

COMMITTEE ON FINANCE JOINTLY WITH
COMMITTEE ON GENERAL WELFARE JOINTLY WITH
COMMITTEE ON OVERSIGHT AND INVESTIGATIONS 1
CITY COUNCIL
CITY OF NEW YORK

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TRANSCRIPT OF THE MINUTES

Of the

COMMITTEE ON FINANCE JOINTLY WITH
COMMITTEE ON GENERAL WELFARE JOINTLY
WITH COMMITTEE ON OVERSIGHT AND
INVESTIGATIONS

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October 23, 2023
Start: 10:28 a.m.
Recess: 2:35 p.m.

HELD AT: COUNCIL CHAMBERS - CITY HALL

B E F O R E: Justin L. Brannan, Chairperson of
the Committee on Finance

Diana Ayala, Chairperson of the
Committee on General Welfare

Gale A. Brewer, Chairperson of the
Committee on Oversight and
Investigations

COUNCIL MEMBERS OF THE COMMITTEE ON FINANCE:

Diana Ayala
Charles Barron
Gale A. Brewer
Selvena N. Brooks-Powers
David M. Carr
Amanda Farías
Kamillah Hanks
Crystal Hudson
Farrah N. Louis

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COMMITTEE ON GENERAL WELFARE JOINTLY WITH
COMMITTEE ON OVERSIGHT AND INVESTIGATIONS 2

COUNCIL MEMBERS OF THE COMMITTEE ON FINANCE:
(CONTINUED)

Francisco P. Moya
Keith Powers
Pierina Ana Sanchez
Althea V. Stevens
Marjorie Velázquez
Nantasha M. Williams
Julie Won

COUNCIL MEMBERS OF THE COMMITTEE ON COMMITTEE ON
GENERAL WELFARE:

Tiffany Cabán
Crystal Hudson
Linda Lee
Lincoln Restler
Kevin C. Riley
Althea V. Stevens
Sandra Ung
Nantasha M. Williams

COUNCIL MEMBERS OF THE COMMITTEE ON OVERSIGHT AND
INVESTIGATIONS:

Diana Ayala
Rita C. Joseph
Shekar Krishnan
Rafael Salamanca, Jr.
Nantasha M. Williams
Julie Won
Marjorie Velázquez

OTHER COUNCIL MEMBERS ATTENDING:

Jumaane Williams, Public Advocate
Adrienne E. Adams, Speaker

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COMMITTEE ON OVERSIGHT AND INVESTIGATIONS 3

A P P E A R A N C E S

Molly Schaeffer, Interim Director of the New York City Office of Asylum-Seeker Operations

Molly Wasow Park, Commissioner of the New York City Department of Social Services

Zach Iscol, Commissioner at New York City Emergency Management

David Greenberg, Deputy Director at the Office of Management and Budget

Michael Chimowitz, Associate Director at the Office of Management and Budget

Dr. Ted Long, Senior Vice President at New York City Health and Hospitals

George Sarkissian, Chief-of-Staff at the New York City Department of Housing Preservation and Development

Chris Mann, Assistant Vice President of Policy and Advocacy at WIN

Tamia Blackman Santana, Chief Officer of Engagements and Inclusion at Ballet Hispanico

Christopher Leon Johnson

Ashley Chen, Policy Analyst at the Chinese American Planning Council

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

Juan Diaz, Policy and Advocacy Associate at
Citizens' Committee for Children

Rosanna Cruz, Good Shepherd Services

1
2 SERGEANT-AT-ARMS: Today is October 23,
3 2023. Today's hearing is on Finance jointly with
4 General Welfare and Oversight and Investigations.
5 This is being recorded in the Chambers by Keith
6 Polite.

7 SERGEANT-AT-ARMS: Good morning and
8 welcome to the New York City Council hearing of the
9 Committee on Finance jointly with General Welfare and
10 Oversight and Investigations.

