now  
4 but I'll share it.

5 CHAIRPERSON HUDSON: And then whatever the  
6 future amount may be also if..

7 JOSE MERCADO: Sure.

8 CHAIRPERSON HUDSON: All right. Thanks.

9 LORRAINE CORTES-VAZQUEZ: (INAUDIBLE)  
10 remember is that caregiving was baselined and that  
11 was essential.

12 CHAIRPERSON HUDSON: Okay. All right. I'm  
13 rounding it out with the last few questions and then  
14 we'll get to the public and thanks again for  
15 everybody's patience.

16 The fiscal 2023 preliminary budget has  
17 303 fewer full-time equivalent positions than the  
18 fiscal 2022 adopted budget. We understand this  
19 reflects the ongoing implementation of a change in  
20 the payroll mechanism for older adults employment  
21 part-time workers but no programmatic changes. Will  
22 DFTA provide a list of the number of older adults  
23 employed through Title 5 funding at each plan update?

24 LORRAINE CORTES-VAZQUEZ: Sure. I can give  
25 you that now. A total of 400 in older adult

2 employment program and another 125 I believe in  
3 foster grandparent programming. That, to us, was the  
4 biggest hurdle that we have had to do is to get them  
5 off city payroll because it falsely inflated DFTA's  
6 headcount, but more importantly they were listed as  
7 city employees without getting city benefits, which  
8 was a concern to us. Equally important is that they  
9 also are not required to do all of the mandated  
10 trainings in the way that the city has it. We still  
11 have those mandated trainings, sexual harassment and  
12 all the other mandated trainings, and what we are  
13 doing is that we are doing it more in a group format  
14 rather than in individual training program because it  
15 makes it simpler for them to grasp the knowledge than  
16 to do it individually online the way the programs are  
17 designed for city employees.

18 CHAIRPERSON HUDSON: Okay. Thank you.

19 LORRAINE CORTES-VAZQUEZ: But that has no  
20 impact on DFTA's services or contract management  
21 services.

22 CHAIRPERSON HUDSON: Right. Understood.  
23 What about the total savings expected from the shift  
24 from personnel to OTPS expenditure for older adult  
25 (INAUDIBLE)

2           LORRAINE CORTES-VAZQUEZ: These are grant  
3 funded so there are no savings per se. All of the  
4 money stays within the program and so if we had more  
5 people on payroll to handle that, that money gets  
6 reverted back into the program so there's no savings  
7 per se, and it's all grant funded and it goes right  
8 back into the program.

9           CHAIRPERSON HUDSON: Okay. Just to  
10 confirm, the people that are in the part-time  
11 employment program, do they have the ability to work  
12 full-time and then would any of them be eligible to  
13 receive benefits like health insurance?

14           LORRAINE CORTES-VAZQUEZ: If they  
15 qualified for a full-time job, of course, our goal is  
16 to un-subsidize as many people as we could, but they  
17 will continue with their program and those who are  
18 interested and eligible and qualified, of course,  
19 they could apply for any job across the city, which  
20 is our whole goal is to end ageism in the employment  
21 practices and using New York City as a model. I want  
22 to be real clear that this is a workforce development  
23 program and a workforce training program, and these  
24 are subsidized positions and it's funded by funds at  
25 the federal government and the state government.

2 CHAIRPERSON HUDSON: Okay. All right.

3 Well, thank you. I think I'm letting you go with a  
4 few minutes to spare before you're deadline here,  
5 but, as always, really appreciate your testimony and  
6 answering the questions and following up with us very  
7 quickly, immediately after the hearing with all of  
8 the requested information. Thank you also to Jose. I  
9 will kick it back to our Moderator, Crystal Pond.  
10 Also, just one more thank you to the members of the  
11 public for your patience in allowing me to finish out  
12 the questions.

13 LORRAINE CORTES-VAZQUEZ: What I'll do is  
14 I'll send you, to both Crystal Pond and Crystal  
15 Hudson, I'll send you an email following this to  
16 recap what I believe I owe you based on this  
17 conversation and you will confirm (INAUDIBLE) keep me  
18 honest, right. Bye-bye.

19 CHAIRPERSON HUDSON: Bye-bye. Thank you.

20 CRYSTAL POND, MODERATOR: Thank you, Chair  
21 Hudson. We will now begin public testimony. The first  
22 panel of public testimony in order of speaking with  
23 Dorothy Jiang followed by Farhana Hussain followed by  
24 Elizabeth Bird.

2 I'd like to remind everyone that I will  
3 be calling individuals one-by-one to testify. Each  
4 panelist will be given 2 minutes to speak. Please  
5 begin your testimony once the Sergeant cues you.

6 Council Members who have questions for a  
7 particular panelist should use the Zoom raise hand  
8 function and I will call on you in the order you  
9 raised your hand after the panelist have completed  
10 their testimony.

11 For panelists, once your name is called,  
12 a member of our staff will unmute you and the  
13 Sergeant-at-Arms will set the timer then give you the  
14 go ahead to begin. Please, wait for the Sergeant to  
15 announce that you may begin before delivering your  
16 testimony. I will now call on Dorothy Jiang.

17 SERGEANT POLITE: Starting time.

18 DOROTHY JIANG: Thank you, Chair Hudson  
19 and the Members of the Aging Committee, for holding  
20 this hearing and giving the Asian-American  
21 Federation, AAF, the opportunity to testify. I'm  
22 Dorothy Jiang, Membership and Capacity-Building  
23 Coordinator at AAF. Our organization represents the  
24 collective worth of more than 70 member non-profits  
25 serving 1.5 million Asian New Yorkers. We're here



2 today because Asian seniors make up 13.9 percent of  
3 the city's senior population, and our poverty levels  
4 have increased dramatically. We convened the Seniors  
5 Working Group, the first and only Asian senior-  
6 focused advocacy coalition in New York. This group is  
7 made up of 12 AAF member organizations who served  
8 nearly 250,000 Asian seniors in 2021, 87,000 of whom  
9 were low income. These Asian seniors have told us  
10 that their greatest needs are safety from anti-Asian  
11 violence, access to direct services at senior  
12 centers, access to food programs, and combatting  
13 mental health and social isolation.

14           Our Seniors Working Group believes that  
15 systemic change with anti-Asian violence and food  
16 programs and mental health requires the city to  
17 change contract processes to prioritize language  
18 access and cultural competency as well as reduce the  
19 size of some of these contracts to make them  
20 accessible to smaller agencies.

21           Here are our core recommendations. One,  
22 increase funding to Asian-led, Asian-serving senior  
23 service providers including expenses for case  
24 management and digital literacy. The only way Asian  
25

2 seniors can access vital programs is if the Asian  
3 CBOs they trust have the resources to provide them.

4 Two, increase funding for the AAPI  
5 Community Support Initiative to sustain and expand  
6 direct services and fund anti-Asian violence  
7 programming in our Hope Against Hate campaign. These  
8 include Safety Ambassador programs, standard  
9 trainings, and victim support services.

10 Three, expand funding to include  
11 culturally competent in-language and senior-focused  
12 mental health service models. This includes  
13 prioritizing CBOs that have a history of providing  
14 free or subsidized non-traditional culturally  
15 competent services for funding opportunities. Asian-  
16 led, Asian-serving CBOs have been and will continue  
17 to be Asian seniors' primary support, and they're the  
18 key to restoring trust between our seniors and the  
19 city.

20 SERGEANT POLITE: Time expired.

21 DOROTHY JIANG: Thank you for allowing AAF  
22 to testify, and we look forward to working with all  
23 of you to make sure our senior communities get the  
24 support they deserve.

