CITY COUNCIL
CITY OF NEW YORK

----- X

TRANSCRIPT OF THE MINUTES

Of the

COMMITTEE ON GENERAL WELFARE

September 13, 2022 Start: 1:17 p.m. Recess: 5:01 p.m.

HELD AT: Council Chambers-City Hall

B E F O R E: Diana Ayala,

Chairperson

COUNCIL MEMBERS:

Tiffany Cabán
Crystal Hudson
Linda Lee
Chi A. Ossé
Lincoln Restler
Kevin C. Riley

Althea V. Stevens

Sandra Ung

Nantasha M. Williams

Erik Bottcher Gale A. Brewer

APPEARANCES

Marricka Scott-McFadden

Deputy Commissioner for Intergovernmental and

Legislative Affairs-Department of Social Services

Molly Park, First Deputy Commissioner, Department of Homeless Services

Christine Quinn President and CEO of WIN, Women in Need

Deborah Berkman Coordinating Attorney of the Shelter Advocacy Initiative at the New York Legal Assistance Group or NYLAG

Robert Desir Staff Attorney with the Legal Aid Society

Nicole McVinua
Director of Policy at Urban Pathways

Eric Lee
Director of Policy and Planning for Homeless
Services United

Jacqueline Samone
Policy Director at the Coalition for the Homeless

Amy Blumsack Director of Organizing and Policy at Neighbors Together

A P P E A R A N C E S (CONT.)

Juan Diaz Policy and Advocacy Associate at Citizens Committee for Children

Sara Wilson
Disabled and a Former Shelter Resident

Sharifah Harvey Currently experiencing homelessness

Milton Perez
Member of Vocal New York Homeless Union

Douglas Powell Disabled

James Lee Been in the DHS Shelter Since December of 2021

Alexandra Dougherty Senior Staff Attorney and Policy Counsel at the Civil Justice Practice at Brooklyn Defender Services

Patrick Boyle
Assistant Vice President with Public Policy with
Volunteers of America

Kenisha Atkinson In Favor of Intro. 92

Sara Newman Director of Organizing for the Open Hearts Initiative

A P P E A R A N C E S (CONT.)

Jonathan Gaffney Housing Campaign Manager here with Neighbors Together

Mimbeu Oshagara(SP?)
Paraplegic Paralyzed from the Chest Down

Nora McCarthy
Director and Co-Founder of the New York City
Family Policy Project

Helen Strom
Benefits and Homeless Advocacy Director at the
Safety Net Project at Urban Justice

Katrina Corbell
Experienced shelter stay

Towaki Komatsu

Kimberly Blair Director of Public Policy and Advocacy for the National Alliance on Mental Illness of New York City or NAMNYC

Scott Hutchins Vocal and Neighbors Together

COMMITTEE ON GENERAL WELFARE

2.2

SERGEANT AT ARMS: This is a sound check for the Committee on General Welfare. Today's date is September 13, 2022, being recorded by Danny Wang in the Chambers.

SERGEANT AT ARMS: And once again, good afternoon and welcome to the Committee on General Welfare. At this time, we ask you please place your phones on vibrate or silent. Thank you for your cooperation. Chair, we are ready to begin.

CHAIRPERSON AYALA: [GAVEL] Good afternoon every one, my name is Diana Ayala, and I am the Deputy Speaker of the New York City Council and Chair of the General Welfare Committee. I'd like to begin by thanking everyone for joining us this afternoon.

Today, our Committee is holding a hearing on 11 bills. Intro. 92, which I have sponsored along with Intro. 522 sponsored by Council Member Bottcher.

Intro.'s 513 and 132 sponsored by Council Member Ung.

Intro. 421 sponsored by Council Member Riley, Intro.

229 sponsored by Council Member Cabán, Intro.'s 431 and 124 sponsored by Council Member Salamanca.

Intro. 276 sponsored by Council Member Ossé, Intro.

190 sponsored by Public Advocate Williams, Intro. 108

sponsored by Council Member Holden.

2.2

2.3

Since many of the sponsors of these pieces of legislation are here to speak about their respective bills. I will not get into specific details of each. Instead, I want to uplift the fact that we are here to discuss these bills because our homeless shelter system in New York City is broken.

We need to find ways to make the system run as efficiently and effectively as possible for some of our most marginalized population. And what we have seen, especially in the last few months is that there is a lot of work yet to be done.

These bills include solutions for how we can close gaps in the system at large including my bill Intro. 92, which would create an advisory board for accessibility of shelters. We have heard anecdotally of clients in the DHS shelter system who have a disability, being placed in shelters where there is no working elevator, and they have no way of getting to their bed. This is unacceptable and just last week; we saw what occurred at the Bedford Atlantic Armory between a recent migrant who is an asylum seeker and a DHS shelter police officer. What are we going to do to improve conditions in our shelters including client safety?

The legislation that we are hearing today includes several bills that require training, so that the city can improve client staff relationships and effectively de-escalate situations that call for a trauma informed approach.

Over the last few weeks and at our last Committee hearing, we also heard about so many of the issues with shelter intake, especially for families with children at PATH.

Today, we are hearing several bills that address how we can ensure a smoother intake process including empowering community-based nonprofit organizations to conduct intake. The bills we are hearing today also include bills that will call for increased mental health services among shelter clients and reduce barriers to accessing permanent housing by making City FHEPS rental assistance vouchers more usable in practice. If we truly want to reduce the challenges of the city's overburdened shelter system, we need to have more conversations about how the system operates on the front end and on the back end.

Today, in hearing these bills, we are seeking to have these nuance conversation. I want to thank the Administration, the advocates, legal service

2.2

2.3

providers, volunteers and any individuals with lived experience who have taken the time to join us. At this time, I would like to acknowledge my colleagues who are already here today, Council Members Riley, Cabán, Lee, Ossé, Bottcher, oh, did I miss anyone? Yeah, I think I have everyone. Uhm, and I would also like to thank my Committee staff who worked to prepare this hearing Aminta Kilawan, Senior Counsel, David Romero Counsel, Cristy Dwyer, Senior Legislative Policy Analyst, Julia Haramis, Senior Finance Analyst, Rose Martinez, Assistant Deputy Director, Nicholas Montalbano, Senior Data Scientist and my staff [INAUDIBLE 4:21] Deputy Chief of Staff.

I will now turn it over to the sponsors of the bills that we are hearing today to give brief remarks. We will start with Council Member Bottcher.

COUNCIL MEMBER BOTTCHER: Thank you Deputy

Speaker Ayala. I am really grateful for this hearing today and for your co-sponsorship of our bill and for your leadership on this and so many other issues for many years. I also want to thank my prime co-sponsors Chi Ossé and Carlina Rivera and the 35

Council Members who have signed on to cosponsor

Intro. 522. We are here on behalf of the over 10,500

families including 17,000 children who slept in New York City shelters last night. We're here because families deserve mental healthcare too and I'm so excited that our legislation that will help ensure that they get that care, Intro. 522 is getting a hearing today.

Intro. 522 would require mental health professionals to be made available in each family shelter and for the Department of Homeless Services to provide onsite mental health services. The bill would require DHS to maintain a ratio of at least one full time mental health professional for up to 50 families with children and it would require DHS to annually report on these services to the Mayor and the Speaker and publicly.

I say our bill, because this bill is the result of a collaborative effort between the City Council and direct service providers. Women in need WIN and their CEO Cristine Quin were instrumental in the creation of this bill. I actually attended a panel discussion earlier in the year when where the lack of mental health services in shelters was identified as a major issue facing families.

2.2

2.3

_

a

want to hear from Council Member Cabán.

And you know a lot of times at these panel discussions, there's lots of notes taken but not necessarily a lot of follow up but in the weeks and months that followed, we developed this legislation to address this critical issue.

I talk a lot about why this issue is personal to me. I am someone who got mental health care. When I was in high school, I spent a month in a mental health hospital upstate after a series of suicide attempts and that health care is why I'm here today.

But that kind of mental health care is not available to most people. It's just not.

Particularly if you are a person of color in this country, a person living near or below the poverty line and especially if you're a person living in shelter and that's wrong and that's why we're here today. I really look forward to this hearing and I want to thank the Adams administration folks here for devoting your lives to this important cause and for all you do and for working with us on this legislation. And thank you to Deputy Speaker Ayala and all my colleagues.

CHAIRPERSON AYALA: Thank you Council Member.

2.2

2.3

COUNCIL MEMBER CABAN: Thank you Chair and thank you to the Committee Staff and for all the folks who are here. I am so excited that today's agenda includes Intro. 229, which I've introduced in partnership with Chair Ayala. When the Department of Homeless Services, DHS deems a New Yorker eligible for a housing voucher to rent an apartment, they receive a so-called shopping letter that identifies the maximum rent a recipient can pay based on household size and income level and unfortunately, this maximum rent often includes utility fees. And it's forcing many voucher recipients to stay in our shelter system for much longer than they should.

And this bill will eliminate the utility allowance from the equation. Move people from shelter, housing, into permanent housing more quickly and get us closer to a city where comfortable, reliable housing is treated as a basic human right, not a wealth acquisition scheme for developers and landlords.

And so, thank you to advocates that have worked with our office on this bill and to all of you that have taken the time to give us feedback today and I will pass it back to you Chair.

2.2

2.3

2 CHAIRPERSON AYALA: Thank you Council Member. We will now hear from Council Member Ossé.

COUNCIL MEMBER OSSÈ: Thank you Chair and Deputy Speaker. Homelessness is a trauma. I think all of us know that in this room and I think that's why we're all here doing the work that we are doing with these various pieces of legislation.

According to the Substance Abuse and Mental Health Services Administration, people experiencing homelessness have to deal with a multitude of challenges. Such as loss of home, instability and adjusting to shelter life. On top of this individuals and families experiencing homelessness also experience other forms of trauma, such as domestic violence, child abuse, sexual abuse or growing up in poverty in and of itself.

When people are experiencing trauma, they need to be met with care, compassion and understanding, especially from the people who are supposed to help them get back on their feet. Under Intro. 276, my bill that I'm having a hearing on, that we're having a hearing on here today, the Department of Homeless Services will be required to provide their staff with trainings on techniques to improve professionalism,

2.2

2.3

understanding.

increase cultural sensitivity, de-escalate conflict
and use trauma informed theory. With homelessness on
the rise because of an affordable housing crisis and
an influx of asylees staying in our shelter system,
we need to ensure that all individuals and families
who are experiencing a form of homelessness in our
city are addressed with care, compassion and

I've said it before and I'll say it again, you know we often talk about homelessness and mental illness as a homeless problem or a mental illness problem, but I see it as a problem of New York City government, a failure of New York City government and that's why we are all taking the steps here today with these various pieces of legislation.

Now more than ever, we need to pass my bill like Intro. 26, 276 to ensure that we get individuals and families the resources and services they need while treating them with dignity and respect. Thank you Chair.

CHAIRPERSON AYALA: Thank you. We'll now hear from Council Member Riley.

COUNCIL MEMBER RILEY: Thank you Chair Ayala.

Adequate encompassing data, reporting as key to

1

2

4

5

6

7

8

9

10

1112

13

14

15

16

17

18

19

20

21

22

23

24

25

identifying areas of opportunity within our city infrastructure. Intro. 421 will require the Department of Homeless Services to produce regular reporting on families with children in homeless shelters given more insight to identify the needs of New York families. Not only does it provide further data transparency in our shelter system, but the extent of these reports will provide a further look into expanding our resources and services to uplift these families. Having access to the total numbers of families with children entering the shelter system, their average length of stay and the total number of families leaving the shelter to permanent housing can pinpoint the individualized needs of families placed in the shelters.

This legislation would monitor the school enrollment and attendance with children living in shelters, empowering our New York City schools to provide a supportive, learning experience and ensure that these students have the tools that they need to succeed in spite of challenges their families may be facing.

As a city, we must protect New York families, prevent them from entering the shelter system but

also creating a sustainable plan that helps them get out. I encourage the support of Intro. 421, which would add an adequately expanded, preventive and restorative services such as long-term family planning, financial building and personal, professional development.

Importantly to effectively address the crisis of homelessness in New York City, we must continue to understand the ends and outs of the shelter system, especially when it pertains to our youth or the future of our communities. This legislation seeks to provide a foundation to mobilize the equity, accessibility and efficiency of the resources due to the Department of Homeless Service. I would like to thank Chair Ayala for signing onto this bill, Council Member Louis, Council Member Nurse, Council Member Krishnan, Abreu, Velázquez and Williams and I encourage the rest of my colleagues to sign on as well. Thank you.

CHAIRPERSON AYALA: Thank you. I will now turn it over to Committee Counsel David Romero to administer the oath to witnesses from the Administration.

2.2

2.3

COMMITTEE COUNSEL: We are now going to call on
members of the Administration Marricka Scott
McFadden, Deputy Commissioner for Intergovernmental
and Legislative Affairs, Department of Social
Services and Molly Park, First Deputy Commissioner,
Department of Homeless Services.

Will you please raise your right hand. Do you affirm to tell the truth, the whole truth and nothing but the truth before this Committee and to respond honestly to Council Member questions?

MARRICKA SCOTT-MCFADDEN: I do.

MOLLY PARK: I do.

2.2

2.3

COMMITTEE COUNSEL: Thank you. You may begin when ready.

MARRICKA SCOTT-MCFADDEN: Good morning, I want to thank the General Welfare Committee and Deputy

Speaker Ayala for holding today's hearing and the opportunity to testify.

My name is Marricka Scott-McFadden, and I am the Deputy Commissioner for Intergovernmental and Legislative Affairs at the Department of Social Services, and I am joined by my colleague Molly Park, First Deputy Commissioner at the Department of Homeless Services.

16

17

18

19

20

21

2.2

2.3

24

25

conversation.

2 Today's hearing will focus on several bills 3 impacting DSS, the Human Resources Administration HRA and Department of Homeless Services DHS. We look 4 forward to discussing these proposals today and better understanding their intent. Before we start, 6 7 I want to emphasize that it is our priority to ensure clients have access to the services they need, 8 however, many of these proposals are duplicative. ask that this Committee seriously consider the cost, 10 11 programmatic and staffing impacts these bills would 12 have on our system as we discuss them today, and to keep in mind the many reforms we've implemented to 13 14 better serve New Yorkers in need. Moreover, several 15 of these bills are still being reviewed by our legal

Intro. 522 would require mental health professionals to be made available in families with children shelters for DHS to report on the provision of such services. While the intent seems helpful, we have several concerns about this proposal. First, implementing the bill would be extremely costly as it requires hiring a significant number of mental health professionals. Additionally, given recent national

teams. With that in mind, we look forward to today's

shortages of mental health professionals, it could be difficult to comply with the bills requirement at any

4 price point.

2.2

2.3

In addition, DHS already provides social work professionals in family shelters as part of the shelter model budget. These professionals conduct biopsychosocial evaluations and make referrals to other professionals when appropriate.

Most importantly, given that families will be transitioning from shelter, it would also be more effective to refer them to services in the community. Lastly, the reporting requirements would be burdensome to the administration given the absence of resources included in the legislation. We look forward to speaking with the sponsor to further discuss these proposals.

Introductions 132 and 513 would represent

tremendous challenges for the agency. Intro. 132

would require DHS to establish additional intake

centers for families with children in boroughs

without existing intake centers. As last stated by

our Commissioner to this Committee, this proposal

would have significant costs to the city, an

important factor that this bill fails to thoroughly

consider. DHS opened the Prevention Assistance and
Temporary Housing, PATH, intake facility after
revamping its intake and eligibility protocol to
improve and expedite the processing of applications

and provision of conditional placements for families

7 | into temporary emergency housing.

1

8

9

10

11

12

13

14

15

16

17

18

19

20

21

2.2

2.3

24

25

Our centralized shelter intake was specifically designed and built for families with children and allows for consistent screening of critical factors and assessments for conditions related to medical needs, mental health, substance use, adult and child protective services, and domestic violence. A significant issue in the families with children population. Moreover, centralization fosters the continuity of services by utilizing interagency linkages such as with the Department of Education, Administration of Children's Services and others. Decentralizing the intake process loses the economies of scale built over time. Dilutes the safequards in place for vulnerable families and will slow the process of placing families in shelter.

Related to shelter intake, Intro. 513 would require DHS to report to the feasibility of partnering with community-based nonprofit

organizations to accept and process applications for

1

2

8

10

11

12

13

14

15

16

17

18

19

20

21

2.2

2.3

24

25

3 shelter intake for families with children. We have

4 several concerns about the proposals in this bill.

5 As noted above, there are significant service

6 benefits with a consolidated intake process. In

7 | addition, devolving such a critical and meticulous

process to community organizations could result in

9 families receiving inconsistent services.

Lastly, there could be client privacy and quality of service concerns. The fact is that would take substantial resources and funding to oversee and execute by DHS.

Intro. 92 would require DHS to create an accessibility advisory board on issues related to accessibility in city shelters. Our agency has concerns regarding this proposal as accessibility is currently governed by the Butler consent decree and DHS is following this process. We look forward to discussing with the sponsor to understand the full intent of this bill.

Intro. 190 would require DHS to produce a homeless bill of rights to inform New Yorkers experiencing homelessness about their rights and services available to them. DHS already ensures our

clients experiencing homelessness are aware of
services available to them and their rights, and we
work to communicate this at several touchpoints
across our system. We are open to the bills
proposals, and we look forward to working with the

7 sponsor to explore implementation.

2.2

2.3

Introduction 431 and 276, would require DHS to conduct customer service training and report on this training. The requirements in these two bills are duplicative, as they present similar training topics. DHS conducts a series of fundamental courses focused on client engagement to ensure our staff and providers provide New Yorkers with the upmost care, compassion and professionalism. We look forward to working with the sponsors to further understand these proposals.

Introductions 421 and 108 would introduce new reporting requirements for DSS-DHS. As previously mentioned to the Council, we value the importance of transparency and accountability that our agency reporting brings to our discussions with the Council and public. However, we want to emphasize the significant cost and resources it takes to produce reports, which is why we want to stress the

importance of streamlining reporting requirements to

avoid duplication and wasted resources.

With that said, we have significant concerns about both reporting bills. Introduction 421 would require an onerous amount of reporting regarding our families with children shelter population. First, the reporting requirements duplicates some of the

reporting requirements of the revamped Local Law 37

of 2011, as amended by Local Law 79 of 2022.

Moreover, some of the level and granularity of data being requested by this bill does not exist so it would create administrative burden on the agency. The bill also requires data coordination with other city agencies such as Department of Education and Administration for Children Services, which raises privacy concerns about confidentiality — confidential information particularly for minors and the requirement for parental consent. The monthly reporting requirements are unrealistic given the concerns just mentioned.

Introduction 108 requires reporting that would be duplicative of existing metrics provided by the agency and an administrative burden to carry out in the manner proposed by the bill. We look forward to

further understanding the full intent of this bill with the sponsor.

2.2

2.3

Introduction 124 is in relation to designating housing specialists in HRA and DHS shelters. DSS, HRA, DHS staff and providers work each day to transition and place New Yorkers in need into permanent housing and this critical work is done through the many case workers and housing staff embedded throughout our HRA and DHS shelters, or who visit the sites regularly. All DHS shelters are already funded to provide housing specialists on-site as part of the model budget.

Given this, we find that the requirement of this bill would be duplicative of our current work and cost considerations must be taken into account for any additional requirements placed on the agency. We look forward to further understanding the bill's intent.

Introduction 229 is in relation to monthly rental assistance payments for households with rental assistance vouchers. We believe that the Council intends to protect tenants, but we have significant concerns about the drafting of this bill, as we believe it could actually be harmful to tenants for

several reasons. City FHEPS, like Section 8, is
based on the Fair Market Rent, which is the maximum
the program can pay if all utilities are covered in

the rent.

2.2

2.3

If the agency if forced to pay the landlords the full rent regardless of what utilities they offer and in most New York City units the tenant is responsible for paying the utilities, then we will not be able to subsidize the cost of utilities for tenants.

When DSS has finished building in modifications to our subsidy payment system, we intend to ensure that the utility allowance is provided to the tenant. Either as part of the public assistance benefit or as a reduction of their rent contribution. We would not be able to pass the utility allowance to the tenants who pay for their own utilities because it would have been provided to the landlord.