11 At this time, can everybody please
12 silence your cell phones?

13 If you wish to testify, please go up to
14 the Sergeant-at-Arms' desk and fill out a testimony
15 slip. Written testimony can be emailed to
16 testimony@council.nyc.gov. Again, that is
17 testimony@council.nyc.gov.

18 At this time and going forward, no one is
19 to approach the dais. I repeat, no one is to approach
20 the dais.

21 Thank you for your cooperation.

22 Chairs, we are ready to begin.

23 CO-CHAIRPERSON BRANNAN: Thank you,
24 Sergeant. [GAVEL] Good morning and welcome to today's
25 joint hearing of the Committee on Finance with the

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1
2 Committees on General Welfare and Oversight and
3 Investigations. I'm Council Member Justin Brannan. I
4 Chair the Finance Committee.

5 We've been joined this morning, of
6 course, by our Speaker, by Deputy Speaker Ayala,
7 Council Members Louis, Majority Leader Powers,
8 Majority Whip Brooks-Powers, Council Members Barron,
9 Brewer, Hanks, Hudson, Stevens, Ung, Lee as well as
10 our Public Advocate.

11 We're here today to examine both the
12 present and projected cost of the City for addressing
13 the asylum-seeker crisis, but, before I go any
14 further, I'm going to invite our Speaker, Adrienne
15 Adams, to give her opening remarks.

16 SPEAKER ADAMS: Thank you very much, Mr.
17 Chair. Good morning, everyone. I am New York City
18 Council Speaker Adrienne Adams, and I thank you for
19 joining us today. Thank you once again to Finance
20 Chair Justin Brannan, General Welfare Chair Diana
21 Ayala, and Oversight and Investigations Chair Gale
22 Brewer for leading today's critical hearing on the
23 City's actual and projected costs related to asylum-
24 seeker response efforts.

1
2 Since last year, New York City has
3 welcomed tens of thousands of people seeking asylum,
4 who are fleeing dire humanitarian conditions and
5 violence, in the United States. The City has provided
6 support to many of those seeking to establish a
7 better life here for themselves and their families
8 through the provision of shelter, food, and other
9 essential services. The Council has advocated for
10 comprehensive solutions to support our new arrivals
11 and longtime New Yorkers in the City's shelter
12 system, including the removal of barriers to housing
13 vouchers for longtime homeless shelter residents and
14 urging expedited federal work authorization for
15 migrants to achieve self-sufficiency through
16 employment. While the Biden Administration's re-
17 designation of Temporary Protected Status for
18 Venezuela charts a path for thousands of people to
19 receive work permits, we know there are additional
20 solutions needed to provide greater relief.

21 At today's joint oversight hearing, we
22 are examining the City's spending decisions and
23 estimates related to different services it is
24 providing. We want to ensure that the City is using
25

taxpayer dollars efficiently and also receiving effective services through its spending.

The Administration indicated that it had spent 1.45 billion dollars on services for asylum-seekers in Fiscal Year 2023. In the adopted Fiscal Year 2024 budget, there was approximately double the amount, 2.9 billion dollars, allocated to cover expenses associated with services. However, in August, the Administration released new projections that estimated that the cost of care would increase to 4.7 billion dollars by the end of the current Fiscal Year, and that would increase to another 6.1 billion dollars in the next fiscal year. These projections represent a significant increase.

Of equal concern is the fact that the per-diem cost for individual asylum-seekers has also risen, raising questions about the efficiency of our spending, given that economics of scale are not being achieved. As a Council, we want to gain a better understanding of how and why these per-diem costs are increasing. The per-diem cost estimate as of January was 363 dollars across all agencies and types of asylum-seeker shelter. During budget negotiations and adoption, the Administration indicated this per-diem

1 would be reduced. However, the per-diem rate
2 increased to 383 as of July 31st, 387 as of September
3 11th, and 394 as of October 10th. When we're
4 providing more services for an increased population,
5 the cost of services per person should be going down.
6 It's perplexing why the projections do not reflect
7 this and continue to rise.