2 CRYSTAL POND, MODERATOR: Thank you. We  
3 will now hear from Farhana Hussain.

4 SERGEANT POLITE: Starting time.

5 FARHANA HUSSAIN: Thank you for providing  
6 us this opportunity to speak in front of the City  
7 Council Committee on Aging. I'm here today on behalf  
8 of India Home, a non-profit organization founded by  
9 healthcare professionals dedicated to serving South  
10 Asian older adults in New York. India Home leads the  
11 city's largest senior center programs aimed at  
12 improving the quality of life of South Asian and  
13 Indo-Caribbean immigrant older adults in New York  
14 City. Since our inception, we have touched the lives  
15 of over 5,000 seniors through our holistic and  
16 culturally competent programs such as congregate  
17 meals, senior center services, case management,  
18 mental health services, advocacy, and educational and  
19 recreational activities. We have also pivoted into  
20 delivering a robust COVID-19 relief and recovery  
21 program at the onset of this pandemic and with the  
22 hard work of our staff and volunteers provided over  
23 30,000 culturally competent halal and vegetarian  
24 meals, over 1,200 grocery packages, over 35,000  
25 service units of virtual programming, and more than

2 30,000 wellness check-up calls, all of which we are  
3 continuing to provide currently. 51 percent of Asian-  
4 Americans have reported needing help with access to  
5 food during the COVID-19 pandemic, and South Asian  
6 older adults struggle even more since many of our  
7 seniors are at risk and homebound, unable to go  
8 grocery shopping or prepare healthy meals themselves.  
9 We also saw a major increase in our seniors need for  
10 in-language wellness check-up calls and culturally  
11 competent case management, healthcare, and housing  
12 assistance services compared to before the pandemic.  
13 Among API adults, 48 percent reported getting  
14 together with family and friends a few times or less  
15 in the past 30 days. Due to a lack of services  
16 addressing the diverse language needs and low digital  
17 literacy skills of this population, South Asian  
18 immigrant seniors have been particularly adversely  
19 affected during this pandemic.

20 We ask that the Committee on Aging  
21 support increased funding and the expansion of  
22 culturally competent halal and vegetation meal  
23 programming, case management, and creative aging  
24 services for CBOs like ours that are serving  
25

2 vulnerable immigrant Asian populations. Given the  
3 growing...

4 SERGEANT POLITE: Time expired.

5 FARHANA HUSSAIN: Case management and  
6 housing assistance needs of our older adults, we also  
7 ask that there is increased funding allocated to  
8 supporting in-language services and resources that  
9 can help our organization better assist every senior  
10 effectively and thoroughly. Thank you so much for  
11 your time and cooperation.

12 CRYSTAL POND, MODERATOR: Thank you. We  
13 will now have Elizabeth Bird. After Elizabeth Bird,  
14 it will be Fiodhna O'Grady, Helen Ahn, and James  
15 O'Neal. Elizabeth.

16 SERGEANT POLITE: Starting time.

17 CHAIRPERSON HUDSON: Moderator, it looks  
18 like Elizabeth may be having some technical issues so  
19 let's move on to the next panelist in the meantime.

20 CRYSTAL POND, MODERATOR: We'll come back  
21 to Elizabeth. The next panelist will be Fiodhna  
22 O'Grady.

23 SERGEANT POLITE: Starting time.

24 FIODHNA O'GRADY: My name is Fiodhna  
25 O'Grady, and on behalf of the Samaritans of New York

2 Suicide Prevention Center I want to thank Chair  
3 Hudson and all the Committee Members for the  
4 opportunity to speak today.

5           Samaritans created the world's first  
6 suicide hotline 70 years ago, a service we now  
7 provide in 42 countries. The Samaritans of New York's  
8 hotline answered close to 75,000 calls in FY-21 and  
9 is staffed by compassionate volunteers from New York  
10 City's diverse communities. These 80 to 100  
11 volunteers donate 800,000 dollars in free labor  
12 annually that nearly matches 3 dollars to every  
13 dollar the Council provides making our hotline one of  
14 the city's most cost-effective crisis services. We  
15 ask that you support the restoration of 312,000, the  
16 same amount we received in FY-22 through the Mental  
17 Health Committee's Mental Health for Vulnerable  
18 Populations initiative for Samaritan's hotline. The  
19 elderly, a key group served by the hotline, comprise  
20 12 percent of the US population but account for 18  
21 percent of the nation's suicides. In addition, older  
22 adults tend to plan out suicides more carefully and  
23 utilize more lethal means. There are damaging myths  
24 around senior mental health and stigma has made it  
25 harder for older people to seek help during the

2 pandemic. What we are seeing now is even more  
3 worrisome. As you know, the elderly are among the  
4 highest risk group for COVID-19 and account for a  
5 staggering 74 percent of all COVID deaths. That means  
6 that most of the relaxed policies we enjoy in the  
7 city are not as safe for older New Yorkers so for the  
8 elderly it's been 2 years of isolation, 2 years of  
9 limited support, 2 years of hope never coming to  
10 fruition. Quarantining and social distancing, while  
11 necessary public measures, further cut off an  
12 isolated population, isolation being a key risk  
13 factor for suicide. Additionally, older New Yorkers  
14 have endured unimaginable grief and loss, losing a  
15 beloved spouse, cherished friends, or losses in their  
16 community group that the absence of any person...

17 SERGEANT POLITE: Time expired.

18 FIODHNA O'GRADY: Thank you, Chair Hudson  
19 and the New York City Council Members here today, for  
20 prioritizing support of the New York City hotline.  
21 According to SAMHSA, vulnerable populations like the  
22 elderly are often resistant to traditional clinic  
23 treatment and government-run hotlines, examples New  
24 York City Well, National Lifeline, 988. Please, keep

2 our hotline going that's 100 percent confidential.  
3 Thank you.

4 CRYSTAL POND, MODERATOR: Thank you for  
5 your testimony. We'll now move on to Helen Ahn.

6 SERGEANT POLITE: Starting time.

7 HELEN AHN: Hi. My name is Helen Ahn,  
8 Director of KCS Older Adult Centers. Thank you, Chair  
9 Hudson, for your time and opportunity to speak today.

10 Founded in 1973, KCS and its Older Adult  
11 Centers have provided a cultural appropriate ethnic  
12 home delivered meal services and Korean congregate  
13 meals including new grab and go meals, case  
14 assistance, information referral, education,  
15 technology, food pantry, transportation, health  
16 promotion with all language access services Monday  
17 through Friday, 5 days a week. During the pandemic,  
18 our biggest fear was the stoppage of services for  
19 community members who depend on our daily services.  
20 Although COVID-19 pandemic has impacted us, our  
21 centers never stopped providing services physically  
22 and remotely. The culturally appropriate meal  
23 program, especially the ethnic home delivered meals,  
24 serve as a lifeline of nutrition for homebound  
25 immigrant seniors. It is a crucial service in



2 maintaining their mental and physical health. The  
3 meal programs at KCS focus on seniors in need and  
4 underserved homebound seniors. Asian-American and  
5 immigrant clients and homebound seniors are  
6 particularly in need of help, suffering from  
7 isolation, insecurity, and anxiety due to increasing  
8 anti-Asian hate crime in addition to language  
9 barrier, lack of caregivers, and social contact. The  
10 unique HDM program faces daily challenge of delivery  
11 due to increasing number of new clients including  
12 (INAUDIBLE) clients, lack of staff, vehicles, high  
13 maintenance cost on older vehicles, gas, and rising  
14 raw food cost. The lack of in-person services  
15 government agencies has made us and our clients more  
16 worried (INAUDIBLE) services. The lack of leadership  
17 of DFTA in launching the new awarded contract made it  
18 hard in delivering scope of services. To (INAUDIBLE)  
19 these difficulties, additional HDM funding allocation  
20 and restoring budget cuts to DFTA should be made so  
21 that we may..

22 SERGEANT POLITE: Time expired.

23 HELEN AHN: Launched a new DFTA-awarded  
24 contract provided essential mental health services

2 and reduce food insecurity and seek new vehicles for  
3 the HDM.

4                   Lastly, we believe the language  
5 appropriate legal services and senior housing need in  
6 the community should be invested. Thank you.

7                   CRYSTAL POND, MODERATOR: Thank you for  
8 your testimony. At this time, I'll try to go back to  
9 Elizabeth Bird who I think was having issues with  
10 unmuting. Let's try Elizabeth Bird again.

11                   SERGEANT POLITE: Starting time.

12                   ELIZABETH BIRD: Thank you, Chair Hudson  
13 and Members of the Committee on Education (sic) for  
14 the opportunity to testify today. My name is  
15 Elizabeth Bird. I'm Director of Public Policy at  
16 Educational Alliance which offers high quality,  
17 multigenerational programs and services to the  
18 communities of Lower Manhattan.