Additionally, we are finally at a place where all city subsidies are mostly aligned with each other, and landlords cannot discriminate between voucher holders. If City FHEPS is not deducting utility allowance from the landlord, each Section 8 voucher holders will have a more difficult time securing

2

3

4

5

6

7

8

10

11

12

13

14

15

16

17

18

19

20

21

2.2

2.3

24

housing. We believe we share the same goal and look forward to discussing further with the Council.

We appreciate the opportunity to provide feedback of these proposals and we look forward to working with the Council to serve New Yorkers in need. you and I look forward to any questions you might have today.

CHAIRPERSON AYALA: I want to recognize that we've been joined by Council Members Restler, Stevens, Williams and Hudson and we've also been joined by Public Advocate Jumaane Williams, who I believe is going to give a statement.

JUMAANE WILLIAMS: Thank you so much Madam Chair. As mentioned, my name is Jumaane Williams, Public Advocate for the City of New York. I want to thank the Chair and the members of the Committee on General Welfare for holding this hearing.

First, of course, I always want to make sure we mention in the issues of housing and homelessness, the number one need here is actual housing that people can afford. My office is going to continue to work on a plan. I started when I was running across the state to help build and preserve moving units,

where people would pay no more than 30 percent of

their rent in income.

But with that said, in the winter of 2020, there were nearly 80,000 people unhoused in New York City, the highest number in the city's history. In June 2022, there were over 50,000 people including over one-third of children sleeping each night in New York's municipal homeless shelter. The city's current efforts to combat homelessness are clearly not working. The system as it stands now is at best inefficient and at worst in many places, inhumane.

We know the solution to homelessness is not more shelters, it is more permanent, affordable housing for adults, young people and families experiencing homelessness. The path to housing assistance is filled with red tape, confusing and sometimes conflicting requirements, stress and suffering.

For people with disabilities, mental health or other medical needs and people whose first language is not English, the process is especially difficult. While some experiencing homelessness maybe lucky enough to have an advocate or social worker to guide them through the shelter system, most are expected to navigate their process on their own.

2

3

4

6

7

8

10

11

12

13

14

15

16

17

18

19

20

21

2.2

2.3

24

25

For these reasons, I have introduced Intro. 0190, which would require the Department of Homeless Services to produce a homeless bill of rights. This document, which DHS would be required to make available on their website and to shelters and social service offices for distribution to people experiencing homelessness, would inform people experiencing homelessness about their rights and services available to them. This includes but is not limited to: The right to shelter; access to legal services; the right to request an interpreter and translation services; how to file a complaint, educational options for children; the right to vote; housing and financial assistance; protections against discrimination; the right to request accommodations for disability.

In addition, the document would include the people, the right of people in shelters, including the right to meet privately with advocates and legal representatives be placed in a room with a person who identifies as the same gender, a private room with a lock for families experiencing homelessness a secure locker for single adults experiencing homelessness, access to bathrooms, access to washing machines and

2.2

dryers or money for laundry, access to space and equipment to bathe and change babies and small children, meals and accommodations for dietary needs and restrictions.

The legislation is vital, as it brings together already existing rights under one section in the city's Administrative Code, and it codifies existing case law. The congregation and posting of rights enable people experiencing homelessness and advocates to easily access and be informed of their rights.

I want to thank my colleagues in the City Council who have co-sponsored this critical pieces of legislation, and I look forward to working with the Council and the Committee on General Welfare to end homelessness and achieve true housing equity in our city and I want to thank you for your comments and look forward to working with you on the bill. Good to see you again.

CHAIRPERSON AYALA: Thank you. So, we're going to be hearing — I think the fairest way to do this is we want to be hearing from the Council Members who have introduced legislation today but considering how we have a little special guest here, I'm not sure if the Public Advocate has some questions that he wanted

_

to ask. And you're only getting this privilege because of the baby.

PUBLIC ADVOCATE WILLIAMS: I need to bring him often. Thank you, I appreciate that. Good to see you.

CHAIRPERSON AYALA: Good to see you.

PUBLIC ADVOCATE WILLIAMS: So, I heard that the interest in working with me on the bill. I also heard mention that you already do some of the things. And so, as I mentioned, our objective here is not to create new laws, it's to try to put everything in one place because what we find is people don't always understand their rights even though they are there and even though parts of them may being informed.

So, is it something they think can be worked on?

MARRICKA SCOTT-MCFADDEN: Yes, as stated in our

testimony, DSS performs many of the tasks that you've

outlined and we focus on the touchpoints throughout

the system, actually making sure that our clients are

aware of their rights and so, we welcome further

discussion.

PUBLIC ADVOCATE WILLIAMS: Alright, I just want — I always try to be clear because sometimes further discussion is never the sole — do you think we can

2.2

2.3

come together and get a bill of rights that's like a

one thing that we can be giving two folks who are

unfortunately experiencing homelessness?

MARRICKA SCOTT-MCFADDEN: I think it's fair that even though it may be a nebulous statement, we really want to work with you on this because we feel that we are already doing it.

PUBLIC ADVOCATE WILLIAMS: Okay, that sounds kind of no-ish, but I feel like there is things being done but they're not happening all in one place and we're trying to make it so that people can have access to the stuff in one place without searching around. But uhm, I will pause now and hopefully we will continue the conversation so we can — I guess we can speak the language that we're both trying to say at this moment and time and be on the same page. Thank you.

CHAIRPERSON AYALA: Thank you. I have just a few questions and then I'm going to turn it over to the Council Members but there were some things that were stated in briefing. Uhm, so regarding Intro. 92, understanding that the butler decree, consent decree really dictates right, the way that we look at the design right of our shelter system in a way that meets the needs of individuals with disabilities.

2.2

2.3

The bill kind of came from conversations with primarily individuals living at Wards Island and complaints of individuals being placed in shelter settings where there had to be you know, elevators were necessary where elevators sometimes were not functional. Individuals that maybe have power operated wheelchairs and had no access to outlets because there were a minimal numbers of outlets in the facility. Individuals who had difficulty getting in and out of the bathroom because of the way that the door opens is very important right, you know if you're a person using a wheelchair.

This came up a couple of years ago. We had a discussion under then Council Member Levin, and you know we, obviously this is kind of the follow up to that. But I wanted to hear like, if an individual that is a wheelchair user is coming in and it's placed on the third floor, that's a need not a reasonable accommodation.

MARRICKA SCOTT-MCFADDEN: Thank you. Thank you for your question. I want to just affirm that the butler consent decree is a multiyear statement and therefore it does speak to ADA accessibility, and we are working within the confines of that decree that

2.2

2.3

being set out around my colleague to speak to some of the specifics that you just talked about.

MOLLY PARK: Thank you and thank you to the

Council for having us here today. I'm Molly Park,

I'm the First Deputy Commissioner. I can't obviously

speak to the individual cases, but in general, when

an individual comes in, an individual or family comes

in to intake, there is an assessment process about

whether or not they have specific physical needs that

would dictate their shelter placement. If something

is what we all reasonable and apparent, so you know

somebody in a wheelchair, there's no paperwork

necessary, they should absolutely be assigned to a

site that is accessible.

If they have a need that is not reasonable and apparent, that we can't just witness, there is a formal, reasonable, accommodation process. Peoples circumstances can certainly change after they come in through intake. They can file for a reasonable accommodation process at any point and time. We do, there are posters about reasonable accommodation and how to file a reasonable accommodation in all of the shelters and it's something the case worker should be working with clients if they need help doing that.

2.2

2.3

Clients can request the help or not request the help;

it is up to them whether or not they want to complete

the HIPAA documentation.

You know that's certainly not to say that there aren't cases where mistakes have been made or that a client has you know their circumstances have changed and they haven't file a reasonable accommodation. We are always happy to work with individual clients to make sure that we get them to the placement that we need to.

We have within our agency have hired in the last 18 months or so, a disability affairs coordinators. So, whose job it is to work specifically with clients and make sure that they are getting access to the shelter placements that they need, and I think, the last thing that I would say is that we also have a consultant contract where we have construction experts in accessibility who are out and looking at all of our new shelters to make sure that as we are going forward, that we are adding a significant volume of accessible capacity.

CHAIRPERSON AYALA: Well would you be able to tell me how many electrical outlets exist at you know Wards Island facility that would allow a person with

2.2

2.3

a wheelchair that needs to be charged or a person who requires the use of a sleep apnea machine to breath at night be able to connect to that outlet.

MOLLY PARK: So, I don't have that data with us, it's something we can follow up on but again, if that was something that wasn't available, that is absolutely the kind of situation where a client could file a reasonable accommodation and where we would make other arrangements.

CHAIRPERSON AYALA: Do you know what the length of time is from the time is that a person files to the point where a resolution is determined?

MOLLY PARK: Uhm, it depends a little bit on how complicated the situation is. How much paperwork is provided by the medical providers. It's generally fairly short. You know there were I think—the ways during COVID but we are doing it in real time at this point.

CHAIRPERSON AYALA: My sense and I mean, I have gone to, to, to quite a few shelters settings is that they are not retrofitted. They've been retrofitted for you know general you know population. I don't remember and I may be wrong. So, this is not a statement but rather question. Seeing any you know

any type of setting where that level of accommodation is evident.

So, you know I'm an individual you know doing intake at Bellview and I'm sending someone to Wards that has a specific need. I know that that need can you know can be met there as opposed to sending them to you know someplace else maybe in Brooklyn. The Brooklyn Armory right.

MOLLY PARK: So, there absolutely are facilities in our system that cannot accommodate people with disabilities. Uhm, that is something that we are addressing by making sure that as we add new capacity, that it is accessible. It's very much a priority for us and closing sites that don't live up to our standards. So, there is a site on Wards Island for example that we'll be closing because it doesn't meet those standards. So, that is a process. Right, because we are at a point right now, where not all of the capacity in the system is accessible, it's a process with our placement team. What's worked between intake and the placement team to ensure that people are placed in shelter assignments that do meet their needs because it isn't everywhere.

1

4

5

6

7

8

10

11

12

13

14

15

16

17

18

19

20

21

2.2

2.3

24

Again, if needs change between intake and exiting the shelter or you know it looks like a placement is going to work and then it turns out it doesn't, that is something that we can change going forward.

CHAIRPERSON AYALA: Okay. Does that include the older adult population because as we're seeing more and more senior citizens enter the shelter system, they obviously come very unique needs.

MOLLY PARK: So, we have some shelters that are specific for — that have age restrictions on them.

They are specifically for older adults. Those generally have particular physical accommodations there but there are older adults that buy either uhm, preference or other needs. You know, they wanted to be in a particular — needed to be in a particular geography, something like that are not in shelters that are dedicated for that population but again, we will look to meet physical needs.

CHAIRPERSON AYALA: And does the Butler Decree require that there are accommodations for the visually impaired as well? Is information available through the rail uh —

2.2

2.3

2.2

2.3

MOLLY PARK: Uhm, I believe so but I'm going to have the legal team circle back with you because I don't want to give incorrect information.

CHAIRPERSON AYALA: Okay, I appreciate that, but I think that you kind of get the sense of where we were heading with this. Again, a lot of this information was received from individuals that are currently living in the shelter system who have had great difficulty accessing you know things as simple as you know, electrical outlet and we make sure that obviously you know there's a person that is equipped to identify and that can you know, is assessing right.

The accessibility of all of the sites that we're currently using, so that we you know we're making sure that people are living as dignified as possible and you know, not having to struggle to have access to a breathing machine at night. Any more questions regarding the — Council Member Bottcher's bill, which I'll let him speak on. I think that what was said was that the implementation of this bill would be extremely costly, and it would require higher in the significant number of mental health professionals and that given that families will be transitioning from

the shelter into communities, that it would be easier to refer them to communities. Is that something that's happening today? I mean, what assurance can you give this body that those connections are being made. Because in fact, what we are hearing is that families often times are receiving a certain level of support while they're in shelter and then, when they're exiting shelter, they are kind of striped away of that right. And they are kind of left a little bit vulnerable.

So, I just wonder whose responsibility it is to make the connection and who's making the referral?

Do we have social workers that are you know sitting with folks and determining that this is a specific need?

MARRICKA SCOTT-MCFADDEN: So, at our families with children shelters, we do have social workers that make those assessments at the point of contact and they're able to make those referrals into the community as we have testified to today. And so, the opportunity is to keep those connections open as they move into shelter, permanent shelter outside of our facilities.

2.2

2.3

2.3

CHAIRPERSON AYALA: I mean, I think that my concern is that as an individual, uhm, it's very difficult to access mental health care because we don't — you know, it's not readily available in our communities and where there is opportunity because it's limited, uhm, the wait time you know can be pretty lengthy. Sometimes upwards of six, seven months before you are able to see someone.

Uhm, so my concern is that if there's no quantifiable data that really — that says hey, you know these are the amount of people that have been referred out successfully, then there's no reason for us to you know, to assume that that is a given.

Yeah, are they able to? Are they you know in a position where they would be — where the workers would be able to make that referral? Probably but are they making it as a different you know —

MARRICKA SCOTT-MCFADDEN: I think that our concerns are based on being — our goal being permanency and moving out of shelter into permanent housing and into the community and making sure that these resources are available within the community. We understand that within the shelter, there was a goal of stability and so, we work with them to make

sure that — we'll work with our clients to make sure
that that is what's happening within the shelter.

Our challenges and concerns around the proposal is

around making sure that we don't concentrate

6 healthcare within the shelter system.

CHAIRPERSON AYALA: I think, you know I disagree because I think that you know if - that we should be dealing with families on a holistic you know, from a holistic lens and that if we're not addressing the mental health needs and you know, it jeopardizes their ability you know to successfully live independently outside of you know the confines of the shelter system and I'm not saying that it's impossible but I'm saying it would make life easier. And I know that you know, I mean, cost is an issue. That's not you know, something that you know I'm not taking this into consideration, and I think that my colleagues take that very seriously, but you know, at what point uh, you know, I don't think that we should - there's such a value right to providing this level of service that uh, it's imperative that we look at different ways to identify funding streams to support it.

1

7

8

9

10

11

12

13

14

15

16

17

18

19

20

21

2.2

2.3

24

1

2

4

6

7

8

10

11 12

13

14

15

16

1718

19

20

21

2223

24

25

Now, regarding Intro.'s 132 and 513, okay, regarding 132, you said that 132 would require DHS to establish additional intake centers for families without existing intakes. And so, again, there's a cost issue, which we did consider you know by the way, but I believe that you know, when I went into shelter, I was in shelter in 1991 and I remember coming to PATH here on Katherine Street, which was I'm not sure if you still use that site, but it used to be an intake center. And every borough had an intake center for a matter of convenience. It's just you know, borderline inhumane right to make families that are already struggling, we're asking them to show up to the intake center with their children, with their stuff you know when they are already obviously going through a very traumatic experience. A very challenging you know time and now they have to travel and commute outside of their borough to be able to access services.

So, I think that it makes sense to rethink that model and figure out ways to kind of reimplement it in a way that speaks to the needs of each community.

MOLLY PARK: I think our concerns with this bill, these bills go well beyond cost, and we have a lot of

1

3

4

6

7

8

10

11

12

13

14

15

16

17

18

19

20

21

2.2

2.3

24

25

COMMITTEE ON OVERSIGHT AND INVESTIGATIONS 42 services that are collocated at PATH, right. when a family comes in, there's a domestic violence screening. There is medical screening. DOE is on site; ACS is on site. We are able to bring all of these resources together and really do a holistic assessment and do effective diversion wherever possible, right. Connect, right, HRA is also on site able to provide one shot deals, other kinds of benefits that might help a family stay out of the shelter system.

Because we are all in one place, we can provide this very robust set of collocated service where we can look at those holistic needs. So, I think that provides better services to families. And then the other piece of it and this is particularly true right now when we have a very high volume of people coming The team that is managing the placements is coordinating with one intake site.

So, they know very well who needs a placement and where the vacancies are. That expedites the process of getting a family to placement. If what you had is the intake team managing multiple different sites, it becomes a significantly more complicated process and the timeline that it takes to get from through the

2 intake process actually into a placement is going to 3 be longer.

So, that's another form of challenge and trauma for the families. So, we actually think that by you know, understand the challenges around travel but we really think that by providing a single collocated intake facility that we are providing the best possible service that we can.

CHAIRPERSON AYALA: Okay, uhm, alright, I'm gonna just pass it over to Council Member Bottcher.

COUNCIL MEMBER BOTTCHER: Hi, one concern that you've raised about the bill that would require mental health services to be provided within the shelters, is that currently families receive mental health services externally. That they are referred externally to community-based health care. Can you tell us how many families were referred to health services externally last year? And of those, how many of those appointments were actually kept?

MARRICKA SCOTT-MCFADDEN: Uhm, thank you for the question. Unfortunately, we don't have that level of data with us today and we'd love to connect with you and the rest of the Council with a response.

2.2

2.3

COUNCIL MEMBER BOTTCHER:

2

1

3

4

6

7

8

of this year.

10

11

12 13

14

15

16

17

18

19

20

21

2.2

2.3

24

25

MOLLY PARK: Sure, thank you. We are absolutely committed to mental health services for children.

according to the Office of Community Mental Health, 66.7 percent of families have been screened for behavioral health needs, yet only .4 percent of families have been able to attend an appointment from January to March of this year and only 2.3 percent

were able to attend an appointment from April to June

Thanks, because

Can you understand why those numbers would be alarming to us and to the service providers who have indicated that the current system isn't working for families?

MARRICKA SCOTT-MCFADDEN: So, thank you again for your question. I will uhm, begin a bit by you know just reiterating the points that we've made in terms of wanting to make sure that we don't concentrate health care into the shelter system and how important it is that we work through permanency and really working through the process of making sure that that process includes mental health care after - in the community. And I'd like to allow my colleague to speak if she has anything to add.

2

3

4

6

7

8

10

11

12

13

14

15

16

17

18

19

20

21

2.2

2.3

24

25

think in the housing blueprint that was released a couple months ago, one of the initiatives in there was to expand telehealth, tele mental health services for children, which we think is a relatively quick way to access services. I think we acknowledge the challenge that you all have raised, is that there is an absolute shortage of mental health professionals in the City of New York, in the country, frankly. So, the existing social workers in the shelter, you know combined with this expansion of tele mental health service I think are a way to quickly meet people's needs while they are in shelter but really, the hope is that the in-shelter piece of it is relatively short. You know, relatively short. now, we're talking over a year, but you know, even over a year in the scheme of a child's life and their ongoing health care needs is not that long, right.

And if there is then a gap of you know as the Chair mentioned, six to nine months to access service once you leave shelter, that's a problem, right. So, being able to leverage the resources that exist within shelter to meet a child's immediate needs but while also working on that referral so that when that family is in permanent housing, that there is an

ongoing pathway. We think that that is the right way

3 to approach it.

2.2

Whether or not that system works exactly the way it should, I think is an open question and you know, as we noted in the testimony, we're more than happy to work with you on the goals here. We just I think have some real questions about whether or not locating it all in shelter is the right approach.

COUNCIL MEMBER BOTTCHER: Thank you because what we're hearing is that, while that might sound great on paper, in reality, the connections aren't being met and many connections may be happening but from some of the largest providers like WIN for example, the largest provider of family shelter, they're reporting that the connections aren't being made.

You had referenced a shortage of mental health providers as a barrier to providing this level of care and that's undoubtedly a big problem. What is the Department of Homeless Services doing and what is the Adams Administration doing to help increase the number of mental health care providers? The number of people entering the field?

Last year, the Adams Administration, earlier this year announced something great, which is a \$2 million

2 scholarship with CUNY for a video game development, 3 which I think is great. What kind of efforts are

4 happening to increase mental health care workers?

MARRICKA SCOTT-MCFADDEN: I think that uhm, thank you obviously for that question. It's really important that we really uhm, drill down into health care and mental health care as well. And I'm sure the Administration will take into consideration everything that we talk about here today in this hearing and I think certainly, it is a part of what we do every day wanting to be supportive of our clients, their mental health and bringing them into permanent shelter. And so, this hearing will go a long way to inform us in our practices, as well as the administration.