8
9 Additionally, it's troubling that these
10 per-diem rates are exponentially higher than those of
11 the Department of Homeless Services, which is the
12 City's largest shelter-administering agency. In
13 Fiscal Year 2022, the last year in which DHS per diem
14 costs did not include the housing of asylum-seekers,
15 the DHS per diem cost was 136 for single adults, 172
16 for adult families, and 188 for families with
17 children.

18 We look forward to digging deeper into
19 the City's spending and examining how duplication of
20 services is being eliminated and efficiencies are
21 being achieved. With so many different City agencies
22 and third-party contractors involved, it is vital
23 that we break down who is providing which services to
24 whom, if these services are effectively supporting
25

1 those who need them, and whether what is being paid
2 for services provided is indeed efficient.

3
4 As we enter the third year of welcoming
5 people seeking asylum, it is critical that our City
6 shifts our mindset and approach away from expensive
7 emergency spending and towards long-term planning
8 that achieves economies of scale and efficiency.

9 There are important questions about whether it's
10 effective or cost-efficient for private emergency
11 contractors to continue being relied upon for these
12 responsibilities or if certain services can be
13 shifted to mission-driven nonprofit organizations
14 that have already been doing the work and are
15 invested in the long-term success of our communities
16 and those being served.

17 I look forward to hearing from City
18 agencies, advocates, and the public about how we can
19 best support those seeking asylum and plan for the
20 long-term success of our city.

21 I want to thank the Council's
22 Legislative, Finance, and Oversight and
23 Investigations Staff for their hard work on today's
24 crucial hearing.

Now, I'll turn it back over to Chair
Brannan.

CO-CHAIRPERSON BRANNAN: Thank you,
Speaker. In April 2022, the City first noticed an
increase in new shelter applicants who identified as
persons seeking asylum. In the 16 months since, over
130,000 men, women, and children have arrived in the
City looking for shelter and for some solid ground as
they seek to restart their lives.

In that time, the Administration has
spent 1.45 billion in FY-23 on the asylum-seeker
response efforts with another 1 billion in FY-24 as
of September 30, 2023. That 1 billion dollars
represents approximately 34 percent of the funding
budgeted to asylum-seeker response efforts cost in
the FY-24 adopted budget. Going forward, the
Administration determines projected costs for asylum-
seekers by calculating a cost-per-day or per-diem
cost per household for provision of services. The
Administration has shared per-diem cost with the
Council at various points in time, but in many
instances how these costs are calculated remain
unclear. In November 2022, the Administration
reported two projected per-diem cost as the Speaker

1 mentioned, 254 dollars for DHS shelters, and 400
2 dollars for HERRCs. This January, the Administration
3 reported the City's per-diem cost was 363 dollars
4 across all agency and types of asylum-seeker shelter.
5 However, as of October 10, the Administration has now
6 reported that cost was 394 dollars.
7

8 Since day one, we've said our compassion
9 as New Yorkers is infinite but are resources
10 certainly are not. I do not believe managing and
11 financing an international humanitarian crisis is the
12 responsibility of a municipality. It certainly should
13 not be the responsibility of a municipality alone. I
14 believe we should be focusing our collective efforts
15 at all levels of government on expanding TPS
16 eligibility and allowing newcomers to work so they
17 can become self-sufficient and contribute to our
18 economy by paying taxes. All that said, looking back
19 on the frustrating uphill fight we've had to date in
20 securing assistance in this crisis from our partners
21 in government, particularly from Washington. Now more
22 than ever, we need to be sure that we're allocating
23 responsibly, efficiently, and receiving maximum value
24 for our limited resources.
25

1
2 I have questions today how the per-diem
3 costs are calculated, what factors and components go
4 into those costs, and what's included in the
5 Administration's expense categories and more.

6 I now want to turn to my Co-Chairs for
7 this hearing, Deputy Speaker Ayala followed by
8 Council Member Brewer for their opening statements.