19                   Today, I would like to highlight several  
20 aspects of the preliminary budget that have  
21 particular importance to our work. Educational  
22 Alliance offers a number of innovative programs and  
23 services to aging adults throughout our Weinberg  
24 Center for Balanced Living located in our flagship  
25 community center on the Lower East Side and our

2 Sirovich Center operated in conjunction with the 14th  
3 Street Y, another of the Alliance's community sites.  
4 Both sites offer a range of meals, arts, and exercise  
5 classes, adult education, health and nutrition  
6 programs, casework, mental health counseling, and  
7 civic engagement opportunities to over 7,000 older  
8 adults annually. Membership in our programs has  
9 expanded exponentially in the past 8 years, and our  
10 direct service staff is working harder than ever to  
11 provide new and expanded services for our clients.  
12 Yet, funding for the services we offer has not kept  
13 pace with demand. We need the DFTA budget to  
14 adequately support the work we do. We call on the  
15 City to make the following investments in FY-23  
16 budget.

17           Restore the 10.2 million PEG to DFTA's  
18 budget including the 1.3 million PEG to the geriatric  
19 mental health program.

20           Invest 12.7 million to meet increased  
21 demand for home delivered meals and build upon DFTA's  
22 Community Care initiative with an additional 40  
23 million.

24           Annual discretionary funding from the  
25 Council also helps fund the work we do. Please,

2 restore 7.14 million for aging services programs in  
3 every district along with an additional 2.6 million  
4 to provide better support for transportation,  
5 technology, and to address social isolation.

6 Thank you for the opportunity to testify  
7 today.

8 CRYSTAL POND, MODERATOR: Thank you for  
9 your testimony. We will now hear from James O'Neal.

10 SERGEANT POLITE: Starting time.

11 JAMES O'NEAL: Good afternoon, Chair  
12 Hudson and Members of the Committee on Aging. My name  
13 is James O'Neal, and I am the Volunteer President of  
14 AARP New York, representing 750,000 members of the  
15 50+ community across New York City.

16 The Department of Aging remains  
17 chronically underfunded and makes us less than half  
18 of 1 percent of the city's entire budget. Over the  
19 course of the past 2 years, older New Yorkers have  
20 faced barriers accessing critical resources including  
21 food, groceries, healthcare, and medications. Older  
22 adults have also suffered from unprecedented levels  
23 of social isolation as a result of the necessary  
24 restrictions placed on gatherings and critical  
25 community spaces combined with the lack of sufficient

2 access to technology needed to remain remotely  
3 connected to friend and community.

4           We recommend that the Mayor and the City  
5 Council commit to several critical aging-related  
6 investments in fiscal year '23 budget including  
7 exempt the New York City Department of Aging, DFTA,  
8 from the proposed 3 percent program to eliminate the  
9 gap, the PEG budget cut, increase city's fundings  
10 allocated to the home delivered meals program to  
11 combat hunger amongst older adults, expand upon  
12 investments made into DFTA's Community Care  
13 initiative by allocating 5 million dollars to support  
14 the growing demand for case management program and 28  
15 million dollars to support the demand for the  
16 homecare program, 1 million dollars to expand  
17 caregiver programs, and 5 million to expand areas of  
18 virtual programming and to supporting technology  
19 expansion, establish, fund, and enforce the automatic  
20 annual cost of living adjustment, the COLA, for all  
21 human service workers, and fully fund all the aging-  
22 related discretionary funding initiatives in the  
23 fiscal year '23 budget. The specific funding amounts  
24 can be found in the written testimony that we've  
25 already submitted to the Council.

2 Thank you for providing me with the  
3 opportunity to testify today, and I'll be more than  
4 happy to answer any questions. Thank you.

5 CRYSTAL POND, MODERATOR: Thank you for  
6 your testimony. The next panel will include Jeanette  
7 Estima, Tara Klein, and then Brianna Paden-Williams.  
8 We will now turn to Jeanette Estima.

9 SERGEANT POLITE: Starting time.

10 JEANETTE ESTIMA: Good afternoon. Thank  
11 you, Chair Hudson and Members of the Committee, for  
12 the opportunity to testify today.

13 My name is Jeanette Estima, and I'm the  
14 Director of Policy and Advocacy at City Meals on  
15 Wheels, which was established to fill a gap in  
16 weekend and holiday meals for the city's home  
17 delivered meal program. We raise about 20 million  
18 dollars annually to ensure that homebound older  
19 adults have a meal on the 115 days that the city does  
20 not provide one and have become the emergency  
21 responder for this population.

22 Our primary concern with the preliminary  
23 budget is that there is no funding to support new  
24 needs for the home delivered meals program driven by  
25 both the general growth in the need that we've seen

2 for a number of years now and with thousands of older  
3 adults in the recovery meals program who will need to  
4 transition to DFTA's rolls next year.

5           Moreover, even as the pandemic wanes, we  
6 must ensure that our emergency response  
7 infrastructure is adequately funded. Therefore, we  
8 request the following investments. 1 million through  
9 the Council's Senior Center Programs and Enhancement  
10 initiative to fund City Meals' emergency meals  
11 programs.

12           Secondly, the city currently receives  
13 about 1.4 million from the federal Department of  
14 Agriculture's Cash in Lieu of Commodities program for  
15 food that is provided by City Meals. We ask for your  
16 support in having this funding directed back to City  
17 Meals so we may reinvest it in our meals programming.

18           Further, 12.7 million is needed to  
19 support the growing needs for meals, and that  
20 includes 9.7 million for the DFTA-contracted  
21 community-based meal providers to serve about 3,000  
22 new clients and 3 million earmarked for City Meals'  
23 weekends and holidays meals.

24           To reiterate, City Meals is not  
25 reimbursed for the meals that we fund and we cannot

2 reasonably be expected to come up with 3 million  
3 dollars to cover these new needs that are just around  
4 the corner.

5           Additionally, providers have unusable  
6 vans in need of repairs and old refrigerators or  
7 stoves that should be replaced, no storage space, and  
8 (INAUDIBLE) infrastructure..

9           SERGEANT POLITE: Time expired.

10           JEANETTE ESTIMA: DFTA must evaluate these  
11 needs and ensure that there is sufficient capital  
12 funding to address them, and we join our partners in  
13 the aging services sector in asking for full funding  
14 for all Council initiatives that support older adults  
15 and the restoration of the 1.3 million dollar PEG to  
16 DFTA's geriatric mental health program and, of  
17 course, for the full funding of the annual COLA,  
18 funding for a living wage floor, and forming a wage  
19 and benefit schedule for human service workers. Thank  
20 you.

21           CRYSTAL POND, MODERATOR: Thank you for  
22 your testimony. We will now call on Tara Klein to  
23 testify.

24           SERGEANT POLITE: Starting time.



2 TARA KLEIN: Great. Thank you, Chair  
3 Hudson and Council Members as well as the staff, for  
4 convening today's hearing. My name is Tara Klein, and  
5 I am a Senior Policy Analyst at United Neighborhood  
6 Houses. UNH is a policy and social change  
7 organization that represents 40 New York City  
8 settlement houses. Our members operate Older Adult  
9 Centers, I'm still calling them OACs, sorry, Chair  
10 Hudson, as well as NORCs, home delivery meal  
11 programs, and many other programs.

12 As you've heard today, DFTA currently  
13 receives one of the smallest agency budgets in the  
14 city despite massive growing needs for older adults.  
15 Despite some recent increases, there are some key  
16 areas where we need additional investments to address  
17 new demand, keep pace with inflation, and rectify  
18 years of systemic underinvestment. I'll list them out  
19 here quickly and refer you to my written testimony.

20 First, to echo what Jeanette was just  
21 saying, we're so grateful for the increase to the  
22 home delivered meals program in the preliminary  
23 budget to support reimbursement rates. This has been  
24 needed for so long. Now, to address the coming influx  
25 of home delivered meals clients from the end of

2 recovery meals, we need to invest at least 12.7  
3 million dollars in the home delivered meals program.  
4 That number could be higher depending on the analysis  
5 and the number of clients as we heard about today. We  
6 also need to look at infrastructure and capital needs  
7 for home delivered meals.