COUNCIL MEMBER BOTTCHER: Thank you.

MARRICKA SCOTT-MCFADDEN: Thank you.

CHAIRPERSON AYALA: Thank you. Uhm, Council
Member Cabán is next but we're going to kind of skip
you real quick and let Council Member Lee because we
have vote next door real quick. So, she'll go and
then you. Oh, you do to? Okay, so then yeah, so
what we'll do is that uh, she only has a question,

2.2

2.3

but you have a bill. Do you have a bill to Linda,
I'm sorry.

COUNCIL MEMBER LEE: Sorry, hi, really quick question regarding Council Member Bottcher's bill.

So, is there a way where uhm, because I used to — you know I started and ran an outpatient mental health clinic in Article 31 and is there a way for DHS to work state and the city DOHMH to do almost like sort of MOU's as a solution? Because I know obviously the workforce is a huge issue in the mental health sector right now. So, would there be a way to potentially partner with some of the outpatient nonprofit organizations out there that are doing the work on the ground as an MOU and also, connecting them?

So, the way it works also is that if an inpatient facility, what they do is before they check out the client, they'll connect them to an outpatient facility and then send them on their way and make sure that the continuation of care is there. So, if there's a family, let's just say in a shelter setting that needs services, is there a way to have that sort of similar model or system in place where there is a seamless sort of uhm, continuation of care and

2.2

2.3

services through either MOU's or partnering with

DOHMH on that?

2.2

2.3

MARRICKA SCOTT-MCFADDEN: So, thank you for the question. I think it's important to emphasize again how important we find mental health and we are wanting to continue the conversation about this bill and about many of the ways that we can fully work with the sponsor and the Council in order to fully realize the intent of the bill.

MOLLY PARK: Because I mean, providers do do warm hand offs with clients to services in the community. So, that is a part of our regular protocol because we absolutely do have an expectation around referrals.

In addition, many of our providers have more formal linkages with services that are in that particular community. Those are usually relationships that are brokered directly between the not-for-profit provider and the referral agency but we're happy to talk to DOHMH and see if they have some thoughts about how we can make it a little bit more global at the agency level.

COUNCIL MEMBER LEE: Because it's also - sorry, just one quick comment because it is actually relatively easy if you have the license to operate an

2 outpatient to do satellite services for example,

3 places like shelters in other locations, so that

4 would also be another hopefully possibility to look

at as well.

1

6

7

8

10

11

12

13

14

15

16

17

18

19

20

21

2.2

2.3

24

25

CHAIRPERSON AYALA: Are you done Council Member Lee? Okay, I just want to recognize that we've been joined by Council Member Ung and Council Member

Brewer. Council Member Brewer.

COUNCIL MEMBER BREWER: Thank you. This might be a little bit off topic, but my question is sort of the Rosanne Hagerty kind of question. Can some of these services be provided before people become homeless, so that they don't end up in a shelter. What is the effort toward that?

ACS are working really hard to keep children with families but what does DHS do along those lines? That's the Rosanne Hagerty question.

MARRICKA SCOTT-MCFADDEN: Thank you Council Member. So, the goal at DSS is homelessness prevention, one of their goals and we work also to make sure that the services that are provided to our clients are services that in the end will allow them to not have to enter shelter but when they do enter shelter, we want to make sure that these clients are

Ι

COMMITTEE ON EDUCATION JOINTLY WITH THE COMMITTEE ON OVERSIGHT AND INVESTIGATIONS served as well and with dignity as they can be.

think maybe there's some more specifics and my colleague can add.

2.2

2.3

COUNCIL MEMBER BREWER: Molly knows me very well.

MOLLY PARK: Sure, I mean I point to a couple of major initiatives that we do on homelessness prevention and these actually live at HRA but are very important to DHS. Homebase obviously is hugely important where clients can access one shot deals. You know utility cover, utility arrears, potentially qualify for City FHEPS voucher. I think you know that spectrum of services. I think the legal services is another huge homelessness prevention tool that has been really effective.

Uhm, we have spent a lot of time thinking about how we can expand homelessness prevention. How we can do it more. There are — there are certainly — there's challenges with information. There is not a great way to if you look at people based on you know income or even eviction status or outcomes of things like, some people end up in the homeless system and some people don't and understanding how to best target those resources. Like there aren't wonderful data. I know a lot of people who are much smarter

prediction and it's really challenging.

than me have spent a lot of time trying to do that

2.3

So, absolutely homeless prevention is a priority and we're really proud of the initiatives that we have. Uhm, totally open to looking at ways that we can focus it but understanding that it is a challenge in place to understand exactly where to direct resources.

COUNCIL MEMBER BREWER: Thank you for now.

CHAIRPERSON AYALA: Thank you. Are you ready?
Okay, Council Member Cabán.

ask some questions about Intro. 229 and just would like to start with why the utility allowance got factored into the value of the City FHEPS voucher in the first place and then, sort of the follow-up questions are, can you explain why approving Intro. 229 would mean that DHS couldn't otherwise pay peoples utilities? You know, is it lack of funds or some other barrier? Is there a regulation that would prevent it? And then, you know also why were utility — well, yeah, the first piece is like, why were they originally included and whether those other barriers exist or don't exist?

4

1

2

5

6

7

8

10

11

12 13

14

15

16

17

18 19

20

21

2.2

2.3

24

25

MARRICKA SCOTT-MCFADDEN: I will immediately give that question to my colleague.

MOLLY PARK: So, this one gets very wonky very quickly but bear with me. So, the intent here with utility allowances and the way that this works in Section 8, is that tenants are paying 30 percent of their income for housing costs. Housing, meaning their share of rent and utilities because you actually have to you know, set this in advance. based on a utility allowance rather than actual month to month bills, but 30 percent of the income is going to housing cost large.

That is not, I will you know fully concede that the way City FHEPS is working right now, that's not exactly how it's working but we are in the process of a variety of technological changes that will allow us to do that. Uhm, and I think the best way for me to explain this is to actually run through sort of a hypothetical example. I will caveat that all of my numbers here are fiction, but I think it's the best way to explain it.

So, if you have the rent is \$2,000 for an apartment, the 30 percent of the tenants income is \$300 and the utility allowance if \$100. The way it works in Section 8 and the way it's going to work in hopefully not too distant future for City FHEPS, is that the landlord collects \$1,900. The subsidy payment then is \$1,700. The client is paying \$200 in rent and \$100 in utilities right. So, the client is despite the fact that the client has to pay their utility bill, they are still paying only 30 percent of their income for that housing cost at large.

If we were to do it the way the bill is structured, with that same \$2,000, right, the subsidy payment is \$1,700. The client then is still on the hook for \$300 and they are on the hook for their utility allowance. So, the client in that case, the tenant ends up paying \$400 more than 30 percent of their income in total housing costs.

So, and that is assuming we are holding the city cost harmless. If we said we're going to have the higher rent but keep the client, the tenant harmless, then that increases the cost to the city. It's a direct transfer to the city to a landlord in exchange for not providing utilities. Which I actually think is really — I understand the intent of the bill, but I think it is really counter to the goal, right.

2.2

2.3

2.2

2.3

So, we want to align with Section 8, which is trying to hold landlords — we want landlords to provide utilities whenever they can. If they are not providing utilities, we want them to be financially accountable for the fact that they are not providing utilities and we want to ensure that tenants are paying no more than 30 percent of their income in housing costs.

We do need to make technological changes to our system to be able to do that, so I fully acknowledge, it's not exactly how City FHEPS is working now but it is where we are headed, and the bill would really prevent us from doing that.

The reason I think that we are doing the utility allowance deduction now, even though we don't have the technological tools in place to do exactly what I just described, is because you know we the administration but also in very close collaboration with the Council worked hard to get all of these different subsidies aligned, right. So, City FHEPS, Section 8, EHD and very shortly State FHEPS are all at the same rent levels, so that you don't have landlords really picking and choosing which subsidy and which client they are going to go with and so,

4

5

6

7

8

10

11

12

13

14

15

16

17

18

19

20

21

2.2

2.3

24

25

2 keeping that equity across the different subsidies is 3 we think really important.

COUNCIL MEMBER CABAN: So, I'd like to - actually can I have a little bit extra time? I wanted to ask some follow-ups on your hypothetical and then offer a hypothetical of my own. But you know, I took in the information you gave but I think you know, one of my questions sort of still remains a little bit unanswered in terms of you know there being - is there a regulation that would prevent another avenue or mechanism for utilities to be subsidized or covered? I think maybe you alluded to it a little bit of - like is it a lack of funding for example that would prevent it but like just very interested in you know whether DHS could otherwise pay peoples utilities outside of like this current mechanism. And you know to offer sort of an example that we got a lot of feedback on, and people shared with us a lot, which was part of the reason for introducing this bill, was that civil, you know indigent legal services organizations and also people who have been navigating the City FHEPS programming was. difficult it was. I mean, even as a New Yorker who has the means to be able to rent a market rate

1 57 2 apartment for example, it is a horrible and 3 demoralizing process. It's really, really difficult 4 and so, imagine somebody that's navigating that with 5 the constraints of you know, the voucher system and things like that and going and looking for an 6 7 apartment, finally thinking that they found one and I've heard this story many times over. Finally think 8 they found one; only to find out that actually they are not eligible because of the utility allocation. 10 11 Not being able to rent and you know, getting feedback from both the folks navigating that system and you 12 13 know the legal assistance that they were providing 14 about the ability to take this out of the voucher, it 15 would open up eligibility for a lot more you know units presumably. 16

And so, you know connecting that very real experience to again, that initial question of you know where - what are the other mechanisms for you know DHS to otherwise pay those utilities?

17

18

19

20

21

2.2

2.3

24

25

MOLLY PARK: We really don't have a mechanism to pay utilities in any other way and there's the federal state program but that's really focused largely on home owners. I don't think it fits that well for renters, so -

_

COUNCIL MEMBER CABAN: So, could you because again, is there a regulation that would prevent it and not allow it?

MOLLY PARK: I mean, this is a place where I would want to talk to our lawyers, but I don't — in order to be able to make a grant program, I have to have a regulation that does allow it as opposed to not something that just prevents it, so as far as I know I don't have a mechanism to create that program but that's something that we can certainly talk to our legal team about.

But I think you know really more fundamentally uhm, paying the max in every circumstance creates an incentive for landlords to do the least possible in terms of paying utilities right. So, this becomes a transfer from the city to landlords for providing less good service, which I think is problematic.

We really want to be in place where we are incentivizing landlords to be paying utilities because if they are paying utilities, then they actually do qualify for that, the maximum rent. I absolutely think that there is more education that we can do to explain how the utility allowance works.

2 It has successfully worked in the Section 8 program 3 for decades.

2.2

2.3

So, I think there's room for us to make sure that we are talking about it more clearly. You know this has only been you know we didn't previously do the utility allowance when the rents were so much under the fair market rent, but it was something that we implemented when the rents were brought up to fair market rent because we were again aligning all of those different subsidy programs.

COUNCIL MEMBER CABAN: And is there something to point to that sort of concretely shows that it is not just very like likely but like highly, highly probable that the outcome of this kind of policy change would absolutely result in landlords changing their already like predisposed offerings.

MOLLY PARK: I mean, this is anecdotal information. I don't have you know quantitative data on it, but we've absolutely been seeing an increase in things like electric heat, which is built to the tenant. Right there has been service. I've heard stories recently, which really shocked me of individual water meters for tenants, which is some — you know I've worked in the affordable housing space

3 th

for decades. I had never seen that before, so I think there is definitely push where landlords are devolving utility costs to tenants and it can be really high and if you have a rent that is where you're paying 30 percent of your income in rent and all of the utilities on top of it, it becomes very challenging to be stably housed.

COUNCIL MEMBER CABAN: Thank you.

CHAIRPERSON AYALA: Okay, thank you. I'm going to ask a few questions and I just want to say that we have to — we may have a vote, so some of us may have to run over uhm, but Council Member Stevens has generously agreed to Chair in our absence.

But I have a question regarding Intro. 513. This bill would require — well, basically I'm not even going to read the whole bill because we already read it and it's written but is there any reason why a family would need to go specifically to the PATH, and I get that the — you know there was a conversation a little bit early. You explained the ability to really manage more efficiently right because of the different services that were being provided at PATH and make cities centralize everything. However, I have a question because during the pandemic, uhm,

2.2

2.3

families were able to do a lot or not able, but they were restricted to doing a lot of that via telephone conference being from the intake center with the case workers. What prevents them from being able to do that say from a community-based organization that's already partnering with DHS in Brooklyn?

MARRICKA SCOTT-MCFADDEN: Thank you for that question. I think that you know I'd like to reiterate that we continue to be willing and wanting to continue to dialogue around this bill as well as others and to take into consideration everything that's being said here at this hearing.

We obviously place a value in having the centralized apparatus and being able to work through that and so, that's something that we've been able to discuss here today, and I wonder if my colleague has anything to add about your scenario.

MOLLY PARK: Sure, did I get that right
eventually? Uhm, we did make accommodations and
changes during the pandemic to protect public health,
but I think we also felt like they were in some ways
very much less than ideal. When you are doing a
phone intake, you can't you know and trying to screen
for domestic violence. For example, you can't know

_

if an abuser is in the room and dictating what's being said right. Whereas, when we're doing intake in person, you know the adults are separated to do a domestic violence screening. That's something that's important because something like 50 percent of the heads of households in the families with children system have a domestic violence history or are survivors.

So, you know, we want, we want to have eyes on children where we're doing both health and ACS screening. So, you know, yes, the phone was an appropriate emergency public health response, but we think it's less than ideal over the long term.

CHAIRPERSON AYALA: I just you know, I think the pandemic taught us you know a lot of you know in regards to how to pivot and kind of think outside of the box, right. Like, I don't think that I ever need to have another in person meeting in my office unless it's absolutely necessary because of the convenience that it brings not only to my staff but to the person that's coming to visit me not having to travel. You know it's a really big deal but I'm trying to look here because I had a constituent that was texting me from PATH a few months ago, during the pandemic but

right.

16

17

18

19

20

21

2.2

2.3

24

25

2 not too long ago. It was about a couple of months 3 ago. This was in June as a matter of fact and he and 4 his family went to PATH and had been waiting there. This was on actually June 28th. They were waiting at 5 PATH since nine o'clock in the morning and it was 6 7 like I mean upwards of like ten o'clock that evening 8 that we were still having - going back and forth and he said, you know I'm sitting - we're sitting here basically waiting for a call and I said, a call from 10 11 who. He said, I don't know. They told us that we're 12 going to get three calls. We got one, so I'm waiting 13 for call number two and then we have to wait for call 14 number three. I guess those were the protocols that 15 were put in place because throughout the pandemic

But he wasn't sitting there waiting. He and his family were not sitting there waiting for any you know to speak to anyone but rather to provide information that I think could have conveniently been provided from some place a little bit more comfortable, especially because they had children with them and it becomes — you know, I think it's very difficult to kind of describe it unless you've lived it. Uhm, you know there's a very overwhelming

feeling that you know a failure of uncertainty that
you know takes over you when you're in a situation
like that and I think that what the Council Members
here you know through these pieces of legislation are
trying to find is what is the best way that we can do
this. And I understand that this is not easy work.
Uhm, and I applaud you know you're — the agencies
commitment to trying to centralize these services and
to try to ensure that there aren't you know as many
gaps and services as we can eliminate but I think
that there is a real possibility to do some of this
work by partnering with organizations that already
have established relationships and contracts with
DHS. Right, so that way the information is coming
from a trusted source and I just you know, I would
ask that you know there be maybe you know a few more
conversations with Council Member Ung about you know
that possibility because if we did it during the
pandemic and we were able to do it successfully
unless proven otherwise, then I don't see why it
would be that difficult. I'm going give this over to
my best friend here and I will be right back.

COUNCIL MEMBER STEVENS: Sorry guys. So, the next question we're going to ask, does the

Administration currently collect information that the bill requires in Intro. 421?

MARRICKA SCOTT-MCFADDEN: Thank you for that question. So, as I stated in my testimony that there are portions of the bill that are duplicative of other reporting bills, specifically Local Law 79 of 2022 and then there are also portions of the bill that is as it is written where we do not collect data and it would require an interagency connection, which is for the purposes of this bill and how it is written may be an issue and provide an issue around parental consent and also privacy for minors and that includes ACS and DOE.

COUNCIL MEMBER STEVENS: So, I just want to make sure I'm clarifying. You collect some of this information but not all of it but some of the issues around just parental consent?

MARRICKA SCOTT-MCFADDEN: The issues to be more specific, the one's that we're talking about specifically around privacy and parental issues are with DOE and ACS.

COUNCIL MEMBER STEVENS: Okay. So, with Intro. —
my next question is, what type of trainings if any

2.2

2.3

2.2

2.3

does DHS provide staff related to customer service?

Molly, could you speak?

MOLLY PARK: Sure, so training is something that is really important to us. Administrator Carter, who has been running the agency for several years now is really committed to raising the bar on the services that we deliver. Anybody who has met her has heard her use that phrase. So, we have an entire team that is working on training. We recently rolled out an online system that we can use to provide training on a really diverse array of topics to not only to DHS staff but to all of our providers. We work with more than 75 not-for-profit organizations in you know 400 different buildings, so the online tool is really valuable.

It allows for both you know prerecorded trainings and also, instructor led live trainings. We are in the process of working through the technology issues to get all of our providers access to that, but we have already created and teed up a really robust array of trainings that cover topics like you know culturally competent, service delivery, deescalation, really logistical and operational trainings around you know how DHS does the management

1

3

4

6

7

8

10

11

12

13

14

15

16

17

18

19

20

21

2.2

2.3

24

25

and sort of very technical specific DHS topics. There is homelessness 101 to make sure that people understand the context of the work that they are doing and why they do the work that they do. Uhm, because you know, frontline staff who are disconnected from the leadership may not always have that context.

So, we have training that is very specifically related to security and then also, to different - to housing specialists right, range of different roles. So, I'm really excited that we are going to be rolling all of this out more aggressively and that this online system is going to allow us to reach people very efficiently.

COUNCIL MEMBER STEVENS: So, I think for me, some of the follow-up questions even around this specifically, this was asking about customer service and none of the trainings you mentioned were around customer service and then on top of that, to have online training around customer service. It takes away some of the value right, when we're talking about interacting with humans and how you're giving quality of care and then saying we have an online training around that. It seems a little like it's

2.2

2.3

customer service?

disconnected, which is why I think this bill is being pushed around. Like, how are we interacting with folks and what does that look like in a human perspective because online is nice but like how do you then follow up with that? What does that look like? And so, I would love to hear like, what does your in-person training look like. That is something that's happening now. Like, yes, it is much efficient we can say but is that what we really should be moving to if we are seeing issues with

MOLLY PARK: So, I think customer service in the DHS context at least the way that I and we think about it encompasses things like language access, like de-escalation, culturally competent service delivery. Uhm, you know the array and we can certainly follow-up with a more comprehensive list of the trainings that we offer but uhm, you know while we don't necessarily have something that is you know called customer service with a capital C capital S, I think the different components of what goes into customer service of, customer service is about how we, the agency and we are provide staff interact with clients and how do we make that a positive experience

_

for all involved and that's how I think about customer service and that is absolutely what this array of trainings is designed to do.

You know, I hear you about online. You know, the reality is, we have you know tens of thousands of staff people. When you look at the provider staff right, and particularly some of the frontline roles, staff do turnover, right. So, how do we make sure that there is regular routine access to training? That we are conveying the information that needs to be conveyed. That people are getting consistent information. Having that documentation — having processes where we can roll it out across that very diffuse system is really important. Hear you know the in person and we're happy to think about ways that we can incorporate more of that.

COUNCIL MEMBER STEVENS: Yeah, I know I mean, definitely but I think sometimes with the thought around like cost efficient or efficient. We say, oh, we'll do online but understanding that when we're dealing with humans, we also need to be dealing in that way. In the same way, even when we're rolling out trainings and what does that look like? And I think yes, de-escalation, those things are nice but

COMMITTEE ON EDUCATION JOINTLY WITH THE COMMITTEE ON OVERSIGHT AND INVESTIGATIONS

2.2

2.3

that is not necessarily customer service right. It is how we're interacting and showing up each and every day and because a lot of your frontline staff are always on the frontline. They often get hit with a lot, so sometimes you need refreshers on what that looks like.