9 CO-CHAIRPERSON AYALA: Thank you, Chair
10 Brannan. Good morning, everyone, and welcome to
11 today's hearing. My name is Diana Ayala, and I am the
12 Deputy Speaker of the New York City Council and the
13 Chair of the General Welfare Committee. Thank you to
14 my Co-Chairs, Council Member Brannan and Council
15 Member Brewer, for joining me in Chairing this
16 hearing today.

17 Today, we are here to discuss the costs
18 incurred and projected costs associated with the
19 City's asylum-seeker response efforts. We in the
20 Council are the Mayoral Administration's equal
21 partners in government. In our oversight, we must
22 have a deeper understanding of the costs associated
23 with meeting the needs of asylum-seekers who arrive
24 in the city. Yet, throughout this process, we have
25 continually remained in the dark until news hits that

1 the Administration is making yet another poorly
2 thought-out plan to respond to this crisis. This
3 Administration has repeated stated that is
4 prioritizing migrant families with children. It has
5 also said that it plans to prioritize families in
6 hotel settings so that DHS can focus on housing
7 families. Yet, last week Mayor Adams announced that
8 the Administration will begin placing migrant
9 families with children in a semi-congregate facility.
10 The Administration also announced a few days ago that
11 these families will be provided with a 60-day notice.
12 As I've said before, pushing migrant families out of
13 shelter after 60 days is irresponsible, inhumane, and
14 short-sighted. It will create destabilization in the
15 lives of children already enrolled in school, it will
16 place families in congregate settings that are
17 unsafe, and it can lead to a rapid rise of street
18 homelessness. The Administration is also in the
19 process of effectively eliminating the City's
20 longstanding right to shelter. As policies like these
21 are being implemented without any forewarning or
22 consultation of governmental partners, we must shine
23 a light on whether the Administration is effectively
24 handling this crisis.
25

1 Today, we want to gain a deeper
2 understanding of the costs associated with sheltering
3 asylum-seekers. There is no denying that there are
4 significant and growing costs associated with meeting
5 the needs of this population. In Fiscal Year 2023,
6 the actual City expenditures on asylum-seeker
7 response efforts totaled 1.45 billion. In Fiscal Year
8 2023, spending in the Department of Social Services
9 which consists of both DHS and HRA comprised the
10 largest portion of the City's total spending on the
11 asylum-seeker crisis, 764 million, or 52.7 percent.
12 Historically, DHS has been the City's designated
13 agency to address and prevent homelessness. DHS
14 spending is the best barometer that we have to assess
15 the costs the City is currently spending to shelter
16 asylum-seekers. Today, we want to learn how costs for
17 asylum-seekers compared between the DHS shelter
18 system and other emergency shelters that have opened
19 up recently.
20

21 I look forward to hearing many of these
22 details from the Administration today and gather
23 much-needed feedback on the oversight topic.

24 Also, I would like to thank the Committee
25 Staff for their work in preparing this hearing, Julia

1
2 Haramis, Unit Head; Aminta Kilawan, Senior
3 Legislative Counsel; David Romero, Legislative
4 Counsel; and finally my Staff, Elsie Encarnacion,
5 Chief-of-Staff.

6 I would now like to turn it back over to
7 my Co-Chair.

8 CO-CHAIRPERSON BREWER: Thank you very
9 much. I'm Gale Brewer. I'm Chair of the City
10 Council's Committee on Oversight and Investigations.
11 I want to thank everyone for being here today.

12 Over the past 18 months, New York City,
13 as you know, has found itself a destination for more
14 than 100,000 asylum-seekers fleeing some of the most
15 dysfunctional war-torn parts of the world. We have
16 always welcomed the world's tired and poor, we know
17 that from the statue in the Harbor, and for decades
18 we have recognized that New York has a duty to make
19 sure everyone in our city has adequate shelter. I
20 believe strongly in that, but the intersection of an
21 unprecedented increase in new arrivals, who for the
22 most part are prohibited from working although we
23 appreciate anybody, lawyers and others who are
24 helping them to get to work, but with the City's
25 legal responsibility to house the indigent, it has

1 had seismic effects on our budget. We all know that
2 too. Moreover, the pressure shows no sign of
3 relenting. Thousands still arrive every month. The
4 challenges and disruptions are broad that have pushed
5 people to leave their homes to seek safety in America
6 have only grown since spring of last year. For a long
7 time to come, the City will have to help asylum-
8 seekers get immediate emergency shelter as well as
9 long-term employment and housing.