8           We've also heard anecdotally during  
9 contract negotiations for the new OACs and NORCs that  
10 some providers were told to do the same amount of  
11 proposed work but for less money by DFTA. We don't  
12 have system-wide numbers on this yet as this is all  
13 very recent, but we're very concerned about this in  
14 that we're setting up an unsuccessful network so  
15 we're expecting that we're likely going to need to  
16 increase some investments in these programs this  
17 year, and we hope to talk more about this at a future  
18 budget hearing.

19           We need to support about 40 million  
20 dollars to build upon the DFTA Community Care Plan  
21 including funding for technology enhancements, case  
22 management, DFTA homecare.

23           SERGEANT POLITE: Time expired.

24

25

2 TARA KLEIN: We need to reverse the PEG  
3 cuts to DFTA including to the geriatric mental health  
4 program.

5 We strongly support all of the Council  
6 Aging initiatives that really provide a large share  
7 of funds to the aging network. Specifically, we  
8 really support the NORC initiative, the Geriatric  
9 Mental Health initiative which is actually under  
10 DOHMH but supports the network, and we're requesting  
11 an increase of 2.6 million dollars to increase  
12 support our seniors.

13 Finally, we want to join in supporting  
14 the Just Pay campaign for all human services workers  
15 to receive a COLA and much-needed raises.

16 Thank you so much for your time.

17 CRYSTAL POND, MODERATOR: Thank you for  
18 your testimony. I just want to remind everyone that  
19 written testimony can be submitted at  
20 [testimony@council.nyc.gov](mailto:testimony@council.nyc.gov) up to 72 hours after the  
21 hearing. I appreciate everybody keeping their  
22 testimony short, and we will be sure to review all of  
23 the written testimony. Next up is Brianna Paden-  
24 Williams and then the next panel will include Judith

2 Castillo, Kimberly George, and Laura Marceca.  
3 Brianna.

4 SERGEANT POLITE: Starting time.

5 BRIANNA PADEN-WILLIAMS: Thank you. Hi,  
6 I'm Brianna Paden-Williams, the Communications and  
7 Policy Associate at LiveOn New York. Thank you for  
8 the opportunity to testify.

9 LiveOn New York's members include more  
10 than 100 community-based non-profits with a number of  
11 our members also testifying today including India  
12 Home, Greenwich House, and SAGE, and they provide  
13 core services which allow all older New Yorkers to  
14 thrive in our community as they age. As a result of  
15 COVID-19, older adults became invisible truly  
16 overnight with the stay-at-home order creating  
17 barriers to access critical community-based services  
18 that enable older adults to age in place. Throughout  
19 the pandemic, the human services sector has stepped  
20 up to provide critical services for older adults and  
21 yet the DFTA budget that supports these services  
22 continues to make up less than 1 percent of the  
23 overall city budget and most recently DFTA has  
24 experienced a budget cut under the PEG including a  
25 1.3 million cut to the geriatric mental health

2 program. Rather than cuts, it's time for the City to  
3 enact a more equitable budget, and LiveOn New York  
4 recommends the following investments.

5           First, the City must Just Pay all  
6 essential workers a livable and equitable wage. We  
7 know human service workers have been the backbone of  
8 the city, particularly during the pandemic, yet are  
9 drastically underpaid, and we're asking the City to  
10 implement a cost of living adjustment for all human  
11 service workers as well as set a living wage of no  
12 less than 21 dollars.

13           Second, we're requesting 12.7 million in  
14 additional funding to meet the home delivered meals  
15 demand that will result from the termination of the  
16 Get Food recovery meal program in June and so as this  
17 program is set to end in June many clients will  
18 continue to need nutritional support and support for  
19 which there is currently no funding to allocate to  
20 provide.

21           Third, we are asking for an additional  
22 2.6 million for the Support Our Seniors initiative as  
23 well as continued full funding for all discretionary  
24 initiatives, and many of these programs rely on the

2 discretionary funding to ensure their communities can  
3 be served. They are...

4 SERGEANT POLITE: Time expired.

5 BRIANNA PADEN-WILLIAMS: Not all aging  
6 services discretionaries are fully funded in the  
7 fiscal year '23 budget. More information can be found  
8 in my written testimony, and thank you for the  
9 opportunity to testify today.

10 CRYSTAL POND, MODERATOR: Thank you for  
11 your testimony. The next panelist will be Judith  
12 Castillo.

13 SERGEANT POLITE: Starting time.

14 JUDITH CASTILLO: Thank you. I want to  
15 thank the Council for this opportunity today. My name  
16 is Judith Castillo, and I'm the Chief Operating  
17 Officer at Encore Community Services. Encore is the  
18 lead home delivered meal contractor for the West Side  
19 of Manhattan where we deliver about 10,000 meals a  
20 week. We also lead the recovery meals contract for  
21 the Bronx, Brooklyn, and Staten Island with our  
22 partners (INAUDIBLE) Farms where we're responsible  
23 for delivering 42,000 meals a week, and we operate  
24 senior centers and senior housing in Midtown  
25 Manhattan.

2           The Department for the Aging remains one  
3 of the most critically underfunded agencies. If  
4 budget is a reflection of priorities, this budget  
5 shows that older adults are not a priority.

6           I want to commend the Commissioner at the  
7 Department for the Aging for its continued advocacy  
8 for increased funding for the agency and,  
9 specifically, for the increased rate for home  
10 delivered meals. 11.58 is a great start, and DFTA is  
11 doing everything they can with the money the city  
12 allocates, but it's simply not enough for the  
13 unfunded mandates. The HDM rate does not address the  
14 capital needs around infrastructure, rent and  
15 occupancy costs, new vehicles, higher transportation  
16 costs, and especially true for a provider like Encore  
17 that operates out of Midtown Manhattan.

18           On the senior center front, case managers  
19 are booked up to 8 weeks out and simply cannot keep  
20 up with the demand. We'd like to see additional  
21 funding for case managers.

22           We're also happy to see that the city is  
23 continuing the Indirect Cost initiative. I did want  
24 to make this Committee aware of some glitches we,  
25 like hundreds of other organizations experienced the

2 first time around. Currently, it's not clear if all  
3 organizations are eligible to apply, especially those  
4 that did not receive the approved ICRs in the first  
5 round. Organizations who don't have the resources to  
6 begin with found themselves denied due to trivial  
7 errors. I'm urging the Committee to look into the  
8 oversight of the ICR application process to ensure  
9 it's equitable and fair. Despite our best attempts to  
10 request technical assistance (INAUDIBLE) around this  
11 initiative, it was simply not productive and,  
12 frankly, not in good faith. Before the initial  
13 deadline, I personally made attempts to...

14 SERGEANT POLITE: Time expired.

15 JUDITH CASTILLO: So while we met the  
16 deadline, communications did not reach us as expected  
17 and, due to a small glitch, we were denied, a blow  
18 that totaled over a million dollars over 3 years to  
19 fund critical support to our programs.

20 In closing, I urge the Committee to look  
21 into the oversight of the ICR process, especially for  
22 those hundreds of organizations that were left out.  
23 Chair Hudson, we look forward to your future visit at  
24 Encore. Thank you.



2 CRYSTAL POND, MODERATOR: Thank you for  
3 your testimony. The next panelist will be Kimberly  
4 George.

5 SERGEANT POLITE: Staring time.

6 CHAIRPERSON HUDSON: Sorry. Can I just ask  
7 a quick question before?

8 CRYSTAL POND, MODERATOR: Of course.

9 CHAIRPERSON HUDSON: Judith, you said you  
10 missed on close to a million in funding. What would  
11 you have down with that money, with the million  
12 dollars, or what services or programs were not able  
13 to be realized with (INAUDIBLE)

14 JUDITH CASTILLO: That would have gone  
15 directly into our infrastructure so everything that  
16 we're talking about that's not funded, new vehicles,  
17 an expanded site for storage, additional meals for  
18 seniors. This would've been all administrative  
19 overhead that could've been redirected into  
20 programming and support our mission and our programs.