On how to interact with folks who are coming to them in a very vulnerable state and in those times. They need to be able to react in that way, so I think it definitely is needed to be thinking about how are we serving people who are coming into these places who need help, and you know, customer service is part of that and that should be top priority of how we're making sure we're providing a service to them.

So, I'll yield the floor back to our Chair, who is back.

CHAIRPERSON AYALA: Thank you. Actually, Council Member Restler had a couple of questions. Council Member Restler.

COUNCIL MEMBER RESTLER: Great, thank you very much. Molly, it's good to see you. I'm a big admirer of yours and Marricka, it's good to see you as well. I look forward to working together and I just want to thank Chair Ayala for this hearing and

2.2

uhm, bringing forward a really great set of bills.

So, thank you for giving the Council the opportunity to engage on these issues and you know, I want to thank all of the providers and advocates who are here like Vocal and WIN and others who are doing such critical work every day.

I'm strongly supportive of many of the bills in this package. Disappointed by the testimony. To hear your opposition to just about all of them. You know from expanding mental health services in our family shelters to ensuring that families receiving FHEPS are not paying utility allowances. You know, there are many really good pieces of legislation. I appreciated your testimony explaining how you're working through the utility allowance issues. I think we need solutions really fast on that.

So, anything that we can do to work together to expedite implementation to ensure that individuals moving out of shelter are not paying the utility allowances, who are receiving vouchers is critical. You know, we want to help and it's critically important but the thing I wanted to focus on in my questioning was Council Member Ung's bill around decentralizing PATH.

I think personally I believe it's a disgrace that we have one intake facility for the City of New York for all families with children. I was looking through the data and do you know which neighborhood or which community district in the city of New York sends the most children or sends the most people into our shelter system each year?

MOLLY PARK: I have the data by borough. I don't have it by community district, so the prevalence is from the Bronx.

COUNCIL MEMBER RESTLER: My recollection is that the Community District that sends the most people into our system is East New York, District 5 in Brooklyn. Do you know how long it takes to get from East New York to PATH?

MOLLY PARK: I certainly understand that it takes time.

COUNCIL MEMBER RESTLER: 85 minutes, 90 minutes on the train in each direction. That is a very long commute for a family. That is a whole day gone just in transit. Uhm, what was the acceptance rate of PATH in 2021?

2.2

2.3

2.2

2.3

MOLLY PARK: Data doesn't exclude and think about it as an acceptance rate. Nobody gets turned away right.

COUNCIL MEMBER RESTLER: Well, certainly they do right? I mean, go ahead, I'll give you a chance.

MOLLY PARK: When a family comes into PATH, they go through the screening process. They and the first thing, they go through an initial screening process at intake. Everybody gets a conditional placement.

Uhm, so everybody is placed — I should caveat. A family might be diverted right. Meaning they — a one-shot deal is gonna or a City FHEPS voucher or something else is going to solve their problems but anybody who is pursuing shelter, is given a conditional placement.

Park, with all due respect, that's a very rosy assessment. I do not agree with it. 24 percent of families were accepted into shelter last year. They may receive a conditional placement for the night, but they're told the next day that they are not welcomed in the shelter system. That is the facts. That is down from 45, 50 percent just a couple years ago, which is not an acceptance rate that I think we

2 should be proud of but 24 percent, three out of four 3 families applying for shelter on their first occasion

4 | are rejected.

2.2

2.3

MOLLY PARK: With all due respect, let me clarify how the conditional placement process works. So, people are given a conditional placement. That is a 10-day conditional placement. So, a family is in place. It's not a bed for a night. They are in a standard tier 2 shelter.

COUNCIL MEMBER RESTLER: But it's a short-term, very interim placement and they are then sent packing on their way three out of four times.

MOLLY PARK: No, if they are found ineligible, they are able to reapply. What has been in place -

COUNCIL MEMBER RESTLER: Okay, so what was the percentage of people who applied? What was the number of people who applied more than four times? The percentage of people who applied more than four times to shelter, if I have this data right, you can correct me Deputy Commissioner, increased from 14 percent in 2019 to 30 percent in 2021.

So, the number of people who applied more than four times, doubled in just two years. And if I have

1 2 this data right as well, the number of people who 3 applied more than once before succeeding increased from 38 percent in 2019 to 59 percent in 2021. So, 4 we went from two out of five families applying more than once before succeeding to three out of five 6 7 families, which means people are coming back and back 8 and back again and you think about that family from east New York who's traveling an hour and a half each

13

14

15

16

17

18

19

20

21

2.2

2.3

24

25

way, coming back three times, four times, five times, 10 11 six times. We've all read about the horrible instances of 12

the families applying 20 times, 20 visits to PATH. To this one location in the Bronx. I do not understand how we could possibly continue to require these families to travel such a distance.

MOLLY PARK: So, I think there's a number of different factors that are getting conflated here, that I think are really important to pull apart here.

COUNCIL MEMBER RESTLER: Okay.

MOLLY PARK: So, in the time period that you're comparing, we made some quite significant changes to operations in response to COVID.

So, the way it worked before COVID was if you were found ineligible, you went back to PATH to

Τ(

2.2

reapply. During COVID, we put in place in order to keep people separate that you could reapply from your unit. What we found — so, first of all, all of those reapplications that you're talking about, nobody was commuting. They were doing it from the unit in which they were.

COUNCIL MEMBER RESTLER: Yes, temporarily during COVID, those policies are no longer in place.

MOLLY PARK: No, they still are.

COUNCIL MEMBER RESTLER: Okay, so — oh, they are? You can still reapply without having to go back in person?

MOLLY PARK: At this point and time yes.

COUNCIL MEMBER RESTLER: Is there a date when they're no longer being — then when they're being discontinued?

MOLLY PARK: At this point and time, those policies are still in place but let me, if I can talk through the process.

COUNCIL MEMBER RESTLER: Sorry.

MOLLY PARK: What we found that was — there was — because households didn't need to — knew that they didn't need to come back to path, that the process of collecting all of the information that we need to do

to look at eligibility was just typically taking

longer. That there wasn't the same level of

engagement in the process. I say this not to point

any fingers. I think there's probably multiple

levels, places with that level of engagement but

there were more you know noncooperation cases, things

like that. And so, families were — it raised the

number of reapplication substantially, not because of

a policy change around eligibility screening but

because the barrier to those reapplications was a bit

12 lower.

2.2

2.3

Uhm, that being said, we have heard a lot of feedback around the reapplication process and reapplication numbers, and we made some changes earlier this year to our families with children eligibility screening process. Looking at what one of the reasons why a family might be deemed ineligible if PATH determines that they have other housing to go to. We changed our standards for what constituted acceptable. Other housing, whether or not you know if the primary household member was or wasn't a family member. You know how we handled you know if that family — if the households that is potentially available, housing is objecting, we will

try some mediation if that mediation doesn't work,
that is deemed not acceptable housing, that family
would be found eligible.

So, we made a number of eligibility screening changes that have affected families intake into PATH right. So, we were starting to see that increase the eligibility rate. You're not going to see that in immediate data right now, just what we have right now is as I think most people know, just a very, very significant number of asylum seekers because their family situations are so very different. Most of those are remaining in conditional placements right now for the time being as we are standing up our sanctuary system for asylees.

But so, the data right now is a little bit uhm murky but essentially earlier this year, you were seeing a fairly substantial uptick in families with children eligibility associated with those policy changes that I just made.

So, you know, again people are commuting multiple $\\ \text{times to reapply} \ -$

COUNCIL MEMBER RESTLER: As a temporary pandemic policy.

2.2

2.3

MOLLY PARK: The change, even so they wouldn't be coming from — if they did need to go to PATH, again, they would be coming from wherever their shelter site was, uhm, and not with children for reapplications that's something that is ongoing.

COUNCIL MEMBER RESTLER: Temporary pandemic policy but welcome to all the same.

MOLLY PARK: It's not a pandemic policy that no children at reapplication. Uhm, we do think -

impossible to work if you're coming back four or six or eight or ten or twelve times, an hour and half each way. I mean, these are incredible challenges.

And I apologize Chair Ayala, I'll shut up after this but to me, this is a system designed to keep people out and one of the most obvious manifestations of that is to have one location in the Bronx as far away from places like Brooklyn or Southeast Queens or other parts of New York City as you can possibly get.

And we should be providing shelter to everyone we need.

When we're ejecting three out of four families that's a problem. That is a real problem and the people who need help and support are not getting it

and we're sending them through the ringer and making

it so hard and causing such trauma in that

application process that is designed to keep the door

5 closed.

2.2

2.3

One of the most obvious ways we can change it is by decentralizing PATH. Having an intake center in each borough and if no one else, I'm happy to say, we would welcome it the 33rd Council District. It should be in Brooklyn. Downtown Brooklyn is an easy place to get to. I'm happy to help identify a space for you all. I've got a location in mind even. We can have that conversation, but we should decentralize PATH and if you're all not prepared to do it, then we should pass Council Member Ung's bills tomorrow to get that done. Thank you.

MOLLY PARK: Council Member, I'm very grateful for your openness to shelters. It has always been a tremendous pleasure to work with you and your team. I do think there's very real reasons why the services that we are able to provide at a single collocated site and the efficiency that we can get in actually making those housing, the shelter placements, are really valuable things that it would be a programmatically very challenging to lose.

COUNCIL MEMBER RESTLER: I'm confident that we could consolidate and collocate those services in Brooklyn as well. So, I look forward to trying to make that happen together. Thank you again.

I just will say, you're all job is really hard.

It's really right now with the increase in asylum seekers and folks in need. Appreciate the hard work you do every day to try and look out for the most vulnerable. In giving you all a hard time, it is not coming from a place of — there is respect in the work that you do, and I know how much you do for our city and for the New Yorkers in need and I appreciate it, so thank you.

MOLLY PARK: Thank you.

CHAIRPERSON AYALA: How do we measure the efficacy of the centralization of these services?

Like is someone from DHS physically at the site? You know, trying to kind of you know, just make an inperson assessment of how things operate and ways that we can be a little bit more efficient?

MOLLY PARK: So, first of all, absolutely we have DHS is very robustly staffed there and not just the frontline staff that agency leadership is there on a regular basis as well. We're always looking for ways

2.2

2.3

that we can make operations better. You know whether it's use of technology or clear communications on the process, uhm, right we have a children's play space that has been closed that we're working to reopen.

It was closed because of COVID but making sure that we are expanding the services and the benefits that

I think frankly one of the most important things that we can do to make sure that the PATH experience goes as smoothly as possible is really making sure that we have robust shelter capacity to place people in. Right, because —

CHAIRPERSON AYALA: Or more housing.

we can provide to clients.

MOLLY PARK: Or more housing but uhm, you know I can talk about the pieces that are more within my control and that's the shelter pipeline. Right, the smaller the vacancy rate, the harder it is to find the unit that is most appropriate for that family and the longer the placement process can take.

So, making sure that we have a solid vacancy rate, so that we can place families near their child's school. That we can get the right size unit. That if there are accessibility needs, to your point earlier, that we can meet all of those is really

2.2

2.3

Services.

2 important. So, really look forward to working with 3 all the members on that shelter pipeline.

CHAIRPERSON AYALA: I appreciate that, and

Council Member Salamanca and Holden are not here but

I had a question related to Council Member

Salamanca's Intro. 124 that would require in relation
to housing specialists within the Human Resource

Administration and the Department of Homeless

So, his question is, how many shelters in DHS and the HRA systems currently have housing specialists and is there a rate of moveouts into permanent housing that is higher in shelters with housing specialists?

MARRICKA SCOTT-MCFADDEN: So, I can begin by just also highlighting that the agency is very important and the primary goal to move out of shelter into permanent housing.

And so, because this is a goal, we utilize case workers in this role that will a little bit more than the housing placement, but they substantially do housing placement and so, in those cases that we have caseworkers that work with clients who will then work them through at the ability to look for housing.

1

3

4

5

6

7

8

10

11

12

13

14

15

16

17

18

19

20

21

2.2

2.3

24

25

They will have that ability to either be placed within with the site where they actually are, or they visit the shelter site throughout - on a regular basis.

So, in terms of housing specialists, just to get back to your question, we have that particular workstream under the case worker basis.

CHAIRPERSON AYALA: Okay.

MOLLY PARK: Let me chime in. Virtually, all of our shelters, DHS shelters have dedicated housing specialists. There are a handful as my colleague noted where there aren't dedicated housing specialists and the case workers are filling that role, but it is virtually all of them that have dedicated housing specialists, so I can't actually do the comparison of the non because the housing specialist is so prevalent.

We also have a team within DHS that could provide a housing specialist that could go out and provide support as needed as well. So, they work out in the field. We are doing a little over 200 subsidized placements each week. That is systemwide, so we're really, really focused on permanent housing. It's a huge priority. You know, we were talking earlier

2

3

4

5

6

7

8

10

11

12

13

14

15

16

17

18

19

20

21

2.2

2.3

24

25

about training, I don't know that this is - it certainly doesn't constitute customer service training but it's something that we're really proud We did a four-day, full time training on permanent housing tools over the summer and we had more than 600 participants for each of the four days. Really saw a tremendous engagement in focusing on the permanent housing and on the processes and tools that are available and we're really seeing that in our numbers. We have strong moveouts.

CHAIRPERSON AYALA: Okay, uhm, and regarding

Intro. 108, okay, so this is Council Member Holden's bill in relation to creating an annual report on the performance of Department of Homeless Service providers. Does the Administration currently collect that data? The data that is required as this bill? MARRICKA SCOTT-MCFADDEN: Again, thank you for the question regarding this bill. We believe that there are certain aspects of the bill data are duplicative of the reporting that we do, we currently do and also, would like to emphasize that there are elements of resources and costs that go into producing reporting at this level and we want to reiterate that transparency is always something that

1

3

4

5

6

7

8

10

11

12

1314

15

1617

18

19

20

21

22

24

25

we want to do as an agency. We want to participate at that level and be a part of working with the sponsor and to really figure out the absolute intent of the bill and then work toward that intent.

CHAIRPERSON AYALA: What is the total number of providers on the contract with DHS?

MOLLY PARK: It's about 75. Many providers have multiple contracts of course.

CHAIRPERSON AYALA: Okay, so that's not that many. I mean, I just assumed that it was a larger I mean, I just have to be honest that you know and again, I get the sensitivity of the matter and I think, you know I've never, you know in our office, you know we have I think five staffers in the office at a given time and you know we're trying to figure out ways to help our constituency right. We represent a two-borough district, and you know we have older adults, people with disabilities, people with children, people who are working and can't afford to take the day off but really need to speak to somebody. And so, we try to offer virtual options, emailing, calling, walk in hours, you know later hours so that people have you know access to us in all ways possible. You know, we work really hard

on our customer service skills because we understand
that people come in and sometimes it's so you know
tied down you know to whatever issues they are going
through that they may you know inadvertently take

6 that out on you, you know in that moment.

2.2

2.3

So, we learn that it's not a matter of if it happens but when it happens, how do we react? These are all things that are really important to this body. But with DHS, I think that my concern has always been that whenever I have to counsel someone that has to go into shelter, the conversations are never pleasant to have right because the feedback that we get from just about maybe I would say 99.9 percent of the people that come in contact. I actually do not have a case where a person came to me and said, I loved, you know, I loved my setting. I was in the best shelter ever, right.

And so, we have to mentally prepare folks that are entering the system. That are going to PATH.

When I'm sending somebody to PATH, I have to say you know, you have to take a book, take food, take water.

You know, be prepared because you're going to be there all day. And that's the reality and I think that's with the package of bills, what we're aiming

2.2

2.3

for is to ensure right, that we're addressing what we're hearing on our end from the constituents that are being serviced by these providers. And I'm not in any way shape or form saying that we don't have providers that are providing you know good quality services but if there's no real way to measure that, uhm, then we're being reactive, right.

Whenever something then hits the news, now we're trying to figure out well, what happened and when.

When that probably could have been everted if there was some sort of streaming process that allowed us to gauge the efficacy of each organization and their delivery of service.

You know, in organizations, it's housing families in buildings that are substandard. We should know that ahead of time before you know something horrible happens. And you know we're not seeing a lot of evidence to that, and I get it, my mother used to say, when too many start to soup it doesn't come out right. And I think there's no greater example of that than in you know agencies such as DHS and DSS and you know NYCHA where they just were so large at some point that it makes it almost impossible right to know what's happening at every given time.

And so, I appreciate you wanting to mitigate that by centralizing some of the resources, but we don't, you know I don't know that that works for the general public.

And I would really encourage someone to take the train from Brooklyn to PATH, you know and to take — you know to have that experience to really appreciate and then sit there all day to really appreciate the discomfort and the trauma that we are you know putting on families unnecessarily because there are probably other ways to do things that we just you know haven't — because we get comfortable doing things a certain way because that's the way that it's always been done. It doesn't mean that it can't be done any differently.

So, I would love to see what reporting bill exists now that would conflict with Council Member Holden's bill because I actually think that this is a really good bill and I think that it's necessary. I want to know that my providers are doing the best job possible and that constituents that I am referring are you know, having access to the services that they deserve. More specifically, in the single shelter.

25

2 You know, there was a bill here on de-escalation. 3 We saw what happened a couple of days ago. You know 4 we fought the people that work at these shelters, they're human beings too. They are forced with you know, some very difficult situations day in and day 6 7 out with individuals that have you know substance use 8 disorder, mental health issues, people that are stressed out, that are pissed off that day that are going to take it out on you and we saw what happened 10 11 right, when someone kind of reacted, right. Was kind 12 of caught up in that and reacted in a way that was 13 unprofessional, and I appreciate that the 14 Commissioner immediately addressed that, however, 15 that is not the first case where something like that 16 has occurred. I know an individual who suffers from 17 mental health issues and was punched in the face by a 18 security guard in one of the Brooklyn sites you know 19 because he was you know, probably being 20 inappropriate. However, those security guards should 21 be armed with the resources to learn how to deescalate and to address an individual that is in 2.2 2.3 crisis. An individual that you know, maybe under the influence of something and it's just not evident in 24

the work that we're doing. There seems to be some

2.2

2.3

sort of you know, of I don't know I would call it a donut hole right, in between what you're seeing versus what we're seeing and uhm, you know so, again, the members took a lot of time to help — you know to get these bills drafted for a reason and any consideration, any you know maybe communication with each individual office to kind of help us help you if you will, is greatly appreciated. And with that, I think our final questions will come from Council Member Ung.

COUNCIL MEMBER UNG: Thank you and thank you

Chair Ayala for putting it so ably about why they're

here today you know dealing with the issues that we

are in our districts. And I'm just going to mention

again, this is my bill Intro. 132. I have heard a

lot back and forth. You know actually I did visit

the PATH center in the Bronx, and I was actually very

impressed by the amount of services that was given in

the center, and you know I understand it's not just a

center where you know you do the process for intake

but actually a center of where you provide service to

people facing homelessness.

I guess you know, not so much a question but a comment is, cost is a factor of cause but other than

that, what is to prevent providing all those same services at a different borough, at a different location for different families? And I also say this was coming from a district in Flushing, yes, the commute is hard but moreover, it's also an immigrant community where it's a very scary experience when someone's facing homelessness and to tell them to go to the Bronx, where they probably have never been Take this public transportation. Go to a before. new place where they never, ever you know, language is a barrier and I do, I visited there and you know I appreciate that you've shown me that I know people there do speak different languages addressing the community but I'm just coming also from a community where, and that's where I think I also had the other introduction about working for not-for-profits because often when you know a community, an immigrant community, where they are facing a risk of homelessness, they are actually the first place they would go to is the trusted not-for-profit.

I'm not here to make life more difficult for any of you on this whole thing as Chair Ayala was saying, that we can work together more and see how we can

24

1

2

3

4

6

7

8

10

11

12

13

14

15

16

17

18

19

20

21

2.2

2.3

2.3

really address these issues for the different communities in New York City. Thank you.

CHAIRPERSON AYALA: Thank you. I have a final question. Actually, I just received something, some information that there were 60 individuals that were denied placement last night at the intake facility for single adult men. Do you know why?