11 Today, the Council wants to know how the
12 Mayoral Administration is calculating those costs and
13 projecting the City's long-term needs to meet these
14 obligations. We want granular detail on just what
15 goes into current per-diem costs, as you heard from
16 the Speaker, how it differs across agencies, and
17 whether it is based on actual or projected costs.

18 In prior hearings, we've found that the
19 costs that comprise the per-diems arise from vendors
20 who charge wildly varying rates for similar work
21 across different agencies, particularly from my
22 experience under security and fire marshals. We need
23 to make sure that we're getting the best service for
24 the best price and ensure that we don't spend
25 carelessly just because caring for asylum-seekers

1 presents new and changing policy challenges. We had
2 some of these discussions when we had our hearing on
3 September 21st.
4

5 I'd like to thank the following people
6 for all their hard work, Oversight and Investigations
7 Committee Staff, Legislative Counsel Nicole Catá, and
8 Policy Analyst Alex Yablon, and the Oversight and
9 Investigations Division Staff, Director Aaron
10 Mendelsohn, Deputy Director Meg Powers, Counsel Kevin
11 Frick, Lead Investigator Zachary Meher, Investigator
12 Katie Sinise, and Legislative Fellow Amisa Ratliff,
13 and from my Staff, Sam Goldsmith, and thank you very
14 much.

15 CO-CHAIRPERSON BRANNAN: Thank you, Chair
16 Brewer.

17 We're now going to turn it over to our
18 Public Advocate, Jumaane Williams, for his opening
19 statement.

20 PUBLIC ADVOCATE WILLIAMS: Thank you very
21 much. As mentioned, my name is Jumaane Williams,
22 Public Advocate for the City of New York. I want to
23 thank Madam Speaker, Chair Brannan, Chair Ayala,
24 Chair Brewer, and Members of the Committees on
25

1
2 Finance, General Welfare, and Oversight and
3 Investigations for holding this hearing.

4 New York City is now in the second year
5 of response to the influx of migrants and asylum-
6 seekers since the first bus arrived in Port Authority
7 in August 2022. According to the most recent figures
8 from the Administration, over 120,000 migrants have
9 arrived and come into the City's care. Thousands have
10 moved on to other municipalities, and over 64,000
11 remain. It is estimated that the City anticipates
12 10,000 new arrivals per month, and that number does
13 seem daunting. Historically, however, the City has
14 welcomed even greater numbers of immigrants as they
15 have come through and were processed at Ellis Island.
16 Back then, to be fair, there was less infrastructure
17 and systems in place to handle such an influx. We had
18 overcrowding in housing. Yet, I must say our City is
19 a better city because of immigrants who made it
20 during that time. The Administration originally cited
21 an approximate 4 billion dollars would be spent in
22 Fiscal Year 2024 on the asylum-seeker response, which
23 has grown to a projected 12 billion dollars through
24 the end of Fiscal Year 2025. Placing the onus of
25 budget cuts on migrants as to why citywide services

1
2 may stagnate is disingenuous when agencies such as
3 the NYPD which has the City's largest overtime budget
4 routinely doubles or triples its allotment. In Fiscal
5 Year 2022, overtime spending totaled 670 million,
6 although the allotted OT budget was roughly 354
7 million. The City provided third-party vendors with
8 contracts even though these providers lacked
9 experience and have documented histories of
10 complaints including most recently grievances from
11 migrants as discussed at prior hearing in September.
12 Migrants are not to be scapegoated in this
13 conversation and discussion. The onus should be on
14 the City to provide increased oversight over any
15 excess spending across the board. Also, having an
16 across-the-board cut doesn't make any sense either.
17 I'm hoping that the City and the Administration will
18 join us when we ask for revenue raising options in
19 the State. They have previously, consistently argued
20 against it. That includes the Mayor. At the end of
21 the day, New York City will not turn its back in
22 immigrants, and we see this every day through the
23 continued mutual aid and advocacy efforts of New
24 Yorkers to welcome our newest neighbors. At this
25 juncture, it is imperative that the City is