21 CHAIRPERSON HUDSON: Okay. Thank you.

22 JUDITH CASTILLO: You're welcome.

23 CRYSTAL POND, MODERATOR: Thank you. The  
24 next panelist will be Kimberly George.

25 SERGEANT POLITE: Starting time.

2 KIMBERLY GEORGE: Hi. Thank you. Thank  
3 you, Chair Hudson and Committee Members, for this  
4 opportunity to present testimony today. I'm Kimberly  
5 George, President and CEO of Project Guardianship.  
6 Project Guardianship was founded 17 years ago as a  
7 social justice initiative of the Vera Institute of  
8 Justice. In partnership with the New York State  
9 Office of Court Administration, Vera launched Project  
10 Guardianship to fill a gap in the guardianship and  
11 elder services safety net for New York City  
12 residents. In 2020, Project Guardianship spun off as  
13 an independent non-profit organization providing  
14 comprehensive court-appointed guardianship services  
15 to hundreds of limited capacity New York City  
16 residents. We serve clients regardless of their  
17 ability to pay and provide services for some of the  
18 most compelling and complex cases in the city. We  
19 also share research and recommendations for a better  
20 guardianship system and advocate for a more equitable  
21 response to providing services for adults in need of  
22 protective arrangements.

23 I don't need to tell this Committee all  
24 the stats on New York City's rapidly aging population  
25 nor that 1/3 of older adults identify as black,

2 Latinx, Asian, or non-white, and the number of older  
3 immigrants statewide is growing at nearly double the  
4 rate the US born older population and that nearly 1  
5 in 7 older New Yorkers is living in poverty. I know  
6 that was already mentioned earlier today. Older low-  
7 income adults are at the center of the housing  
8 affordability and homelessness crisis, especially  
9 older adults of color. These older adults are  
10 disproportionately impacted by abuse, neglect, and  
11 financial exploitation. Despite increased state and  
12 federal investments in care for aging and disable New  
13 Yorkers, too many will be denied the opportunity to  
14 benefit from these programs because they are  
15 physically and cognitively unable to navigate our  
16 complex public benefits and social services. This is  
17 where legal guardianship often..

18 SERGEANT POLITE: Time expires.

19 KIMBERLY GEORGE: Steps in. Non-profit  
20 programs work to secure public benefits, housing,  
21 healthcare, and other support that this population  
22 needs to improve outcomes and promote their safety  
23 and responsibilities. Our clients include older New  
24 Yorkers, those with serious disability, physical  
25 impairments, mental health issues, dementia,

2 substance abuse, traumatic brain injury, and other  
3 conditions. Our model has demonstrated how a good  
4 guardian can prevent institutionalization and keep  
5 people living in their communities. It not only  
6 stimulates local economy by redirecting funding back  
7 into the community, but guardianship also saves  
8 public dollars by decreasing Medicaid spending on  
9 unnecessary hospital and nursing home stays.

10           The Council, I just want to note real  
11 quick, and thank you for the time, has been critical  
12 in supporting us for many years, and we just want to  
13 state that we're grateful for that support and we  
14 hope that as we look forward post pandemic that we  
15 will not only be able to restore our current funding  
16 but by partnering with you, the larger Council, and  
17 the Administration we can shine a greater light on  
18 guardianship and the need for quality guardianship  
19 services citywide, and we hope for your continued  
20 support to make New York City the equitable place  
21 that it strives to be. Thank you very much.

22           CHAIRPERSON HUDSON: Thank you for your  
23 testimony. Sorry, Crystal. Can I jump in? Okay.  
24 Sorry.

2 Judith, I just wanted to mention to you  
3 just really quickly that our Committee staff will  
4 share your ICR concerns with the Committee on  
5 Contracts that oversees MOCS.

6 JUDITH CASTILLO: Thank you, and I'm happy  
7 to answer other questions and provide more details if  
8 you need that.

9 CHAIRPERSON HUDSON: Okay. I think we  
10 probably have your contact information so we can  
11 reach out.

12 JUDITH CASTILLO: Great.

13 CHAIRPERSON HUDSON: Okay. Thanks. Sorry,  
14 Crystal.

15 CRYSTAL POND, MODERATOR: No problem.  
16 Next, we will have Laura Marceca, and then the next  
17 panel will include Lauren Wade, Peter Kempner, and  
18 Shanta Lawson. Laura, you may begin.

19 SERGEANT POLITE: Starting time.

20 LAURA MARCECA: Good afternoon, Chair  
21 Hudson and Members of the City Council Committee on  
22 Aging. My name is Laura Marceca, and I am the  
23 Associate Director of Older Adult Services at  
24 Greenwich House, where we serve about 2,000 adults a  
25 year. I've spent my entire professional life helping

2 New Yorkers age with dignity, and I can honestly say  
3 that I've never seen a challenge more pressing than  
4 our current and rapidly growing need to support aging  
5 in older adults. To be sure, there have been some  
6 recent steps towards rethinking our spaces and  
7 networks of senior-serving organizations. I'm proud  
8 to be with a team at Greenwich House who are building  
9 off current research and evidence in our expansion of  
10 older adult services including a new  
11 intergenerational work and skill development center.  
12 Too many of the investments made have not been  
13 baselined into our city's budget. They do not  
14 actually reflect the needs we see right now, and we  
15 only see that need expanding, particularly if we do  
16 not make some smart investments now. While core needs  
17 includes meals, general case assistance, and housing  
18 and support services, we are seeing a foundation need  
19 to keep older adults better connected in general to  
20 friends and doctors, social services, and the  
21 workforce. 1/4 of New Yorkers ages 60 to 79 do not  
22 have internet access at home, and nearly half a  
23 million older adults are disconnected from the  
24 internet. Additionally, according to a 2017 Pew  
25 Research study, 3/4 of those older than 65 said that

2 they needed someone else to help set up their  
3 electronic devices. The good news is that there are  
4 many groups doing good work to close the older adult  
5 digital divide, Senior Planet, AARP, JCC as well as  
6 Greenwich House and many others, but much more is  
7 needed. More financial supports are needed, and we  
8 have no time to waste.

9 I'm here to ask the Council to do its  
10 part and..

11 SERGEANT POLITE: Time expired.

12 LAURA MARCECA: Technology, social  
13 isolation, and community-based services older adults  
14 need, especially coming out of the pandemic. At  
15 spaces such as our Emerging Workforce Center, we can  
16 help connect older adults to the technology they need  
17 to continue to adopt and to thrive in the changing  
18 work world.

19 Beyond these broad and specific needs, I  
20 need to add that the staff at the Greenwich House and  
21 across the older adult field didn't let our older  
22 residents down during the darkest days. Now with  
23 brighter times ahead, and we believe they are, they  
24 also deserve our support. We hope to see the Council

2 support pay increases for social service employees.

3 Thank you for the opportunity to testify today.

4                   CRYSTAL POND, MODERATOR: Thank you for  
5 your testimony. Next panelist will be Lauren Wade.

6                   SERGEANT POLITE: Starting time.

7                   LAUREN WADE: Hi. Good afternoon. My name  
8 is Lauren Wade, and I am the Assistant Division  
9 Director for Senior Services at Sunnyside Community  
10 Services. Thank you, Chair Hudson, for your  
11 leadership and the support of the entire aging sector  
12 in New York City.

13                   At Sunnyside Community Services, we  
14 envision a diverse, inclusive, and caring community  
15 where all people thrive and reach their fullest  
16 potential, and it's with your partnership that we're  
17 able to fulfill that vision.

18                   For our services for older adults, we  
19 offer a continuum of vital services that help them  
20 remain in their homes through the Center for Active  
21 Older Adults, Friendly Visiting, caregivers, case  
22 management, social adult day programs, homecare, I  
23 could go on and on. We also provide geriatric mental  
24 health, long-term care including Medicaid enrollment,  
25 and all screening referrals and connections for older



2 adult services through our centralized intake at Care  
3 Connections Team. This is in addition to our  
4 providing services for youth and immigrants. Two  
5 years ago, when COVID thrust us into uncertain times,  
6 our teams that include case managers, intake workers,  
7 cooks, drivers, and all human service workers along  
8 our continuum rose to meet that challenge and adapted  
9 how we provided services to continue supporting  
10 thousands. We provided counseling and support groups  
11 via phone, clinical activities to caregivers and  
12 older adults via Zoom. We had staff on site providing  
13 hot food, nonperishables from our pantry, getting PPE  
14 ready for our home health aides, and we were a site  
15 for ongoing COVID testing and vaccines. As we  
16 continue to make investments across New York City  
17 towards recovery, in today's testimony I will  
18 highlight our priority areas that necessitate action  
19 and investments to our human services sector that  
20 together we can continue not to just support the  
21 older adults we serve but those who are going to  
22 serve us.