MOLLY PARK: Denied placement isn't exactly how I would describe it. We had a very challenging day yesterday. We got bus after bus after bus from Texas. We had more intake yesterday than we would typically see in a week and we did not place everybody in the time that — there were single adults that we did not place in the time that we needed to do it because of just the volume.

They've all been placed. We are absolutely doing everything that we can to add even more emergency and surge capacity, but I think you know the politics that have been played with people's lives and the influx of people is straining the DHS system to the breaking point. We are you know, the woman who runs PATH was there from noon yesterday till you know, I was talking to her at eight o'clock this morning, right. You know, it is an incredible effort from

public servants to make sure that we are dealing with the volume of clients who need. We have both a legal and moral obligation. We understand that the volume has just been tremendous.

CHAIRPERSON AYALA: What was the number of individuals that arrived yesterday?

MOLLY PARK: The total systemwide of asylees was close to 500 people.

CHAIRPERSON AYALA: Yesterday?

MOLLY PARK: Yesterday.

CHAIRPERSON AYALA: So, the 60 plus that didn't make it in by the allotted time, do those individuals that leave and come back or were they still -

MOLLY PARK: They were placed. Sorry, they were placed, they just weren't placed in the timeframe that they should have been.

CHAIRPERSON AYALA: Okay, how are we doing in terms of capacity building? I know that the vacancy rates were really, really, really low and I really do, I don't know how you guys are getting through.

Even if we have planned for the worst-case scenario,
I think we would still be kind of in a jam, but I can appreciate how difficult it must be to identify

2.2

2.3

2 places to properly house families and individuals and 3 I'm wondering, how is that going?

MOLLY PARK: It's certainly challenging. We've been opening hotels very rapidly. You know many of the Council Members have heard from us and you will unfortunately continue to hear from us with very last-minute openings. Really grateful for the providers who have stepped up. We have uhm, you know agency staff that are working the extra shifts to help staff these emergency facilities, but it is, we are — so we are moving as absolutely aggressively as we can to keep up with the volume. We did just — we had a gap in that volume last night. We should be in a better place for this evening.

CHAIRPERSON AYALA: Can you share, was it a processing issue or uhm, we just didn't have places to put folks?

MOLLY PARK: It was the volume of people coming in and then you know the way single adult system works is that people are placed in assessment beds first. So, it was volume of assessment beds, volume of people coming in, but I think it was really you know having multiple buses show up at 30th Street

2.2

2.3

2.2

2.3

2 late at night that all at one time, that caused that 3 bottleneck.

CHAIRPERSON AYALA: I appreciate that, okay, alright, thank you so much. You know, again, you know I can appreciate how difficult this time has been and you know this body is here you know to try to be helpful to the best extent of our ability, but we really are working hard to address a lot of the issues that have been raised by the constituents that we represent and average you know New Yorkers that are going through a really difficult time.

So, thank you for being here today and uhm, for sticking it through. I look forward to having more continued conversations about the issue, the asylum-seeking families and how we can be helpful there.

MARRICKA SCOTT-MCFADDEN: Thank you.

MOLLY PARK: Thank you for having us.

COMMITTEE COUNSEL: We will now be calling on members of the public. I will call up individuals in panels. Once your name is called, you may begin your testimony once the Sergeant at Arms sets the clock and gives you the queue. All testimony will be limited three minutes. I would like to note that written testimony, which will be reviewed in full by

2.2

2.3

Committee staff maybe submitted to the record up to 72 hours after the close of this hearing by emailing it to testimony@council.nyc.gov. The first panel will be an in-person panel and it will consist of former Speaker of the New York City Council Christine Quinn, Deborah Berkman, Robert Desir and Nicole McVinua.

CHAIRPERSON AYALA: You can begin. Welcome.

CHRISTINE QUINN: Thank you. Uhm, well, thank

you Chair Ayala and the other members of the

Committee who are here and who have been here today.

My name is Christine Quinn and I'm the President and

CEO of WIN, Women in Need. And I'm here to express

our strong support for and discuss the importance of

Intro. 522, which would require the city to fund

onsite mental health clinicians at every shelter for

families with children at a ratio of one clinician

for every 50 families.

WIN is New York City's largest provider of shelter and services to families with children experiencing homelessness. We operate 14 shelters and nearly 600 supportive housing units across the five boroughs. More than 6,200 people call WIN home every night including 3,490 children. In total, we

2.2

2.3

2 house over ten percent of all the homeless families 3 with children in the City of New York.

Becoming homeless and experiencing homelessness in and of itself is a traumatic experience. Every family living in shelter in this city including those at WIN have experienced trauma for being evicted to fleeing an abusive partner to navigating the city's onerous intake system for homeless families, as you guys have discussed. Many of those families also have unaddressed mental health needs such as PTSD, depression or substance use disorders.

I want to thank the sponsor of 522 who just joined us, Council Member Erik Bottcher and as he mentioned at the press conference, I may go over three minutes. I hired him for his first governmental job when he was 28 and now look, he's in the seat I used to hold. Pretty damn good if you think about it. Yeah, there you go.

Sorry, where was I? Okay, a homeless shelter should be more than a roof over a family's head. The time a family spends in shelter is an opportunity to eliminate barriers to mental health care by uncovering their needs, reducing the stigma and initiating treatment. To truly support families in

2.2

2.3

their journey towards wellness and permanent housing,
family shelters need clinical resources to offer
their residents. That is why WIN worked hand and
hand with Council Member Bottcher, our clients with
lived experiences, shelter and mental health

providers and advocates to develop this bill.

As mothers experiencing homelessness fight structural barriers, many also face complex personal histories. Trauma can impact people in ways that are subtle, insidious, and destructive in both the short and long term. Mental health and substance use issues are more prevalent among adults with exposure to traumatic events and experience and circumstances.

Given the intersectionality of trauma and homelessness, it's not surprising that mothers experiencing homelessness are disproportionately to suffer mental health needs and substance abuse disorders than those who are not. Research repeatedly finds alarming high rates of psychiatric disorder amongst homeless mothers, most commonly PTSD.

Now, I'm not going to go on and on because it's only three minutes but let me just say in summary that this is challenge for all of us who run shelters

for families. That we don't have funds that specifically can be used for hiring or contracting with clinicians. At WIN, we probably raised more private money than any of the other providers just because we're bigger and we still don't have the money to set aside for this and for these types of clinicians.

Two weeks ago, one of our clients, we gave them a mental health referral to the floating hospital, which is an excellent partner, an excellent partner. Three and a half months wait till the first appointment, and we all know the first appointment you know nothing really happens right. And, we have constantly on a regular basis, particularly children who demonstrate suicidal ideations and I'm telling you, when the police come and EMS come and they take them to the hospitals, nine times out of ten they just come back the next day and eight times out of ten without a referral.

This bill will not only help people do better when they are housed, which is the critical issue and remain intermittently housed permanently, it will also save lives and I'm just so grateful to Erik and to you Madam Chair and to the veto proof majority

2.2

2.3

that is on this bill because often our mothers feel
forgotten. They feel like they are for the forgotten
face of homelessness, and you have said to them today
that they and their children are not forgotten and

6 will not be forgotten as long as this City Council

7 sits in these Chairs in this esteemed building.

So, thank you very, very much and just lastly I want to say, all of your questions were f'n fabulous. You were on point. You got it right. I was so impressed. I don't mean it to sound patronizing as that does but really, so good but you made me proud. I believe in this institution, and you made me proud

CHAIRPERSON AYALA: No, no, no, that's the power of having people, representatives with lived experience representing you. [APPLAUSE]

so thank you. Sorry, for taking too much time.

Thank you for all that you do. I wanted to share because Former Council Member Quinn, it's uh, you know I shared my experience this morning, but you know I have my oldest son, who wants to be my favorite son. He's not, the little one is the favorite but he uh, and I'll go on record. They know, it's not a secret anymore but he was a very difficult child, and you know I was going through the

2

3

4

6

7

8

10

11

12

13

14

15

16

17

18

19

20

21

2.2

2.3

24

25

shelter system. His father had been you know murdered while I was pregnant. I was a teenager. Ι had like no sense of direction and my mother didn't understand me. I didn't understand her, and I remember you know vividly like this kid, he had attention deficit, hyper activity disorder and his mother was 16, 17 years old and didn't know what like ADHD was. All I knew was that everybody was shuttered. You know close the shutters on the door and pretend they weren't home when I was on my way because they didn't want to deal with him and I felt even further isolated because I felt like you know he was somehow preventing me right from being able to live you know, like any other young mother. And I remember being at home with him one day and he was just like, everywhere we would go, people would say, have you taken him to see somebody? Have you taken him to see somebody? Because he was like all - he would jump out of you know out of the building and fly through the stairs. He was bruised and cut and I'm telling you, he's a wonderful human being today. He's a functional adult but he was a horrible baby to take care of when you're 16. But I remember one day it was a really, really, really bad day at home and I

2

3

4

6

7

8

10

11

12

13

14

15

16

17

18

19

20

21

2.2

2.3

24

25

share this story and people sometimes tell me, why do you tell this story? It's a horrible story but it's an important story because it's a true story and that day, I just, like I don't know, I don't know what happened, but I remember grabbing him through his shirt and shaking him like so aggressively and I dropped him and I thought oh, my God. Like, I wanted to hurt him in that moment. I was just so blinded by everything. The stress of it all and I remember picking up the phone and calling you know and trying to make an appointment to see a psychiatrist for him because I thought, obviously he's the one that had the problem. And I couldn't get one. And I was at my wits end and I said, you know, the last person I called, I said, if you don't give me an appointment, I'm jumping out of the window and I'm taking him with me.

And they immediately gave me an appointment. And I was not going to jump out the window obviously, but I felt so suffocated in that moment that I knew enough to recognize that I needed the help, but the help was not readily available for me. And the fact that I had to say that to be able to access that level of care speaks to the dysfunction that we have

in a city. New York City, one of the richest cities in the world and we still, this was — my son is 32 years old now. I know I look like a baby but he's 32, remember I was a teenage parent and still 30 years later, we're having the same discussion about the need and the importance for mental health services for families. I really applaud you and I want to thank you know obviously you know you've been a champion of this, but you know most people don't understand. And my hair is you know, just how important this piece of legislation is and the impact that it would have on so many families. So, thank you, thank you and thank you.

CHRISTINE QUINN: Deputy Speaker thank you because you know, we can have and I think everyone on the panel agree, we can have a million statistics but at the end of the day, all the whole packet of legislation today is about people, and you put a human face on this in a way that is powerful given the positions you have reached in your life. Many people would hide in shame, which we would not want, and you've broken through that, so thank you for that.

CHAIRPERSON AYALA: Thank you. You can proceed.

2.2

2.3

DEBORAH BERKMAN:

2

1

3

4

6

7

8

10

NYLAG.

11 12

13

14

15

16

17

18

19

20

21

2.2

2.3

24

25

Deputy Speaker Ayala, Council Members and staff, good afternoon. Thank you for the opportunity to speak to the Committee on General Welfare on all of this legislation that will impact people experiencing homelessness. My name is Deb Berkman and I'm the Coordinating Attorney of the Shelter Advocacy Initiative at the New York Legal Assistance Group or

Thank you for sharing that.

The Shelter Advocacy Initiative provides legal services and advocacy to low-income people in and trying to access the DHS shelter system. NYLAG supports all of the legislation introduced today and I have provided you with written testimony supporting each of the bills. But because I only have a short time, I'm going to focus on a few bills. I want to start by responding to something that the DHS represented as Ms. Park said about Intro. 92 and I assume - she said this as part of I think trying to explain what a good job that DHS was doing dealing with peoples disabilities and accommodating them.

And one of the things that she said is that DHS now has a disability affairs coordinator. While it is true that DHS does have a disability affairs

coordinator, they do not have a mechanism to help people find providers to get the reasonable accommodations that they need in order to get the changes to the system that they need to access shelter.

So many of my clients who are experiencing street homelessness would be able to come inside if they could get a reasonable accommodation, but they are — either they don't have insurance or they have insurance and they're not able to find a provider to give them the medical documentation they need to get either the single room or the relaxation of certain rules that they would need to access shelter.

And as a result, they are on the street. I have called the Department of Homeless Services and asked them to help me find providers to create documentation so these people can come inside and there is not a process by which to do so. They do not have providers to send me to. There have been times that individual employees at the Department of Homeless Service have gone into their own rolodex's to try to help me get someone inside, but they do not have a process to comply with this part of the Butler Law Suit Settlement.

2.

1

3

4

6

7

8

9

10

1112

13

14

15

16

17

18

1920

_ .

21

2223

24

25

So, that's a real problem. I also, at some point, I also wanted to respond to something else that was said today. Someone had asked what the current PATH eligibility rate is. I don't know if that person is still here, but I want to report that in July of 2022, the eligibility rate was 18 percent. So, that means that 82 percent of families experiencing homelessness were denied - were found ineligible for shelter in July of 2022. Now, what DHS will say about that, is that it's because of the influx of migrants but that shouldn't be the case, because asylum seekers don't have to comply with all the same eligibility requirements that non-asylum seekers do. So, they are not the same opportunities to find them ineligible. So, it really doesn't make sense that there should be such a low number.

I wanted to support Intro. 522 and NYLAG enthusiastically — oh, thank you.

CHAIRPERSON AYALA: Go ahead.

DEBORAH BERKMAN: NYLAG enthusiastically supports the provision of mental health services in shelter and of course, we want to echo everything that was just said about the trauma of leaving one's home and that clients who offer mental health counseling

should have every opportunity to receive it. We do want to urge protections to be added to ensure that mental health services are only provided to families that voluntarily seek out the treatment. And to make sure that residents aren't coerced into entering mental health treatment and understand that it is voluntary. And also, we want to make sure there are protections to comply with HIPAA and make sure there are no sharing of information between a mental health provider and the rest of the shelter staff and DHS.

We think that — and ACS of course and ACS.

So, that is what — but we absolutely support this bill. We also want to support Intro. 276 that requires DHS to train the public facing employees on professionalism, cultural sensitivity, de-escalation and trauma informed theory but we would also ask that this Council go further. This is a very necessary first step to training, but we also think that this Council should create an effective oversight mechanism to record and investigate the reports of abuse and if warranted, to impose penalties for bad actors and penile violations where warranted. And finally, we want to enthusiastically support Intro.'s

2.2

2.3

132 and 513. One intake site for families with

2

1

3

4

5

6

7

8

10 11

12

13

14

15

16

17 18

19

20

21

2.2

2.3

24

CHAIRPERSON AYALA:

Thank you. [APPLAUSE]

In July of 2022, 1,829 families, not people, families applied at PATH. I represent a number of those families, a number of them and I know there's been a lot of controversy about this, but a number of those families reported to me that they stayed in the

PATH intake center for days on end.

children is wholly insufficient for a city this size.

They were given food, they were given water, but they slept there and that is just far too long for them to stay there and many families who find themselves needing shelter as many members of this Council recognize have no connection to the Bronx.

Uhm, so creating community-based intake centers would obviously decrease their trauma but allowing community nonprofits to process the applications would reduce the trauma even further because a lot of our clients already have relationships with community nonprofits, so they would be going to a place that they and their children already know is a safe space. And we think that would really go along ways to reducing the trauma. Thank you.

2.2

2.3

ROBERT DESIR: Good afternoon. My name is Robert Desir, I'm a Staff Attorney with the Legal Aid Society. I submit, we submitted our testimony already in conjunction with the Coalition for the Homeless. I want to thank the Chair of this Committee and also the Committee for holding this hearing on this important issue of homelessness. We want to mainly talk about Intro. 229 and City FHEPS. We support Intro. 229, which will fulfill the City Council's intention of structuring city subsidies to work as Section 8 and will maximize tenant

flexibility in their apartment search.

While Section 8 allows tenants who pay utilities a discount on their rent obligation that they can use to pay for utilities. FHEPS requires tenants to pay utilities in addition to 30 percent of their income towards rent. So, we support the suggested changes to Intro. 229. We would say that Intro. 229 should be amended to require HRA to reduce the tenant shares to reflect the cost of utilities as is done with Section 8. While preserving tenant flexibility to rent apartments at the statutory maximum.

We would also urge the Council to make funds available for HRA to upgrade its computer system to

2.2

2.3

2 handle this and some of the other policy changes that 3 I want to turn to.

In addition to 229, I think there are a number of other issues that should be addressed in order to maximize the effectiveness of City FHEPS and allow as many people as are eligible to be able to use the program and come out of homelessness. I first want to turn to the rent reasonableness requirement.

Because of this requirement, someone can find an apartment with the rent within the payment standard only to learn that the rent is not reasonable and that their application will be rejected.

In some cases, this determination is not made until after there have been extensive dealings over weeks, even months. This also negatively effects tenants who receive City FHEPS to prevent eviction. While they're in court, they may negotiate a rent that will allow them to stay in their apartment and it's very problematic if they sign an agreement that says this is what their rent is going to be only to present that rent to the administrators of the program to have that number rejected.

So, the City Council should eliminate this to ensure tenants are not unfairly prevented from

2.

_

renting apartments at or below the payment standard.

Another issue that's causing a lot of people who are in shelter to not be able to leave shelter is the issues around immigration status.

Despite there being no immigration status base restrictions in the laws authorizing City FHEPS.

Many without status languish in shelter because the city has not extended eligibility to them. Further, federal law that seems to limit eligibility leaves room for the city to extend eligibility to those without status. Also, these laws have been found unconstitutional and unenforceable and they do not preempt the city or state of New York from extending a benefit like City FHEPS to any U.S. citizen — non-U.S. citizen New Yorker.

Okay, so I'll just quickly touch on other issues such as uhm, source of income discrimination. I think it's very important that there's a commitment and funding to the Commission on human rights, so that source of income discrimination cases can be pursued and that we have staff that can offer real time solutions and help people who are experiencing this pernicious form of discrimination.

that we see in the application process that uhm,

Lastly, I would speak to the unacceptable delays

cause people to wait very long times before they can access an apartment and actually, uhm, cause people to lose apartments. Uhm, the review process needs to be streamlined so that any errors that are uncovered can be addressed quickly, so that communication is such that uhm, any issues can be dealt with and worked out without uhm, you know this kind of mechanical rejection of applications and people starting all over again. And meanwhile, time is lost. People languish in shelter, and you know also

I think that the city should set benchmarks for approving packages. Shelter staff should be trained to deal with the systems and to kind of learn the ends and out of the different programs to assist people in quick order and there should be processes to make sure that apartments uhm, are inspected timely and improved timely and that's not a source of delay.

lose out on opportunities.

So, these changes in addition to the passage of Intro. 229, which strengthen the City FHEPS program

2 and help more New Yorkers move out of shelter. Thank
3 you.

CHAIRPERSON AYALA: Thank you.

2.2

2.3

NICOLE MCVINUA: Good afternoon Deputy Speaker Ayala and members of the Committee. My name is Nicole McVinua and I'm the Director of Policy at Urban Pathways. Thank you for the opportunity to testify today.

Urban Pathways is a nonprofit homeless services and supportive housing provider. We serve over 3,900 single adults annually across four boroughs and for the purposes of time, I'm not going to read my whole testimony, so please refer to my written testimony for further comments on additional pieces of legislation. But I also wanted to focus on Intro. 229 today.

At the end of last year, a major step was made towards making the City FHEPS rental subsidy more effective by increasing the maximum rental rates to the fair market rent to FMR, which was intended to also increase the number of apartments on the market that were accessible to these voucher holders. But unfortunately, the city's application of the utility allowance has effectively decreased the value of the

City FHEPS voucher by requiring that the total rental
amount include utilities and when utilities are not
included, deducting the utility allowance off the top

5 of the overall voucher value.

2.2

2.3

And the current application you know excludes
City FHEPS recipients from accessing the majority of
the apartments on the market that are rent FMR
because most apartments don't include all the
utilities. And this is at a time when the city is
experiencing the largest average monthly rent
increases ever. So, this undermines the
effectiveness of the voucher and prolongs
homelessness, which is why we support Intro. 229, as
sponsored by Council Member Cabàn.

We believe that applying the Section 8 rules,
like the administration spoke to would work with this
bill and that the wording of the legislation would
allow for the Section 8 rules to be applied. Which
would credit back the utility amount to the tenant by
deducting their payment amount. So, you know we
agree with the administration that that would be a
good application, but we need to make it move faster.
I know that we've spoken to the Administration about
them changing their computer systems and updating

their technology, so you know we would like to see

that happen as soon as possible.

J

I also wanted to speak to you know the fact that

a lot has come up today about the need for quality

services, increased reporting, and all these things

are extremely important. The success of the city

shelter system and getting people housed quickly and

having quality services is based on the city's

investment in the system and the only way to have

high quality services is for our contracts to be

fully funded, which is just not the case.

You know, and we really need to support the workforce who are the backbone of these services.

Our DHS contracts budget minimum wage at \$15 an hour maintenance workers. So, that means that our staff are going home and they're worrying about how they're going to feed their own families. How they're going to pay their rent and we're just creating this cyclical system.

So, we really need our contracts to support our workforce, so that our workforce can be focused on what they are doing, providing the best quality service as possible. And also, so that we can maintain a qualified workforce. I know I'm out of

2 time, but I just want to say really quickly that you

2.2

2.3

3 know our organization is at a 32 percent staff

4 vacancy rate and has been for months because we

5 cannot pay enough because our contracts do not

include enough funding to pay our staff adequately

 \parallel and so, we have this constant turnover.

And we know that that negatively impacts our clients right and that's not what we want but without the proper funding, it's really, really challenging, and you know we want to open more safe havens. The city's talking about opening more safe havens, which is wonderful, but the contracts really need to be evaluated at the funding rates.

We recently opened a safe haven, and we cannot staff it. We have 20 vacant positions which is causing us to actually outsource you know our security and things, which is costing more money in the end. It just really doesn't make any sense, so I hope that the Council will consider you know cost of living adjustments in our contracts in the next budget cycle. We haven't had a true cost of living adjustment included in our contracts in the last three budgets. You know we had a workforce investment but it's not a continuous COLA that's

J

supplied every year and you know we really — that's really what we need if we want to make sure that our services are as high quality as possible. Thank you very much.

CHRISTINE QUINN: Madam Chair, if I can just add two points on what was just said. You know, the prior Council right towards the end of the term passed a piece of legislation that required that security guards at shelters get paid a living wage. So, that was probably I don't know 18 months ago by now, maybe 24 months ago. None of us have gotten a penny, not a penny. And when you ask DHS, when are we going to get the money, maybe by the first of the year but they don't know. And then the money that was put in by all of you in the budget last year, the COLA or workforce investment or whatever we're calling it, we've not seen a penny of that.

And they can't even maybe or [INAUDIBLE 2:25:44] is different, they can't even give us an estimate of when we're going to get that. So, we too have big gaps in you know, in employment with vacancies and also, we have big retention problems and employees are now mad because they've seen in the paper, money was promised and then to tell them, we don't have it

2.2

2.3

because the city hasn't given it to us for two years, it's just terrible. So, I just wanted; you reminded me of that.

CHAIRPERSON AYALA: I agree and thank you for that. Council Member Cabàn.

COUNCIL MEMBER CABAN: Yes, thank you. I mean, first I just want to express gratitude to the entire panel for your testimony. I just wanted to note that the representative from Legal Aid, I have your testimony here. Would really love to learn more and dig into the edits that you're suggesting and would encourage you to reach out to my Legislative Director Madhuri Shukla, so that we can engage in that process. Excited to do that and then just extra immense gratitude to NYLAG who uhm, you know has been a strong supporter and really helped us with this work. So, just really appreciate the work that all of you all are doing.

CHAIRPERSON AYALA: Thank you.

ROBERT DESIR: Could you tell me the name again?

COUNCIL MEMBER CABÀN: We — I [INAUDIBLE

24 ROBERT DESIR: Okay.

2:26:581.

CHAIRPERSON AYALA: Council Member Bottcher.

2.

COUNCIL MEMBER BOTTCHER: Thank you to the panel.

Uhm, Chris, can you speak to how we can ensure that

if mental health professionals are coming into

shelters, how do we ensure confidentiality? How do

we ensure that people don't feel pressured to take

that care?

CHRISTINE QUINN: So, all of the services in

shelter are voluntary. I mean, we can't, nor do we try to or try to force people because even if you wanted to force people, it doesn't work right.

Because if you want to go to job training. They have to want to go to have their children go to camp or go to recreation or whatever, you can't force it.

So, I think the way we make sure that works and we have to work with the Council staff on the language of this, but you just say legislation in a way that is legally appropriate, that this is voluntary one. And two, I'm not a lawyer but there must be examples of this in HIPAA or in other places within regulations at HHC or DOHMH that these materials will all be held confidentially. I know when I ran the New York City GALA's Antiviolence Project or Crime Victims Assistance Agency, all of

J

with social workers was confidential.

So, there are ways to do that and resources like

NYLAG and Legal Aid and others in the medical fields

who can help us do that. I know there are concerns

the materials that were relevant to victims meeting

by some that they feel that on the single side and it's just not my area of expertise. I can't speak to

that the psychiatric help or psychological help in

it. But I've heard from some folks that they feel

the single side is used in a surveillance way.

That's not what we're looking to do, and I think if you make sure in the legislation that it is noted that it is voluntary and all HIPAA — and even if we can go stronger than HIPAA because at times, I feel like HIPAA when there translation issues gets a little funky. I was recently in a hospital situation where like; I knew everything about the guy you know in the curtain next to me because of translation. He was very sick but anyway, so I'd like to go even further but I think we just legislatively you know we put it in the bill one.

Two, if we want to, we can set up some kind of requirement of training for providers right, that we train them on what it means to be in compliance of

3

4

6

7

8

10

11 12

13

14

15

16

17

18 19

20

21

2.2

2.3

much.

24

CHAIRPERSON AYALA: Thank you. Any other

questions for this panel? No, okay, thank you all so

Train them on voluntary. If we think that you know it's necessary that I don't think would be you know any kind of a problem.

Third, I just want to say I know the issue of a lack of psychiatric or psychological professionals has come up and that's true and I really want to thank Chair Lee, whose been giving us a lot of time to help us you know thought process around this.

When I was speaker, we had a similar type of shortage of nurses, particularly nurses who spoke more than one language. We created a partnership with Hunter for an accelerated but high-quality program that brought people to you know having nurses degree and it made it a big difference and I know that Hunter and other CUNY's would be interested in doing this here. Maybe that effects implementation also but those are all things we can work out and it's great to have the resources of groups like NYLAG who are willing to help us do that.

COMMITTEE COUNSEL: I will now call on the next panel, which will be a virtual panel. For those virtual, remember that there is few second delay when you are unmuted before we can hear you. That first panel will be Eric Lee, Jacqueline Samone, Amy and Juan Diaz. We will begin with Eric Lee.

ERIC LEE: Hi, good morning. My name is Eric

Lee, I'm Director of Policy and Planning for Homeless

Services United. Thank you Speaker Ayala and members

of the General Welfare Committee for allowing me to

testify today.

I will be summarizing my written testimony for the time allotted. HSU is grateful to the Council for its steadfast leadership on homelessness and affordable housing and we stand ready to work with you towards implementing solutions to strengthen and improve services for families and individuals experiencing homelessness.

The city's homeless services safety net can meet the current and future need by focusing on three priorities: Bolstering eviction prevention and legal services to meet the overwhelming demand. Establish a reliable DHS shelter pipeline to create purpose build service shelters and normalize the Fiscal

2.2

operations of homeless service providers and expedite the placement from shelter into permanent housing to shorten the time spent homeless.

Regarding the legislation discussed today, HSU supports Intro. 229 to remove rent utility deductions from City FHEPS vouchers and we would also support legislation to remove rent reasonable tests from City FHEPS.

For Intro. 522, while HSU members support additional mental health services in family shelters, mandating staff positions and case ratios, could make it difficult for small providers to comply with the bill given their lower than case ratios. We have two small providers that currently cannot find an SCSW for over a year now because of the case ratio.

And for larger providers, this bill would not allow the flexibility to enhance their existing services with higher levels of care such as hiring a psychologist at a 100 to 200 case ratio to complement their LCSW's and be able to prescribe medication for clients.

For Intro.'s 132 and 513, HSU supports a no room door approach to shelter, and we think that single adults would also benefit from additional intake

centers and the ability to be directly placed into

shelter by providers.

health shelters.

- -

can just wrap it up.

Single adult men often refuse to go to 38 Street intake center and providers see individuals with mental health diagnoses being discharged from hospitals and prisons but lost to the streets because they cannot place them directly in adult mental

For Intro. 190, HSU broadly supports the intent of the bill to publicize the rights of people experiencing homelessness and we recommend the bill include references to where each right incants into law.

For Intro. 92, we support making shelters more accessible spaces and recommend modeling, monitoring the progress off of ongoing efforts established by the Butler settlement. For Intro.'s 108 and 421, we support measuring out comps to improve the performance of the sector but feel that measurements should be made in the context of shelter sizes and corporate models rather than specific —

SERGEANT AT ARMS: Time is expired.

CHAIRPERSON AYALA: If you can just, yeah, if you

2.

2.2

2.3

ERIC LEE: Thank you. The Council may want to consider combining Intro.'s 108 and 421 and compliment the data reporting bill established by Intro. 212 to look at how lengths of stays within different shelter types and sizes correlate with specific exists from different types to different types of housing to better understand the effectiveness of housing resources for specific populations.

For Intro. 124, we support extending housing specialists to HASA in DV shelters, but the city must commit additional city tax levy dollars for DV shelters given that per diam rates are set by OCFS. We also have significant concerns about the reporting requirements in this bill given that it could be misappropriate by nimbies and also would not improve the provision of housing specialist services.

And finally, for training both 276 and 431, the Department would need to be responsible for developing the training curriculum and identifying vendors for shelter providers to be able to easily comply with the legislation as well as additional funding to ensure that providers are able to budget

2 for the additional training services. Thank you for 3 the opportunity to testify today.

CHAIRPERSON AYALA: Thank you.

2.2

2.3

COMMITTEE COUNSEL: Thank you Eric. Next, Jacqueline Samone.

JACQUELINE SAMONE: Thank you for the opportunity to testify. My name is Jacqueline Samone, and I am the Policy Director at the Coalition for the Homeless. We submitted joint written testimony with the Legal Aid Society who already discussed Intro. 229 and needed improvements to City FHEPS. I'd like to highlight a few other bills today. We support Intro. 92, which would create an advisory board for accessibility at shelters. For too long, homeless New Yorkers with disabilities have encountered a lack of accessibility when they seek services in the DHS shelter system.

The Advisory Board would complement the work being done as part of the settlement in the Landmark Disability Rights Law to help move to City of New York, in which the coalition is an institutional plaintiff.

As the city endeavors to make the shelter system more accessible for people with disabilities under

the settlement, an accessibility advisory board could identify and propose additional reforms. We are pleased that the legislation requires that at least two members of the board have lived experience of disability and homelessness and we urge the Council to increase the number of such members.

We strongly encourage the full spectrum of disability experiences to be considered in the creation of the advisory board. The Council should also ensure that the recommendations of the advisory board are given thoughtful consideration and that there is accountability regarding whether their suggested reforms are implemented. Several members of the coalitions disability focus group are also hear today to testify about this bill and we thank them for their advocacy and expertise.

We also support Intro. 124, which would ensure access to housing specialists. Well trained housing specialists with manageable caseloads are a critical resource in helping people move into permanent housing. However, the city must also proceed staff with a range of housing options to offer to shelter residents.

2.2

2.3

2.

25 is Ar

robustly enforce source of income discrimination protections and other fair housing laws and commit to building at least 6,000 apartments per year for homeless households and 6,000 apartments per year for extremely low-income households.

Intro.'s 132 and 513 could help homeless

The city must eliminate administrative hurdles

Intro.'s 132 and 513 could help homeless families, depending on how they are implemented but they do not address the underlying problems with the family shelter eligibility process that Council Member Restler laid out today.

As previously mentioned, in July, less than onefifth of families with children who applied at PATH
were found eligible for shelter and only ten percent
of adult families were found eligible. We encourage
the city and the state to address the many
bureaucratic barriers that families face when they
attempt to enter shelters and to implement reforms to
make it easier for both families with children and
adult families to obtain appropriate shelter
placement. Thank you.

CHAIRPERSON AYALA: Thank you.

COMMITTEE COUNSEL: Thank you Jacqueline. Next

is Amy Blumsack.

1

3

4

5

6

7

8

9

10

11 12

13

14

15

16

17

18 19

20

21

2.2

2.3

24

25

AMY BLUMSACK: Hi, good afternoon everyone. Amy Blumsack, Director of Organizing and Policy at Neighbors Together. We are a community-based organization that is 40 years old based in central Brooklyn and we work with uhm, I would say over a half of our members are homeless or unstably housed.

So, thank you Chair Ayala and members of this Committee for the opportunity to speak and for holding hearing and addressing homelessness.

We are here today in particular to uplift our support of Intro. 229. Last year, City FHEPS increase was a really big step in the right direction but there are significant barriers that remain to the vouchers effectiveness and efficiency and uhm, some of the additions to the final rule that were implemented last year are causing a lot of confusion and really slowing down people's ability to move out of homelessness. In particular, in terms of Intro. 229 and the utilities deduction, it effectively undermines the increase that we fought so hard for over all these last years and uhm, you know in today's rental market where from this year to last, rents have gone up over 20 percent in the city. It's an historic increase to be undercutting the value of

a voucher is short sided and problematic to say the least and effectively it's keeping people homeless longer than necessary.

Additionally, I think the utility deduction is confusing. You know many of our members didn't know that the utilities deduction was added to the City FHEPS rule. They weren't aware of it, so we have desperately worked with members to after overcoming the immense hurdle of source of income discrimination and actually finding an apartment that will take their voucher, right. Submitted their application, waited months for their application to be processed and then only towards the end of those many months of waiting, thinking that they had an apartment available to them, found out that they weren't able to have the apartment because of the utilities deduction.

So, I think if the goal of the city and HRA and DHS is to get people out of homelessness as fast as possible, then absolutely, we need to pass Intro. 229 and remove the utility deduction. We would also support creating a utility allowance, which would credit the amount of utilities to the tenants portion, their portion of the rent.

2.2

2.3

Uhm, there was definitely one more thing that I wanted to say. Uhm, oh, right, that it is actually, it's important to remove the utility deduction and to give people choice right. People who are homeless have to make the choices that are very best for their family, right? And so, uhm, if we are removing the utility deduction, then they are able to choose you know, do we want to pay all the way up to the top end? Like do we want to use all the way up to the top end of our rental assistance voucher, that might get them access to an apartment that's closer to their network, closer to child care, closer to family. We don't know but we should trust people to make the decision that is best for their family and for themselves as individuals.

Uhm, and I guess the last thing I want to say is just to uplift that source of income discrimination is still a major issue, so, while I understand the desire to make all vouchers sort of same and similar, they are all being discriminated against, and I think that anything that the city can do to address that is critically important. So, I think removing the utility deduction, crediting utility allowance and you know making that long term investment in people,

right is essential and then additionally addressing the rest of the barriers to City FHEPS, which I'm going to lay out in our organizational testimony, our written testimony are critically important as well.

So, thank you for the opportunity to speak.

COMMITTEE COUNSEL: Thank you Amy. Next, Juan Diaz.

Thank you Chair Ayala and members of the General Welfare Committee for holding today's important hearing. Good afternoon. My name is Juan Diaz and I'm a Policy and Advocacy Associate at Citizens Committee for Children. A multi-issue children's advocacy organization dedicated to ensuring that every New York child is healthy, housed, educated, and safe.

Today, I would like to focus my time on two bills. Intro. 229 by Council Member Cabàn will stop the deduction of allowance for the maximum monthly rent for City FHEPS. This bill is important because it will ensure that the value of the rental assistance matches actual rent to expenses and will prevent landlords and brokers from turning families away.

2.2

2.3

utility payments.

Prior to joining CCC for over three years, I was a supervisor at Brownsville Homebase. A homeless prevention program funded by HRA. I witnessed, I witnessed firsthand how multiple administrative barriers with housing vouchers get families relocated in a timely manner and often times into shelter entry. Landlords and brokers demand the full rent and commission payments and expressed hesitance about

Families confusions grew as they were unsure of their monthly rent contribution and who is responsible for paying apartment utilities. The overall confusion of this unnecessary barriers created several weeks of delays and eventual discharge between all parties involved. A utility allowance could make the process a lot easier for families to relocate.

CCC is also supportive of Intro. 522. Children in shelter are subject to a substantial level of stress and trauma and families urgently need mental health services. We strongly support this bill but do want to know the few issues we feel should be addressed. Any bill enhancing services in shelter through the family mechanism at the appropriate level

to attract and retain providers. To ensure providers are not being pulled out of communities in order to work within the shelters, we also feel the city should explore ways to provide flexible funding and partner with existing community organizations to bring providers on site at shelters. These providers could include existing Article 28 and Article 31 tenants, FQHC's, Health + Hospitals and other types of providers that offer unique models covered by Medicaid.

Finally, the one to fifty ratio may prove unimanual for professionals who are already facing caseloads, it might be worth additional review.

Thank you for the time and your commitment for children in housing and I plan to submit written testimony in the coming days.

Just to conclude, as I mentioned before, I was working at a homebase in Brownsville for some time, some years and I witnessed firsthand how many families in Brownsville struggle with these vouchers and even after they move to other boroughs, they continue contacting homebase with confusion over who is going to pay utilities. Uhm, not being able to

2.2

2.3

COMMITTEE ON EDUCATION JOINTLY WITH THE COMMITTEE ON OVERSIGHT AND INVESTIGATIONS

2.2

2.3

get assistance from HRA, so we truly, truly want the City Council to focus on this bill. Thank you.

COMMITTEE COUNSEL: Thank Juan. Our next panel will be an in-person panel. It will consist of Sara Wilson, Milton Perez, Sharifah Harvey, Douglas Powell and James Lee.

SERGEANT AT ARMS: One, two, one, two. Okay.

COMMITTEE COUNSEL: We will begin with Sara

Wilson.

SARA WILSON: Thank you. Sorry. Okay, good afternoon everyone. Hi, my name is Sara Wilson. For identification purposes, I am disabled and a former shelter resident. I spent two and a half years in five different shelters. One of which was allegedly a medical facility or a MICA, which is derogatory term they used to use. I emphasize this because this is my experience as someone entering the shelter system as dual diagnosed, both mental health and substance dependency. Not that it matters but also in recovery as well but somebody who came already in services.

Uhm, I speak on this experience because as far as Intro. 276, trauma-based training, it is imperative that that is beyond necessary in these shelters.

2.2

2.3

Just a brief example when it was time for my psych, social, there was ten different staff members sitting around eating lunch. Like I would be entertainment as I discussed every different trauma, therapy, providers, substance, all details of my entire history, I had to sit around. And I bawled in front of all these people who then I lived with. They giggling, uhm, different responses to all my different levels of trauma and if I chose not to answer that then they wouldn't have completed my paperwork.

I was their entertainment and it's just one very simple issue that is able to continue to go on because of one reason people are not trained. So, in addition to that training, other things that definitely would be necessary to uhm, prevent the trauma that people are now reexperiencing based on their stay in shelters. You know uhm, there's no real reporting as well, which I've heard people mention around here today, which would definitely be an issue and just to get on board with your omitting of the utility voucher, I definitely am in agreement with that as well and I know that until we actually finally do away with the 90 day rule and as part of

2 the G
3 hold:
4 heard
5 that
6 time
7 they

2.2

2.3

the City FHEPS voucher as well, that's definitely holding up the length of stay, which I think I've heard people say was is over a year and a half but that will take off a great deal of that length of time if when people are in their intake shelter and they can process their City FHEPS application with those documents instead of waiting an additional three months.

So, I know I have a whole bunch of other things I want to say but uhm, I'll respect the time and uhm, yeah, in support of 276. Thank you very much and have a wonderful day guys.

CHAIRPERSON AYALA: Thank you so much for sharing that.