23                   Number 1, fair pay. I can't think of a  
24 better time to offer testimony advocating on behalf  
25 of overdue investments to the human service sector

2 than during National Social Worker Month. I'd like to  
3 share with you...

4 SERGEANT POLITE: Time expired.

5 LAUREN WADE: I'd like to share with you  
6 the dauntless efforts carried out by human service  
7 professionals at Sunnyside over the past 2 years.  
8 We've received over 5,000 calls from individuals  
9 seeking food, mental health services, case  
10 assistance, homecare, case management through our  
11 centralized intake. Our team of 9 in the Center for  
12 Older Adults connected over 2,500 members to case  
13 assistance, food, and wellness. Years of underfunding  
14 in this sector have resulted in the entire human  
15 services workforce being some of the lowest  
16 compensated workers in New York City's economy. We  
17 support United Neighborhood Houses, LiveOn NY, City  
18 Meals, and other umbrella advocates in the following  
19 investment.

20 Establishing funding and enforcing an  
21 automatic annual cost of living adjustment on all  
22 human service contracts.

23 Two, set a living wage floor of no less  
24 than 21 dollars an hour for all city and state-funded  
25 human service workers, the creation and funding and

2 incorporation of a comprehensive wage and benefit  
3 schedule for government-contracted human service  
4 workers comparable to the salaries made by city and  
5 state employees in the same field.

6           Secondly, investment in combatting hunger  
7 and home delivered meals. In our case management  
8 program, our staff of 18 case managers, 4  
9 supervisors, and more serviced over 2,500 homebound  
10 adults during the pandemic. Food and access to home  
11 health aid were coordinated by our case managers and  
12 help our older adults remain out of the shadows and  
13 aging in place with dignity. We support the following  
14 investments.

15           9.7 million dollars to support continued  
16 growth in demand for home delivered meal program  
17 including recovery meal clients transitioning to  
18 traditional home delivered meals.

19           3 million dollars to support weekend and  
20 holiday home delivered meals not provided by current  
21 contracts.

22           (INAUDIBLE) assess and fund the capital  
23 and infrastructure needs for home delivered meal  
24 providers including meal van purchases, kitchen  
25 investments, and other items.

2           As I close, I want to remind us we hold a  
3 very powerful secret that most don't know, and that  
4 secret is when those aging around us are able to do  
5 so with respect, dignity, and compassion that  
6 everyone deserves they can continue to lead  
7 meaningful, active lives as vibrant individuals  
8 contributing back to their community. Equity for  
9 aging cannot happen without pay equity for every  
10 human service worker who works tirelessly to make  
11 sure all older New Yorkers are supported.

12           Thank you, again, for the opportunity to  
13 testify here on behalf of Sunnyside Community  
14 Services and your continued commitment to our  
15 programs supporting the work and needs of older New  
16 Yorkers. Sorry I went over, but we appreciate you.

17           CRYSTAL POND, MODERATOR: Thank you for  
18 your testimony. The next panelist is Peter Kempner.

19           PETER KEMPNER: Good afternoon. My name is  
20 Peter Kempner, and I am the Legal Director and Senior  
21 Law Project Director at Volunteers of Legal Service,  
22 also known as VOLS. We were formerly known as the  
23 Elderly Project Director but recently changed our  
24 name. Thank you, Chair Hudson and other Members of  
25 the Committee, for allowing us to testify today. For

2 over 20 years, the VOLS Senior Law Project has  
3 provided free legal services to low-income New  
4 Yorkers. We operate a legal hotline, both in-person  
5 and virtual clinics along with so many of the  
6 community partners that we work with that are here at  
7 the hearing today. We also provide Know Your Rights  
8 materials, (INAUDIBLE) educational workshops, and  
9 most importantly provide free direct legal services  
10 to seniors on over 1,600 matters each year. The core  
11 work that we do is the drafting and execution of life  
12 planning documents, which include last wills and  
13 testaments, powers of attorney, healthcare proxies,  
14 living wills, and other advanced directives. We  
15 ensure that our clients have the right plan in place  
16 in the event that they become incapacitated or they  
17 pass away. The critical documents that we draft for  
18 our clients make sure that their wishes are clear and  
19 that those wishes can be carried out by the people  
20 that they love and trust the most. This ensures that  
21 seniors are able to live in the community for as long  
22 as possible and it also helps avoid costly and  
23 intrusive legal proceedings like guardianships, and  
24 as wonderful as Project Guardian is really if we  
25 could have the right plan in place to avoid seniors

2 getting to that point, that is our goal. We make sure  
3 that caregivers are empowered to pay the rent, make  
4 sure that the lights are on. This avoids senior  
5 homelessness and avoids unnecessary placement in  
6 institutions, in nursing homes, and most importantly...

7 SERGEANT POLITE: Time expired.

8 PETER KEMPNER: Intrusive and unnecessary  
9 medical care at the end of life. We should make sure  
10 that seniors are able to express their wishes and  
11 that the care that they're receiving is in sync with  
12 their values and their personal goals.

13 We want to thank the City Council for  
14 supporting our program over the years, and we want to  
15 seek that continued support to ensure that we could  
16 continue to provide these services to low-income New  
17 York City seniors. Thank you so much.

18 CRYSTAL POND, MODERATOR: Thank you for  
19 your testimony. The next panelist is Shanta Lawson,  
20 and the next panel will include Stuart Sherman,  
21 Wendell Walters, and Aaron Rooney. Shanta.

22 SERGEANT POLITE: Time starts now.

23 SHANTA LAWSON: Good afternoon, Chair  
24 Hudson and Members of the Committee. Thank you so  
25 much for the opportunity to testify here today. My

2 name is Shanta Lawson. I serve as the Director of  
3 Education at the Studio Museum in Harlem, an  
4 organization that for 50 years has been the nexus for  
5 artists of African descent, locally, nationally, and  
6 internationally, and it's history is intertwined with  
7 ongoing efforts to increase access to the arts. The  
8 Studio Museum is a proud member of the Cultural  
9 Institutions Group, and we're deeply grateful to  
10 partner with and receive support from the city. At  
11 the time of our founding in 1968, the Studio Museum  
12 sought to make it possible for people in Harlem to  
13 visit a museum without leaving the neighborhood. Our  
14 founders envisioned an institution that would connect  
15 directly with its community and facilitate  
16 experiences with art for all audiences. Throughout  
17 our history, we have welcomed older adults to a  
18 variety of programs including conversations with  
19 curators, scholars, intergenerational dialogue with  
20 youth, gallery discussions with museum educators, and  
21 many more experiences. Since 2010, a cornerstone of  
22 this work has been a partnership with Arts and Minds,  
23 an Uptown organization committed to improving quality  
24 of life for people living with Alzheimer's disease  
25 and other forms of dementia as well as their

2 caregivers through engagement with art. Arts and  
3 Minds programs invite participants to engage in new  
4 ways of experiencing art through dynamic discussions  
5 and art-making workshops. These programs create  
6 positive emotional and cognitive experiences, enhance  
7 verbal and nonverbal communication, reduce isolation  
8 in this community. At the onset of the pandemic, our  
9 work with Arts and Minds shifted entirely online, and  
10 we aimed to mitigate the loss of access to culture  
11 that immediately affected our program participants.  
12 In fiscal '21, we hosted 65 online sessions with each  
13 focusing on a different work of art from the Studio  
14 Museum's collection. Our work as an anchor partner  
15 for Arts and Minds is just one of the ways in which  
16 we regularly create opportunities for meaningful  
17 engagement with art by artists of African descent for  
18 older adults. The city support of its older  
19 residents...

20 SERGEANT POLITE: Time expired.

21 SHANTA LAWSON: Is more urgent than ever  
22 as we respond to the effects of the pandemic and  
23 start to create programming that is acceptable to  
24 all. We recognize that you are making thoughtful  
25 budget decisions as you work to revitalize our city's



2 economy, and I ask you to remember that the pandemic  
3 severely limited and continues to curb access to  
4 culture for older adults, particularly in communities  
5 facing disproportionate health and economic impacts  
6 from COVID-19. The CIGs and cultural community as a  
7 whole serve as points of access, inspiration, and  
8 celebration for all generations of New Yorkers.  
9 Investment from the City in these endeavors will help  
10 us to make culture available to all older adults  
11 living in New York.