MILTON PEREZ: Thank you Sara, right on time. My name is Milton Perez, I'm from the Bronx Puerto Rico. I'm a member of Vocal New York Homeless Union. We have a prepared statement that's going to be submitted but I don't feel like reading it right now.

Some of those things in the title and in the statement are due to counter protective rent, reasonableness or fair voucher deductions, opaque application process and limited eligibility. I'd like to speak more on the perspective of somebody

that was in the shelter system over five years. Let
me put my glasses back on. The space that you guys
are occupying right now, from the wall to the end of

the desk, that's about the size of the dorm I was in,

6 and I shared that space with 20 people, 20 total.

Where Mr. Eric is right now would be my bed in that space. There would be a locker where you're at and there will be another bed where Ayala is sitting at right now in that close of a space. So, thinking back on those times, most of what has been said here is just talk. It is not good enough because if you spend that much time in the shelter and you're lucky to get a voucher to find an apartment, and all of a sudden they pull the rug from under you and they bring these policies you know that uh, oh, the voucher, no, no, you're incorrect. Whatever policy they choose to pull up at the particular time, it's just not good enough you know. So, what Caban is doing to give up this particular barrier, you know I'm all for it. Anything that the Council is willing to do to give up some of these barriers, we're all for it. That's why we were concerned. There's too many barriers. This is just one of them.

1

5

7

8

10

11

12

13

14

15

16

17

18

19

20

21

2.2

2.3

24

15

16

17

18

19

20

21

2.2

2.3

24

25

2 To your bill, bill 92, the shelter I where I was 3 in, there was a 62-bed shelter. It was technically 4 an employment shelter uh, but there were - at the 5 height of it, there were 13 people in wheelchairs, three blind people. About 7 people with walkers and 6 7 uh, people on dialysis, things of that nature and uh, 8 and I say that because they didn't receive any special treatment. You would think they would but no. It didn't matter there were wheelchairs. There 10 were elderly 66, 75 years old. Uh, they were not 11 12 treated in any special type of way. So, your bill, I'm all for it also to shed some light on those 13 14 issues with people with disabilities and how they are

Overall, this needs to be done. You know the City Council working with not only the city staff but the shelter providers and the most important people, the people that are directly impacted. Whether they're advocates or presently in shelter or formerly in shelter, we all need to work together. Thank you.

treated in the shelter system.

DOUGLAS POWELL: My name is Douglas Powell, this is my ID. I live 111, 7th Avenue. This is my disability card. Ms. Diana, everything you were saying was true. There is no accommodation for us.

-

2.2

She sat here and she lied. I wanted to yell at her and speak but I didn't want to disrespect you, so I had to hold my patience. But she lied about the whole situation. I got there 2019, September the 4th. December 27th, the bed collapsed on me. They left me on the floor for six hours before they took me to the hospital because nobody walked. I was screaming. I was hollering, nobody came. I called people on the phone, but they were too far to come and help me.

My family had to call up to the shelter. I hung up on them. They kept calling until somebody picked up and said hello and they explained to them the situation and then they came back there to get me. I stayed in the hospital for six months. They did not want me to come back to that shelter. The doctors, the social workers, they all fought for me to come back to that shelter. They discharged me out of the shelter. They tried to make it look like I was never in that shelter because they was trying to cover up that fall and I'm not walking around.

So, I don't know why she would sit here and lie to you like that, knowing she was lying but she didn't know I was in the audience and believe me, if

2.3

_ .

I could have yelled out, I would of, but it would have been totally disrespect and I can't do that. I can't disrespect nobody. I was doing that when I was a kid. I'm a grown man now, so I got to wait until the order.

Now, I have an apartment. I had it for four months. They are supposed to call me but seven days since they called me. They've been holding this apartment from me for four months. They told me they can't hold it no more. I called their supervisor today; she said somebody was going to call me.

Nobody still never called me.

Nobody from HRA still never called me. I went down their Friday and Wednesday, they said they was going to call me, they still ain't called me.

As far as the 229 bill, I'm with that. Because the thing about it, she just sat here and told you all how we're going to spend our money. She ain't asking us, she told you all we're going to give her \$50 for light and \$50 for gas. And I know, I'm not using no gas that's going to cost me no \$50 because I'm not cooking that much.

So, now you just took \$100 from me for nothing.

Now, maybe the light, even though that's not going to

be \$50 because I was always taught just to leave the

3 bathroom light on because the way we was coming up.

4 The bathroom light is going to shine the whole

5 | building, the whole apartment.

1

2

6

7

8

10

11

12

13

14

15

16

17

18

19

20

21

2.2

2.3

24

25

So, why would it cost me \$50 for a light bill?

So, if they can help us not pay that light bill, that electricity bill because somebody is getting over because one paying \$19 in rent and bill is \$2,218, where is that \$318 going?

SERGEANT AT ARMS: Time is expired.

DOUGLAS POWELL: With that I got to respect you all again and go.

CHAIRPERSON AYALA: Thank you so much and if I can help you, we'll talk.

DOUGLAS POWELL: Yes ma'am.

SHARIFAH HARVEY: Good afternoon. My name is

Sharifah Harvey. I am currently experiencing shelter

and homelessness and have been for over year, over

two years, over three years. So, I want to speak to

some of the general issues that are going on with

using City FHEPS but of course, there is the issue of

having uhm, just being able to see an apartment.

Once they know that you have a voucher, you don't get

a call back. But I wanted to address the issue with

2.2

2.3

the housing specialist as well because some of what — some of the introductions are addressing having more housing specialists, which I think is necessary. I don't think it's appropriate. It's not enough to have three homeless specialists, three housing specialists in a shelter that has 100 people, 100 clients. That seems like a set up to fail.

And so, they're supposed to be helping us to find housing. We're looking on our own. They are helping us but if they're not — if they are not doing their job, we languish. The clients languish and one of the things that — I'll just give you an example of what happened. Yesterday, I got a notice telling me that I have a viewing yesterday. So, I'm being told in the morning. So, I'm supposed to go in the evening to a location and look at an apartment.

Now, one of the issues I have is that that's not a timely notification number one. It's disrespectful and this is what they really do and number two, there should be how much, what size unit it is and how much the unit is for. When I asked them these questions up front, they act like I'm asking them something that's like confidential. If it's a one-bedroom apartment and it's \$900, that's very different than a

J

studio that's \$2,000. I mean, whatever the voucher covers, you need to be able to make an informed financial decision and they're making it seem like, well, HRA is paying for it. No, they're not. You're paying for it; you're paying for it. Later, even if you're not paying for it, immediately now all of it, you still have to come up with funds to get on your feet for later. So, they act as if \$2,000 is nothing because HRA is paying it. That's not how it is.

Number two, you need to know what size unit it is. You need to have valid information. So, it's more than just training. There needs to be policies and oversight on how housing specialists look for housing, where they're sending people. If — I just got some interesting bit of information from hearing the Council and to know that they're sending me multiple times to an area that has the most people being evicted. Hmm, that's interesting and the places that they've been showing me when I've been able to actually see a unit, have been going for \$2—the landlords have been asking for over \$2,000 or the maximum rent.

Now, that's ridiculous. That's just not making any sense. So, these are the issues that need to be

addressed and I support all the introductions but there also needs to be oversight and I think that the report should be more than just yearly, it should be monthly or quarterly.

CHAIRPERSON AYALA: I agree and thank you. Can you put your mic on.

SERGEANT AT ARMS: Press the button on the microphone.

JAMES LEE: I pressed the button, thanks.

Alright, well, my name James Lee. Let's see Intro.

124 and Intro. 229 are improvements but more action

must be taken to help people move out of shelters

with vouchers. I've been in the DHS shelter since

December of 2021. Administrative issues and payment

delays must be addressed to restore landlord and

broker faith in the voucher system. Even those that

don't discriminate based on race or income, won't

accept vouchers, if they don't think they'll be paid.

When voucher holders are disadvantaged compared to other applicants, landlords and brokers find ways to not rent to voucher holders, especially when there are other applicants for an apartment. So, voucher holders are left stuck in the shelter system unless they agree to move into the worst neighborhoods.

2 Straining the shelter system, increasing costs, and 3 effectively resulting in income discrimination.

2.2

2.3

While these bills address the lack of housing specialists and the utility allowance, the city should make additional improvements to City FHEPS to address these administrative issues.

I'm just going to address a couple of other things that wear said earlier. Uhm, the shelter that I'm in didn't have a housing specialist since December and you know like I understand the lady up here. She said like uhm, they've had housing specialists and you know, maybe she's just misinformed or maybe someone's not telling her really what's going on because I noticed going through the system, there's a lot of that happening. Someone tells you something to your face and they're completely wrong and sometimes you don't get the impression that they're trying to lie but they're really wrong. They really are.

Uh, let's see, another thing is, do any of you know how much it costs to put someone in an individual shelter for — individual adult shelter for one month? Is it \$4,000 or something like that?

Okay, right. Okay, so, yeah, I'm going to like bring

CHAIRPERSON AYALA: Okay, you can also submit something to me, and I can forward it to the staff, and they'll call you.

JAMES LEE: I'm sorry, send it to her?

CHAIRPERSON AYALA: To myself.

1

2

3

4

6

8

10

11

12

13

14

15

16

17

18

19

20

21

2.2

2.3

24

JAMES LEE: To yourself, oh, I'll do that.

CHAIRPERSON AYALA: Yeah, yeah, my information is online. Thank you.

JAMES LEE: Oh, thank you so much.

CHAIRPERSON AYALA: Thank you. Any questions for this panel? Thank you all so much for coming in and sharing and don't leave, I want to get your

25 | information. Great job guys.

_

DOUGLAS POWELL: Notice we all made it within three minutes. The homeless are always doing their job, always following the rules. Thank you.

COMMITTEE COUNSEL: I will now call our next panel, which is a virtual panel who consists of Alexandra Dougherty, Patrick Boyle, Kenisha Atkinson. Alexandra, you may begin when you're ready.

ALEXANDRA DOUGHERTY: Hi, good afternoon. My name is Alex Dougherty, I am a Senior Staff Attorney and Policy Counsel at the Civil Justice Practice at Brooklyn Defender Services. I'd like to thank the Committee on General Welfare for inviting us to testify.

BDS supports the goal of all of today's bills that the custom barrier is preventing New Yorkers from accessing shelter and ultimately securing stable housing. First, we strongly support establishing borough-based family intake centers. Families experiencing homelessness are routinely shut out of the family shelter system because PATH remains the single point of entry. The intake process has become increasingly opaque and backlogged in recent months. The people we serve, many of whom have been mentioned, travel for over an hour from all over

Brooklyn to the Bronx, have reported waiting at PATH

3 all night with their kids before receiving temporary

1

2

6

8

9

10

11

12

13

14

15

16

17

18

19

20

21

2.2

2.3

24

25

placement. Establishing additional intake centers is 4 a necessary first step and DHS should further improve 5 shelter accessibility by easing the many other owners

7 eligibility criteria that have been discussed today.

BDS also strongly supports Intro. 229. convoluted utility rules add unnecessary difficulty for New Yorkers who are already struggling to obtain and utilize housing vouchers. We repeatedly see clients find apartments below their voucher rent limit, only to learn later that the apartment won't be approved because not all utilities are included in the rent.

For example, one BDS client, Ms. O. was recently selected for a two-bedroom apartment after two years of apartment hunting with a voucher. The unit was \$200 under the City FHEPS payment standard but the utilities weren't included, so after the deduction, the unit didn't meet the payment standard.

Ms. O. was then put in the position of accepting a one bedroom, which was too small for her and her kids or starting her whole apartment search from scratch with illuming eviction date. Her moving the 2 utility deduction would simplify the City FHEPS
3 application and apartment approval process for

2.2

2.3

everyone involved.

And finally, we appreciate the intention of

Intro. 522, and we agree that entering into a family
shelter is a stressful experience, but we're

concerned that introducing mental health

professionals who are mandated reporters directly
into family shelters, which are people homes, will
inadvertently increase surveillance of low-income
families.

In our experience, Black and Latinx families are already vulnerable to unnecessary reporting to child protective authorities because of biased reporting that completes poverty with neglect. The near constant surveillance in family shelters puts these families at increased risk of reporting. And placing mental health professionals who are mandated reporters, within this setting, only amplifies the risk.

Yet, City Council consider providing mental health services that are community based, culturally competent, flexible and importantly funded outside of DHS and ACS. Thank you again and I'll direct you to

1

our written testimony for additional comments.

3

Thanks.

4

5

COMMITTEE COUNSEL: Thank you Alex. Patrick Boyle.

6

PATRICK BOYLE: Thank you so much to the Chair 7

and to the members of the Committee for the

8

opportunity to testify today. My name is Patrick

Boyle, I'm an Assistant Vice President with Public

10

Policy with Volunteers of America. We're a social

11

services organization working to end homelessness in

12

the greater New York area by 2050. We're also a

13

nonprofit developer of affordable and supportive

14

housing as well as a homeless services organization.

Our full testimony will speak to our comments on

15

the full range of bills being heard today but in my

16 17

limited time, I just wanted to point to a few

18

reactions we had to a number of them.

19

that's tracking social service providers like VOA and

The first one I'd like to point to is Intro. 0108

20

others across a number of different metrics. At VOA,

21 2.2

we're very open to you know all scrutiny of nonprofit

2.3

providers. We feel like it's a very important part

24

of the process. However, we're concerned with some

25

elements of this legislation and some of the metrics

want to create a system where there's

being tracked, lacking necessary context and nuance.

As if the previous speakers have spoken to. We don't

misinterpretation of this data and metrics in a way

ours, based on program types, program sizes and other

that unfairly leads to scrutiny on providers like

2

1

3

4

6

7

8

10 11

12

13

14

15

16

17

18

19

20

21

2.2 2.3

24

such metrics. We also wanted to comment today on 0190, on homeless bill of rights. This is a concept that we're very supportive of. We're also an organization that is very committed to ensuring all clients that

complaints, to seek information across a whole range of services. However, we just want to ensure that

their full range of rights, their ability to file

come through our programs here in the city understand

this legislation is merely capturing rights and

we're required to do as providers.

regulations that already exist and aren't creating

anything new and isn't in conflict with anything that

So, I think there's some further analysis needed of this to ensure that there's nothing that's conflicting with our existing obligations as providers.

1

3

4

5

6

7

8

10

11

12

13

14

15

16

17

18

19

20

21

2.2

2.3

24

25

Another bill I want to address today is 0137, which is the legislation to encourage intake shelters in all boroughs. So, as many previous organizations that we work with have commented on, we're very supportive of this legislation. We feel it would greatly reduce the burden of individuals and travel times and other hardships related to seeking their legal right to shelter. And so, we really encourage the Council and the Administration to take this up and to you know really kind of push back against some of the obvious political complications that arise from citing. We're very encouraged by the Council Members who said that they would encourage this within their own Council Districts. I think that's more of a leadership that we need.

So, again, I just want to thank the Chair. Thank the other members of the Committee for the opportunity to host this hearing and for hosting a hearing that's really focused on the shelter world and the shelter experience particularly for clients, which is really important to us as an organization. So, thank you.

COMMITTEE COUNSEL: Thank you Patrick. Next, Kenisha Atkinson.

KENISHA ATKINSON: Hello, can you guys hear me, hi. Thank you for this opportunity to speak here.

My name is Kanesha Atkinsons. Thank you for the opportunity to speak on behalf of myself and the New York shelter residents. I was taught from when I was a young child that closed mouths do not get fed. If you want change, sometimes you have to be the voice of reason.

As a young individual living with disabilities in the shelter, I stand by Intro. 92 to create and advise accessibility advisory board. This bill will be important because the voiceless with disabilities will finally be heard. The tears that no one knows about won't be in vein and the trauma from being dismissed, overlooked, and muted can slowly start to heal.

This is for people who came before me. The one's that stand with me in the present and the ones who will come after. With that being said, I have been in this system now for about three years, going on three years and one of the main things I always told myself was, I was not going to leave this system without my voice being heard about some of the things that go on that shouldn't go on especially when you

2.2

2.3

have disabilities. And I just, I want this bill to
be passed because I see people that could be my mom
and my grandmother that are here, that they don't
even have the right help. They're not getting the
proper medical attention and they're just stuck. And
I don't like seeing that, especially as a minority
because unfortunately my skin tone is the tone that I
see more than anything else in the system. And I

CHAIRPERSON AYALA: Sorry, thank you so much for that and uhm, and I believe that it is important that people like you and I and others with shared experiences are vocal because you're right, if we don't speak up, no one will and change will not you know won't happen, so thank you.

told myself even before I leave, I want my voice to

be heard and it's happening. Thank you.

COMMITTEE COUNSEL: Thank you. I will now call up our next panel, which will consist of Sara Newman, Jonathan Gaffney and I apologize if I mispronounce your name Mimbeu Oshagara(SP?). We will begin with Sara Newman.

SARA NEWMAN: Sure, uhm, thank you to Chair Ayala and to the General Welfare Committee for the opportunity to testify today. My name is Sara Newman

and I'm the Director of Organizing for the Open
Hearts Initiative. OHI supports communities across
New York City who welcome homeless neighbors and
advocate for housing justice in our own backyards and
through this work, we've gotten to know hundreds of
neighbors who are experiencing homelessness, some of
whom are here testifying today.

And we're here today to advocate alongside them for reforms that would help address some of the key issues that they experience in the shelter system.

There are two themes that come up again and again in our conversations with homeless neighbors. First, that it's far too difficult to exit shelter and get into permanent housing and second, that in their time of shelter, they often feel dehumanized rather than supported.

Right now, as many folks today have testified, so many people are staying in shelter for years, not because they want to, not because they don't have a voucher but because it's so hard to get into housing. And if we want shelters to be a brief stop on the way to housing, we need to make it easier for people to exit shelter and get housed. And we should be staffing shelters with that goal in mind.

2.

J

Having dedicated housing specialists is an important step to do that and we strongly support Intro. 124 for that reason. I also want to echo what folks have said, that despite what DHS said today, what we hear from folks is that there are not dedicated housing specialists in every shelter. That case workers are often playing that role and no matter how great a case worker is, when they have a large caseload and are managing a wide range of responsibilities, it's really hard to be proactive in a way that you need to to help someone navigate a

So, we hope that this will be a full time you know position rather than something loaded onto case workers already full plates and hope that will be made explicit in the legislation.

really challenging housing search.

Another immediate step that the Council could take to help folks exist shelter more easily is passing Intro. 229 to remove the utility deduction. As folks have said, this currently acts as yet another barrier to finding housing by decreasing the value of the voucher when utilities aren't included in the rent and so that's very important as well.

And finally, you know, it's also important to make sure that for whatever amount of time folks are in shelter, they're being treated with respect and dignity and that's unfortunately something that our homeless neighbors tell us sometimes is not happening in the shelters that they're in.

Staff behavior plays a really big role in creating a safe or unsafe environment in a shelter, which is why Intro. 276 is really important. Shelter staff need to be given the tools to handle the moments of conflict that will inevitably come up in a setting where people are experiencing in that stress. De-escalation training and trauma informed care are crucial, and that work should go beyond an annual training, as many folks have mentioned but that training is a good first step. Thank you.

COMMITTEE COUNSEL: Thank you Sara. Next Jonathan Gaffney.

JONATHAN GAFFNEY: Yeah, hi, my name is Jonathan Gaffney, I'm the Housing Campaign Manager here with Neighbors Together. You already heard [INAUDIBLE 3:16:13] speak and I'm going to read the words and testimony from one of our formerly homeless members, when describing this hearing and the legislation that

2.2

2.3

it would entail. This woman was adamant that I share some words on her behalf. She was extremely excited about the prospect of giving verbal testimony. When something came up last minute, she told me to read some words on her behalf.

So, thank you so much for your time and yeah, one of our members names here is Shanika O'Bryan. She was a formerly homeless member later at Neighbors Together. She's had a City FHEPS voucher for over a year and here is her statement.

In conjunction with raising my rent, my landlord refused both LINK and City FHEPS, has payment methods all around. After fighting to stay in my apartment and working with city agencies, like Homebase, I became homeless a couple of days before Thanksgiving with my two teenage children.