12 Thank you, again, for your support of the  
13 cultural community and the opportunity to testify at  
14 this hearing today.

15 CRYSTAL POND, MODERATOR: Thank you for  
16 your testimony. The next panelist is Stuart Sherman.

17 SERGEANT POLITE: Starting time.

18 STUART SHERMAN: Thank you so much, Chair  
19 Hudson and the Committee on Aging, for giving us time  
20 to speak with you today. My name is Stuart Sherman,  
21 and I'm the Senior Staff Attorney at the New York  
22 Legal Assistance Group. I work in the Legal Health  
23 Division, which provides free legal assistance to New  
24 Yorkers who are experiencing health problems and  
25 financial hardship. We have a network of onsite

2 clinics at 36 hospitals across the city including all  
3 public hospitals. I'm here today to discuss a new  
4 project we have developed to address a major unmet  
5 need, the Caregivers Legal Assistance Project. The  
6 need has only grown because of the COVID-19 pandemic.  
7 New York City is home to an estimated 1 million  
8 family caregivers. The burden of caregiving takes an  
9 enormous physical, emotional, and financial toll.  
10 (INAUDIBLE) Caregivers struggle to find support for  
11 their unpaid work. In a 2017 survey by DFTA, unpaid  
12 caregivers consistently cited legal services as one  
13 of their top needs. Yet many of these caregivers,  
14 especially for those older adults, are unable to find  
15 legal services. There are no legal service  
16 organizations in the city or units within  
17 organizations dedicated to serving the needs of  
18 caregivers. In addition, many caregivers don't have  
19 the formal authority to represent their loved ones  
20 and they are unable to retain legal services. Through  
21 our work, we have consistently found that caregivers  
22 for adults without capacity who suffer from  
23 conditions like Alzheimer's and dementia have nowhere  
24 to turn for legal assistance. They often spend hours  
25 fighting with insurers, benefit agencies, pension

2 funds, and banks, precious time they do not have. If  
3 these caregivers had proper legal assistance, they'd  
4 be better able to advocate for their loved ones and  
5 themselves instead of having their efforts frustrated  
6 by bureaucracy and other barriers. Legal services  
7 empower caregivers and help ease their burden by  
8 providing them with access to needed benefits and  
9 services. Legal services can get older adults the  
10 homecare services they need including sufficient  
11 hours to keep them in the community. The Caregiver  
12 Legal Assistance Project will assist caregivers with  
13 immigration matters, housing, public benefits,  
14 disability appeals, insurance disputes, and  
15 healthcare access.

16 SERGEANT POLITE: Time expired.

17 STUART SHERMAN: In addition, it will help  
18 them with employment law matters so they don't get  
19 fired or penalized for their caregiver work. We have  
20 already begun this work with our existing partner  
21 facilities and are seeking now to expand that across  
22 the city. Our hope is to start a pilot project with  
23 existing caregiver service providers in Brooklyn as  
24 well as create a citywide hotline to provide services  
25 and assistance to caregivers so they are able to get

2 the support they need to help those that they love as  
3 well as to keep themselves employed and the respite  
4 they need.

5 We thank you for your time and hope you  
6 can support this new project that we are undertaking.  
7 Thank you.

8 CRYSTAL POND, MODERATOR: Thank you for  
9 your testimony. The next panelist is Wendell Walters.

10 SERGEANT POLITE: Starting time.

11 CRYSTAL POND, MODERATOR: I think we might  
12 be having some technical issues with Wendell Walters.  
13 Let's move on to Aaron Rooney, and we will return  
14 back to Wendell.

15 SERGEANT POLITE: Starting time.

16 AARON ROONEY: Thank you, Council Member  
17 Hudson, for the opportunity to testify. I'm Aaron  
18 Rooney, Associate Deputy Executive Director for  
19 Goddard Riverside and Stanley Isaac Center. Our  
20 programs are located on the west and east sides of  
21 Upper Manhattan. They include Isaac NORC and Older  
22 Adult Center, Goddard Older Adult Center, the  
23 Westside NORC, Lincoln Square Neighborhood Center,  
24 and Taft Senior Center in East Harlem. We reach about  
25 3,800 older adults each year. Many of the NORCs and

2 Older Adult Centers received increases in base  
3 funding with the new RFP. This was a step in the  
4 right direction and we're very grateful, but it did  
5 not go far enough and our programs still increasingly  
6 rely on Council discretionary and citywide  
7 initiatives to ensure quality programming. Throughout  
8 the last 2 years, our work has kept people safe and  
9 connected, and now as a sector we have to figure out  
10 a way to move forward in a reality where choice is  
11 going to be essential, choice between in-person and  
12 virtual services, choice in how people access meals  
13 and food pantry, choice in how to access the  
14 healthcare system, so we look to the City Council to  
15 help us secure the support we need to meet these  
16 challenges and to do that this year through citywide  
17 initiatives, specifically the NORC initiative, Senior  
18 Center Programs and Enhancements, Support our  
19 Seniors, and the Case Management initiative.

20 I'd also like to speak briefly today  
21 about the Taft Senior Center in East Harlem that's  
22 been operated by Isaac Center since January 2020 with  
23 a small contract amendment. In 2 years, it's grown  
24 from 80 participants to now over 400, and we did that  
25 by developing a strong case management focused

2 program with a focus on food security, health and  
3 wellness, housing stability, and socialization, but  
4 the funding has not changed and it is not secure year  
5 to year so we are in need of baseline funding for the  
6 program at Taft. We also that the Council fully fund  
7 our discretionary request for the Taft Senior Center.  
8 That's both the NORC initiative, Senior Center  
9 Program Enhancements, and Support our Seniors. Last  
10 year, we didn't receive any Council support, and we  
11 are in great need of it.

12 SERGEANT POLITE: Time expired.

13 AARON ROONEY: Thank you for your time  
14 today.

15 CRYSTAL POND, MODERATOR: Thank you for  
16 your testimony. We're going to return to Wendell  
17 Walters and then after Wendell, the next panel will  
18 be Peter Chang, MJ Okma, and then Sherrise Palomino,  
19 and that will be the last panel. Wendell.

20 SERGEANT POLITE: Starting time.

21 WENDELL WALTERS: Thank you for the  
22 opportunity to speak with you today. My name is  
23 Wendell Walters. I'm a Senior Policy Associate at the  
24 Osborne Association. For nearly 9 decades, our  
25 organization has been committed to transforming

2 prisons and jails for the people who live in them,  
3 work in them, and visit them. Today, we offer a wide  
4 range of programs with sites in the Bronx, Brooklyn,  
5 Harlem, Buffalo, and Newburgh as well as services at  
6 state prisons and city jails including Rikers Island.  
7 My testimony focuses on the aging population that  
8 often goes unrecognized. I'm speaking of the older  
9 adults returning from incarceration. According to the  
10 state Corrections Department, there are more than  
11 1,000 men and women age 50 and over who leave state  
12 prison and return to New York City each year. These  
13 individuals have unique challenges as they  
14 reintegrate themselves back into our communities. The  
15 City Council recognized this increasingly important  
16 issue and passed a resolution several years ago to  
17 create the Compassion and Assistance for Returning  
18 Elders task force. The task force led by DFTA and  
19 MOCJ including Osborne was charged with compiling a  
20 set of recommendations for reentry support to  
21 previously incarcerated older adults. With great  
22 effort and cooperation, the task force created a list  
23 of recommendations last December. They now sit with  
24 MOCJ and the current administration. We call on the  
25 city to make the report public and to continue the

2 group's effort to implement those recommendations.  
3 Osborne is a leader in the field of elder reentry.  
4 Our Elder Reentry Initiative program provides case  
5 management and support for elders returning to New  
6 York City from jails and state prisons. Since 2017,  
7 ERI has worked with more than 400 elders with a range  
8 of support in the community while maintaining  
9 recidivism rates of less than 2 percent.