Thankfully, I am currently in an apartment that suits my needs, however, that is primarily due to the help of Neighbors Together. Neighbors Together worked with the Press to shine a light on my circumstance, which helped me tremendously. Working as a Teachers Aide for the City of New York, people were baffled that a person like me who was gainfully employed could become homeless.

3

4

5

6

7

8

10

11

12 13

14

15

16

17

18

19

20

21

2.2

2.3

24

25

Mimbeu Oshagara (SP?).

I do not believe that I could have found an apartment that suited my needs on my own in large part due to the utilities deduction. While in the shelter system, it took me over eight months to find an apartment with my City FHEPS voucher. I believe that the utility deduction was a huge reason why it took me so long to find an apartment and limited what apartments were available to me. The utility deduction being a massive hurdle is not an isolated issue with just myself. When I was in the shelter system, I heard so many other people having the same problems with utility deduction, reducing the overall price of the voucher making it less effective.

I hope that the utility deduction is removed entirely from the City FHEPS voucher and a more reasonable utility allowance or something different can be implemented instead. Again, those are the words of Shanika O'Bryan, a formerly homeless member leader at Neighbors Together who could not be here, so I'm testifying on her behalf.

Thank you so much for your time and I would like to yield time back to the Committee.

COMMITTEE COUNSEL: Thank you Jonathan.

1

3

4

6

7

8

10

11

12 13

14

15

16

17

18

19

20

21

2.2

2.3

24

25

MIMBEU OSHAGARA: Alright, I could be heard? Uhm, I don't know if you all can hear me.

CHAIRPERSON AYALA: We can hear you.

MIMBEU OSHAGARA: Okay, great, so I would first like to start by saying, you pronounced my name pretty well. It surprised me. Uhm, let me uhm, I wrote something, so I'm trying to get to what I wrote. So, if you guys can bear with me a second.

Alright, hi everyone and thank you for this opportunity. I am a paraplegic who is fully paralyzed from the chest down. I tell you this just so you know where I'm coming from when I speak. I have been in a city shelter for a while and there have been many times when I felt no one cared or understood what I was going through. We need special attention, for we all do not have the same disability.

Intro. 92 bill would be a great step forward in my opinion. Shelters have a lot on their hands and sometimes things can be overlooked. When things are overlooked, people suffer. An extra pair of eyes you know would not be harmful to anybody. Being homeless is difficult in itself but I can tell you from experience being homeless and disabled can be hell.

There is so much to accessibility than just having a ramp. This is part of the reason why I love the fact people with disabilities who are or have been homeless can bring up ideas and suggestions. Talking with other people who are disabled in the system, I can say, we feel discouraged, left out and we feel as if at times, we are on our own. Things do not just get better on their own. Questions have to be asked and answered and work has to be done. This is why I believe in Intro. 92 bill.

I would like to close by saying this can only do good, rather than harm. I pray and hope it's passed. Thank you.

COMMITTEE COUNSEL: Thank you. We will now call our next panel, which is also a virtual panel. It will consist of Nora McCarthy, Helen Strom and Katrina Corbell. Nora McCarthy's first.

NORA MCCARTHY: Hi everybody. Thank you so much for the invitation to testify today members of the Committee and the public who I really enjoy hearing from. I'm the Director and Co-Founder of the New York City Family Policy Project. For 25 years, I've been working with youth and parents impacted by the

2.2

2.3

2.2

2.3

child welfare system here in New York City as well as families impacted by homelessness.

It's from this position that I'm speaking today about some of the intended effects that some of the policies introduced today may have on children and families in New York. I'm also speaking with you on behalf of Partners who joined with Family Policy Project on testimony seeking that project, the Center for Family Representation and Rise, which all work with families impacted by homelessness and child welfare involvement.

I wanted to share our support for Intro. 276 that would bring a trauma informed lens to DHS shelters.

As many people have said, this is badly needed.

Treatment of families in shelters is often deeply discouraging and ugly and training to offer a more supportive and caring environment is very much needed.

At the same time, we oppose Intro. 522 that would mandate mental health providers in shelters. As some other folks have mentioned, this raises real privacy concerns and is likely to increase the shelter to ACS pipeline which harms families with a function of the form of surveillance, that can actually discourage

families from seeking treatment and from getting the help that they may want and it also uhm, conflates involvement in shelter with a mental health issue in ways that is troubling.

I really and truly hear that the Council's intent in mandated mental health services come from a place of wanting to make sure that families can get support. That family support can be much better provided in our community providers, making sure that there is continuity of care for families who continue getting help once they leave shelter and not concentrating our mental health resources in places that are meant to be temporary and also non-stigmatizing.

From much of the discussion and testimony today, you would think that PTSD and mental health issues are the main driver of shelter involvement. I think every body here knows that we have a terrible housing crunch and landlords are not accepting vouchers, rent is through the roof, and I think it really needs to be directed toward housing and our shelter staff need to be primarily involved and focusing long-term, permanent housing.

2.2

2.3

There is also some disturbing talk in the Daily

News about this bill, saying that mental health

providers in community settings cannot assess from

family dynamics. Families facing a housing crisis do

not necessarily have family dynamics that need to be

assessed. They're also in a time of emotional

crisis. That's not really a prime time —

SERGEANT AT ARMS: Time is expired.

NORA MCCARTHY: About kids and families. That's a time just to provide supportive care. So, again, we really support having trauma informed care. So, not inflating mental health care in the shelter state and [INAUDIBLE 3:24:50].

COMMITTEE COUNSEL: Thank you Nora. Helen Strom.

HELEN STROM: Hi, good afternoon and thank you

for the opportunity to testify. My name is Helen

Strom, and I am the Benefits and Homeless Advocacy

Director at the Safety Net Project at Urban Justice.

Thank you Chair Ayala and members of the Committee.

I want to briefly speak on a few bills today.

First, we offer our strong support for Intro. 229

regarding City FHEPS utility allowances. While the

administration mentioned a choice between helping

tenants with utilities and reducing maximum voucher

rates.

This is badly needed.

We also strongly support Intro. 276, which would mandate that all staff receive de-escalation and trauma informed theory and cultural sensitivity.

rate, we believe that this is a false choice, and the

city can do both. They need to increase the voucher

Finally, we want to speak about Intro. 522. We knowledge there's a real shortage of access to mental health care across the city, including for families. However, we have a lot of serious concerns about some of the possible consequences of placing mental health professionals on site at all families with children shelters. We think a better option for the city is to find dedicated lines for additional mental health support offsite, within city healthcare systems and prioritize homeless New Yorkers for these appointments.

We believe that this would provide access that's needed while eliminating the rest we'll go through below.

First, we're very concerned about privacy.

Generally, treatment and therapy relationships

intentionally happen in the space outside of the home

to emphasize consent and control for people who seek treatment. We've discussed with our members who are in shelter or formerly in shelter, they're very concerned of the idea of having their providers

within the place where they're living.

Additionally, we're concerned about the potential for this in a punitive way. The state regulations provide broad discretion for DHS and for family providers to place things like mental health care within people's independent living plans or ILP's.

And to even discharge families for failure to comply. Unfortunately, this is something we see with many providers and within the DHS system and we believe that this provides other opportunities for that as well.

Finally, we think this could set up more fragmented care than we could get if we connect people to care within the communities. For people to start a treatment and then lose that treatment relationship as soon as they access shelter is not good for the long-term mental health or treatment of that person. We think connecting people within healthcare systems in community with dedicated access

2.2

2.3

is a much better solution to have continuous long-

2.2

2.3

3 term care.

And additionally, we're concerned that future administrations and some providers could use this in a way to surveille homeless families. Unfortunately, there's already a strong shelter to ACS pipeline, which we know about and which we're concerned this bill could worsen and we've seen with many providers a tendency to pathologize and say that the cause of families issues is mental illness, when we know that the primary drivers of family homelessness are eviction, unsafe housing conditions, overcrowding, domestic violence, not mental health.

We firmly believe families need access to voluntary care; however, we believe that the option that gives them the autonomy, the choice, the privacy that they deserve can be achieved by funding additional dedicated care in the community where they're not subject to potential punishment or policing by shelter staff or providers.

I really welcome any questions or an opportunity
to discuss any of these concerns because we
definitely agree that access to care and mental
health care is a big need in this city and that,

_

where it's one where people are facing enormous waits and really difficult — a lot of difficulties and access but we just think there's a lot of risks with this model in particular and would really love to discuss with any members of the Committee or Staff.

COMMITTEE COUNSEL: Thank you Helen. Katrina Corbell.

KATRINA CORBELL: Uhm, hello, my name is Katrina Corbell, although I am with numerous organizations, today I am testifying the person with lived experience. As somebody who has been in a single adult shelter and also with some friends who are at — uhm, who have had experience with the past shelters. Uhm, I — I mean, as we know from the testimony that was provided by the Department of Homeless Services, uhm, and DSS, uhm, it's not as clean cut as they seem to present.

One of my friends is currently at a PATH or at a yeah, at a PATH shelter, a family shelter and still has to go to PATH every ten days to check in. It's not something they can do by phone or by you know telecommunication. So, I just wanted to point that out.

2.2

2.3

Uhm, in regards to Intro. 92, I do hope that this remains like independent. That it does not end up becoming you know bias towards the shelter, but the shelter residents or shelter clients are able to be represented. That it's not going to just be like cherrypicked, ideal clients that are nominated to you know submit testimony or submit beyond, like beyond roles in that proposed council.

In regards to Intro. 108, I wanted to just make sure that it's going to be all of the providers and not just the two or three DHS locations. A few years ago, DHS tried to provide answers in regard — letting Council think that they were answering for all of the shelters, when they were really only answering for their own personal shelters.

Uhm, in regards to the housing specialists and Intro. 124, I would hopefully encourage people to just hire people that are you know passionate about their job and actually want to do this, want to go into social work and not hire the people that have no interest and are just looking for a job. Like hire people that are actually dedicated to their job and want to stay in that, stay in that role, stay in that position, stay in that industry.

And that way people that are in shelters, trying to get into housing, don't have to keep waiting three months or six months for another housing specialist to be hired and be trained while they're trying to get into housing appointments or housing interviews.

For 276, I totally support. I am hoping that you know all shelters are included, not just the DHS you know two or three shelters.

SERGEANT AT ARMS: Time is expired.

KATRINA CORBELL: Thank you.

2.2

2.3

COMMITTEE COUNSEL: Thank you Our next panel will be in person, and it will consist of Towaki Komatsu, Kimberly Blair and Scott Hutchins.

SERGEANT AT ARMS: You may begin whenever you're ready.

TOWAKI KOMATSU: Hi, I'm Towaki Komatsu. Ms.

Ayala, I've testified to you in previous public
hearings. Before she left City Hall today, I talked
to Molly Park as she left the room. She basically
lied to your team today. She basically talked about
training. Also, there was a representative from
Urban Pathways at the end of the desk over here.
Uhm, that representative from Urban Pathways didn't
tell you about the fact that if you look at

1

3

_

4

5

6

7

8

9

10

11

12

13

1415

16

17

18

19

20

2122

23

24

25

ProPublica's website, it shows that Urban Pathways spends 45 percent of its operating expenses on compensation for its personnel.

So, meaning, if you give them ten bucks, they pocket \$4.50 but the question is, is that \$5.50 sufficient to the clients or whatever?

The point is, uhm, HRA just issued Urban Pathways like a \$38 million contract. I currently have litigation against Urban Pathways. It's committing fraud in that litigation. I talked to you previously about Urban Pathways. So, in terms of oversight, this Committee and General Welfare Committee, you as a Chairwoman, you're supposed to provide oversight with how HRA operates. I previously visited DOI after that Julia Savo thing broke and basically DOI what they had stated to me was, you know what? We're going to refer your complaint back to HRA. So, the point is if you take the case like a rape victim. you report a rape to a police officer, just imagine if the police officer told you, you know what? You have to work that out with your rapist. Do you understand my point here? If you have a complaint against some person, some entity, why is DOI telling me, you know what? We're just going to shove that

2.2

2.3

complaint back to the entity that you're complaint is
against.

So, with regards to training to, when Ms. Park was I guess sitting around here, uhm, I had litigation against HRA since 2017 and attorney for HRA Jeffrey Mosczyc, he put my Social Security number in a public court filing. So, with the regards to the issue of privacy, the woman from HRA was here today talking about privacy. Do you know what could be done if your Social Security number is publicly disclosed?

I apprised HRA's like general counsel of the fact, you know what? I saw this information in the public legal filing, court procedures mean it has to be redacted. I told HRA's senior attorney's, you know what? You screwed up, you need to fix this.

Guess what? They ignored me. So, with regards to Ms. Park's point about training, also, there's an upcoming public hearing on September 22nd about another proposed contract with Urban Pathways. Do you want to come with me to HRA's headquarters? We can walk through the door together. I'll buy you a cup of coffee. Just to make sure that I can walk

there's a public hearing about the contract, I can

175

2

1

3

4

6

7

8

9

10

11

12

13

14

15

16

17

18

19

20

21

2.2

2.3

24

25

I told you previously I believe, HRA will not allow me into its headquarters to see that contract, irrespective of what my first amendment -

SERGEANT AT ARMS: Time is expired.

testify knowledgably about the contract.

TOWAKI KOMATSU: So, can you do something about it as the Chairwoman of the Committee?

CHAIRPERSON AYALA: I would suggest that you foil the request.

TOWAKI KOMATSU: They ignore it. Also, last point is this. I have a subpoena that I can have issued against HRA. So, instead of me giving you or sorry. Instead of you giving me information, is there anything that you want to know about HRA that I can provide to you through the subpoena? Any of you?

CHAIRPERSON AYALA: Not at this moment. you.

TOWAKI KOMATSU: Thanks.

COMMITTEE COUNSEL: You may begin.

KIMBERLY BLAIR: Good afternoon Chair Ayala and members of the Committee who were here but it's a long day. Thank you for holding this space. My name

•

is Kimberly Blair and I'm the Director of Public Policy and Advocacy for the National Alliance on Mental Illness of New York City or NAMNYC. I also identify as someone who lives with mental health conditions and who have benefitted from life saving psychotherapy, such as that proposed in Intro. 522, which I urge you to support today.

First, it is important that I orient you as to what my organization does. For 40 years, we have been a leading service organization to the mental health community and in addition to our free support groups and classes, we also run a confidential help line, that connects peers and family members with referrals to mental health services and more.

Most calls are received in the aftermath of great crisis. Such as hospitalization or losing housing benefits and employment due to a mental health episode. People struggling through this crisis often come to us because they have great difficulty navigating the confusing terrain of mental health providers and insurance restrictions on their own. These hurdles delay critical care and delay family members ultimately reaching the recovery that is

responsible for keeping family units together and

ending the cycle of trauma.

resources.

Now, imagine going through these hurdles, while

also navigating homelessness, which in essence is a

traumatic itself. This is what 12,124 families in

New York City shelters have faced since 2019.

Because the social workers introduced by the city in

2016 to the shelter system have not been able to

exercise the full range of their qualifications and

provide essential psychotherapy in house, due to lack

of financial resources and personnel.

Meanwhile, the data from the Office of Community

Mental Health demonstrates that 66.7 percent of

families in shelters have been screened for

behavioral health needs, yet only .04 percent of

families have been able to attend an appointment from

January to March of this year and only 2.3 percent of

families from April to June of this year.

While we need more analysis to understand why families receiving referrals are not actually getting care, we can reduce that. There are barriers we'll all experience with mental health conditions, right? Stigma, long wait times and lack of financial

J

To reiterate, 66.7 percent of families, i.e. the majority of families in shelter, need life saving treatment and the city's current response is to provide zero percent of that treatment. At the most critical point, in the timeline of adverse live events a family may face, homelessness.

Our organization sees this as unacceptable and as a moral failing on behalf of our cities to families in crisis. However, with a small investment to Intro. 522, we can remediate this failing by ensuring that family units, dealing with unaddressed mental health conditions and homelessness, receive the care that they need and get connected to long term care providers.

And I will submit the rest in written but I just also just want to stress that there is a gap in the continuity of care, right currently. For all of us, I've waited during the pandemic, many months to see a provider. Imagine being homelessness and your one priority really should be getting your family housed. You should not have be having to deal with juggle that

So, by starting in the shelter, and then making sure that you have that gap filled until they can

meet with community based providers, we could really

2 3

1

make this work.

4

COMMITTEE COUNSEL: Thank you.

I'm here representing Vocal and Neighbors Together. 6

7

I've been actually in an apartment with my City FHEPS

SCOTT HUTCHINS: My name is Scott Hutchins and

8

voucher. I'm starting my third year and I'm going -

just went through the renewal process and an

10

increased rent.

11

utility allowance. Uhm, my utilities are actually

First, I wanted to talk about Intro. 229 with

12 13

paid through an additional voucher. I got Craig

14

Hughes from Urban Justice Center helped me get my

15

apartment and this whole system is not going to work

16

if everybody needs to get help from Urban Justice

Alright, first I wanted to say in regard to

utilities, is trivial between the difference between

17

Center to get an apartment.

18

Intro. 229, the difference between rent plus

19

20

21

2.2

2.3

someone in shelter. 24

the total cost to put someone in an apartment and compared to putting someone in shelter. Because as

we heard, it was \$4,000 a month approximately to put

1

2

4

6

7

8

9 10

11

13

12

14

1516

17

19

18

2021

2.2

23

24

25

The first shelter I was put in after 30th Street was Eddie Harris in 2012 and I saw how poorly they were building their services to us in 2019. The CEO, the Bushwick Economic Development Corporation that runs Eddie Harris shelter, was busted for embezzlement. He was taking a salary of over \$600,000 and their sole funder was the city.

I was in the shelter system for 99 months, eight years and three months, mainly because I have physical challenges and I couldn't get disability. They kept sending me to get disability and the Social Security Administration kept saying, you can do a desk job, you're not disabled by our standards and because I wasn't able to get the desk job because I was trying to get interviewed, the shelter, the last shelter I was in and this is why Craig Hughes intervened, gave me this mental health evaluation. He sent me an email that DHS had actually cancelled. The guy threatened me. He was going to threaten me with arrest if I didn't come down there and he and my case worker listened as this person on the payroll did a mental health evaluation for me because they were trying to get me into supportive housing that they run, where I would be forced to be doped up and

J

that was my nineth shelter and every shelter I went to, they had me do a mental health evaluation.

Mostly was independently. 83rd Street had an in house registered psychiatric nurse. None of them found anything that would get me disability. It was just like stress and nothing more than that.

And also, these housing specialists, a lot of times they don't know what they're doing. The housing specialists at Eddie Harris in 2012, first, she took me to a place when I didn't have any income at this point. And that's one of the big challenges of not being able to get any income because I wasn't getting interviewed and acted like that was a mental health issue. Even though it wasn't like I was going to interviews and messing up, they just — I just wasn't being contacted and I was showing them the spreadsheets. I applied to 3,895 jobs but I was homeless.

I just want to say the housing specialist there took me to Shady Broker, that wanted money up front before they even showed me anything and she also tried to get me in a three quarter house and that the housing specialists at most of the shelters would give me threats if I didn't look for housing and I

didn't see a point of looking for housing if I wasn't

employed because the voucher was only good for me if

I was employed, which is why we need the HAVP at the

5 state level. Thank you.

2.2

2.3

COMMITTEE COUNSEL: Thank you. We have now heard from everyone who has signed up to testify. If we inadvertently missed anyone who would like to testify in person, please visit the Sergeants table and complete a witness slip now. If we inadvertently missed anyone who would like to testify virtually, please use the raise hand function in Zoom and I will call on you in the order of hands raised.

Seeing no one else, I would like to note the written testimony, which will be reviewed in full by Committee Staff, may be submitted to the record up to 72 hours after the close of this hearing by emailing it to testimony@council.nyc.gov.

Deputy Speaker Ayala, we have concluded public testimony for this hearing.

CHAIRPERSON AYALA: I just want to say thank you to all of you who have come to testify and stayed.

This is obviously a very important subject matter and happy to be able to count on so many of you as partners in government.

COMMITTEE	ON	EDUCATION	JOIN	JTLY	WITH	THE
COMMITTEE	ON	OVERSIGHT	AND	INVI	ESTIGA	ATIONS

So, thank you all and with that, this hearing is adjourned. [GAVEL].

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 October 7, 2022