10           Finally, as we consider all these  
11 challenges for older adults, we have to think and  
12 talk about age itself. The previously incarcerated  
13 older adult who is 55 years of age and spent many  
14 years, sometimes decades, in state prison have been  
15 subject to a condition in our field accelerated  
16 aging. Poor conditions in prison significantly  
17 advances the aging process. Most of DFTA's  
18 programming requires older adults to be at 60 years  
19 of age. We call on DFTA and the administration to  
20 grant eligibility to this population at the age of  
21 55.

22           SERGEANT POLITE: Time expired.

23           WENDELL WALTERS: Accelerated aging is a  
24 condition that should be recognized by the city when  
25 it comes to providing the services to the aging



2 community of the previously incarcerated. We hope the  
3 City Council will favorably consider our funding  
4 request and recognize the importance of our work with  
5 the aging community that has been affected by  
6 incarceration. The challenges they confront each day  
7 should be addressed by our city, and Osborne is here  
8 to help. Thank you. My full statement will be  
9 submitted for the record.

10           CRYSTAL POND, MODERATOR: Thank you for  
11 your testimony. The next panelist will be Peter  
12 Chang.

13           SERGEANT POLITE: Starting time.

14           PETER CHANG: Thank you, Chair Hudson,  
15 Council Member Caban, Dinowitz, Lee, Schulman,  
16 Richardson Jordan, and Commissioner Cortes-Vazquez. I  
17 apologize if I missed anyone. I just want to  
18 highlight 2 points. During the pandemic and rising  
19 anti-Asian violence, many of our seniors, they were  
20 too anxious to come out and that increased the  
21 isolation, which has led to depression among many of  
22 my seniors so my first ask it that you pass a bill  
23 that DFTA should place a mental health counselor at  
24 every DFTA-funded senior center. I also want to point  
25 out the fact that Asian elderly women have the

2 highest suicide rate among ethnic groups so that's a  
3 very important service for us.

4           The next one I want to talk about, also  
5 during this pandemic because people are (INAUDIBLE)  
6 home, that led to a lot of friction and also led to  
7 elder abuse. Elder abuse is an issue among Asian-  
8 Americans. Although it is taboo, it is swept under  
9 the rug and people don't want to talk about it.  
10 Nonetheless, from our experience, that is quite an  
11 important issue. Currently, DFTA has Elder Justice  
12 RFP, and it gives 7 agencies for the whole New York  
13 City, that means each agency will have to serve more  
14 than 1 million people. That is obviously inadequate,  
15 and I sincerely hope that DFTA and City Council will  
16 consider to increase funding for this very important  
17 project.

18           Thank you very much for giving me the  
19 opportunity to testify, and I wish you a good  
20 evening.

21           CRYSTAL POND, MODERATOR: Thank you. Next  
22 panelist is MJ Okma.

23           SERGEANT POLITE: Starting time.

24           MJ OKMA: Good afternoon, Chair Hudson and  
25 Members of the Committee on Aging. My name is MJ Okma

2 with SAGE, the country's first and largest  
3 organization dedicated to improving the lives of  
4 LGBTQ+ older people. We provide social services and  
5 community-building programs through a network of 6  
6 Older Adult Centers across the city along with  
7 virtual programming and services for homebound  
8 elders. SAGE also serves as the on-site service  
9 provider in New York's first LGBTQ+ welcoming elder  
10 housing developments located in Brooklyn and the  
11 Bronx which made history for our city when they  
12 opened in 2020 and 2021 respectively. LGBTQ+ elders  
13 are invisible, disconnected from services, and  
14 severely isolated as they are far more likely to live  
15 alone and less likely to rely on adult children or  
16 other family members for informal caregiving. For  
17 many of these elders in New York, SAGE is their  
18 lifeline, and it is because of them I'm here today to  
19 ask for the City Council's continued support under  
20 the LGBTQ Senior Services in Every Borough initiative  
21 and other vital citywide and Speaker initiatives that  
22 support LGBTQ+ and HIV-affected older New Yorkers.  
23 SAGE has seen a groundswell in demand for our  
24 services over the past several years, and this is due  
25 to a variety of factors including the disproportional

2 impact COVID-19 has had on LGBTQ+ elders, wider  
3 access to services under a hybrid virtual and in-  
4 person model, and the increased needs of low-income  
5 elders in and around our recently opened housing  
6 developments and their co-located SAGE centers. The  
7 programming and services we provide are made possible  
8 with the support of the LGBTQ Senior Services in  
9 Every Borough initiative. Historically, the Brooklyn  
10 allocation of this funding has supported the SAGE-  
11 GRIOT Center, which is a partnership between SAGE and  
12 GRIOT Circle, New York City's only community-based  
13 organization specifically serving LGBTQ+ elders of  
14 color. Now with the recent opening of the SAGE Center  
15 of Brooklyn in Council Member Hudson's district at  
16 the Stonewall House, there's a rapidly growing demand  
17 for services among this population. This can be  
18 addressed with a modest enhancement of 300,000 to the  
19 initiative to restore SAGE's funding under this  
20 initiative and allow GRIOT Circle to independently  
21 apply...

22 SERGEANT POLITE: Time expired.

23 MJ OKMA: Funding for their services. More  
24 details on this and a list of other initiatives that  
25 SAGE is seeking a restoration of funding under can be

2 found in my written testimony. Thank you so much for  
3 this opportunity.

4 CRYSTAL POND, MODERATOR: Thank you for  
5 your testimony. The next panelist is Sherrise  
6 Palomino.

7 SERGEANT POLITE: Starting time.

8 SHERRISE PALOMINO: Good afternoon. My  
9 name is Sherrise Palomino, and I'm the Director of  
10 Advocacy and Programs at New Yorkers for Parks. We  
11 are a founding member of the Play Fair Coalition,  
12 which includes over 400 organizations across the 5  
13 boroughs. Thank you to the Committee on Aging for the  
14 opportunity to speak about the value of our city's  
15 parks and recreation centers on seniors. I also want  
16 to thank Chair Crystal Hudson for her leadership.  
17 Members of this Committee have a unique opportunity  
18 to push for adequate funding for our park system as  
19 it is a meaningful component of supporting New York  
20 City's seniors. The United States Center for Disease  
21 Control and Prevention recommends that older adults  
22 get 30 minutes of moderate exercise 5 days a week.  
23 Our parks and recreation centers mean health equity  
24 access for our seniors. Parks are critical  
25 infrastructure that should be a driver of social

2 equity. Many non-profit partners offer free  
3 programming and social services to seniors in parks  
4 and recreation centers. The New York City Parks  
5 Department operates and maintains 59 recreation  
6 centers across the city to serve a population of over  
7 1 million seniors. Of the 59 community board  
8 districts, 26 don't have a New York City Parks  
9 recreation center. These recreation centers provide  
10 critical opportunities for seniors' physical health  
11 and mental health and a space for seniors to  
12 socialize and be valued. While New York City's  
13 recreation centers are essential to seniors' overall  
14 wellbeing and longevity, they are also chronically  
15 understaffed and badly in need of repairs with  
16 roughly 1/3 of them closed at any given time. We are  
17 overdue for transformative investment in our parks  
18 system. One percent of the city budget for parks  
19 could ensure that recreation centers are fully  
20 staffed and functioning to provide the programming  
21 that seniors and family alike need. This is one of  
22 the many reasons why NY4P and the Play Fair Coalition  
23 are calling for an increase in the Parks budget to 1  
24 percent of the city services. Thank you.

2                   CRYSTAL POND, MODERATOR: Thank you for  
3 your testimony. At this time, if your name has not  
4 been called and you wish to testify, please raise  
5 your hand using the Zoom raise hand function.

6                   Okay. Chair, we have concluded public  
7 testimony for this hearing. I will now turn it back  
8 to you for closing remarks.

9                   CHAIRPERSON HUDSON: Thank you so much,  
10 Crystal, and thank you to all of the panelists for  
11 your testimonies today. These are all of the programs  
12 and services and resources that we need to continue  
13 supporting, and I really appreciate your patience and  
14 your time with us today for the last 3 hours and 10  
15 minutes, especially to those of you who are still on  
16 the line. Thanks, again, to the Committee staff and  
17 to my staff, to the Sergeants-at-Arms, and everyone  
18 for making this hearing possible. I wish everyone a  
19 great evening, and thank you again. This concludes  
20 the hearing. [GAVEL]

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1 COMMITTEE ON AGING

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C E R T I F I C A T E

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



Date May 5, 2022