1
2 intentional with the funding it allocates to its
3 asylum-seeker response and that it leads to net
4 positive outcomes. I also hope the City and the Mayor
5 will support us when we're trying to stop the
6 evictions that are occurring and support the eviction
7 prevention bills that are going on in the City. That
8 will help with housing as well.

9 One very important component to this is
10 the bolstering of legal aid immigrant services for
11 migrants. The City's asylum application help center
12 filed a reported 5,600 asylum applications, 300
13 temporary protected status, TPS, applications. As
14 people get on their feet and are able to secure work,
15 they will then be able to move out of the City's
16 shelter system and contribute to our City's economy
17 as has always been the history of New York City. Such
18 processes are vital in the development of a response
19 system that moves away from emergency mode to
20 sustainability in the long run, especially when
21 discussing the fiscal future of our city. There have
22 always been ebbs and flows in migration in our
23 country and in our city, and this should be the start
24 of a plan designed to anticipate such fluctuations.

2 That said, our City still requires ample
3 support from our State and Federal partners in
4 alleviating pressures from all sides. Just as our
5 City has developed a response, we expect the same
6 from our State and Federal partners. I continue to
7 ask for increased support and funding from D.C. and
8 Albany for New York City. From my trips to
9 Washington, D.C. this past year alone, I understand
10 what is possible to support from our partners
11 (INAUDIBLE) Simultaneously, I know there is more to
12 be done.

13 Lastly, I would just ask the
14 Administration to not pit communities against each
15 other. There are a lot of black and brown communities
16 who have been trying to get support from government
17 for a very long time, and I can understand their
18 anger. We want to make sure their anger is not
19 directed to asylum-seekers who are trying to do their
20 best but directed at the governments who have failed
21 them so we should use language that does not
22 scapegoat people who are seeking services and not
23 have people who have little fighting people who have
24 less. There is a way that we can do that.

1
2 I look forward to your support both on
3 eviction prevention, and I assume we will have
4 support for raising revenue since we all see how
5 important it is to have a whole budget. Thank you so
6 much.

7 CO-CHAIRPERSON BRANNAN: Thank you, Public
8 Advocate.

9 We've also been joined by Council Members
10 Fariás, Joseph, Riley, Carr, Hanks, Sanchez, Won, and
11 Cabán.

12 Before I turn it over to Committee
13 Counsel, I have to thank the Finance Staff who work
14 so hard behind the scenes to make these hearings
15 happen. Deputy Chief-of-Staff Tanisha Edwards,
16 Finance Director Richard Lee, Managing Director
17 Jonathan Rosenberg, Unit Head Julia Haramis, Finance
18 Analysts Michael Sherman and Owen Kotowski, Committee
19 Counsel Mike Twomey, my Senior Advisor John Yenin
20 (phonetic), and all the Staff from General Welfare
21 and Oversight for their hard work in putting this
22 together.

23 I'm now going to turn it over to
24 Committee Counsel, Mike Twomey, to swear everyone in
25 and we can get started.

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2 COMMITTEE COUNSEL TWOMEY: Good morning.

3 Can you raise your right hands, please?

4 Do you affirm that your testimony will be
5 truthful to the best of your knowledge, information,
6 and belief and that you will respond honestly to
7 Council Member questions? Director Schaeffer.

8 DIRECTOR SCHAEFFER: Yes.

9 COMMITTEE COUNSEL TWOMEY: Commissioner
10 Park.

11 COMMISSIONER PARK: I do.

12 COMMITTEE COUNSEL TWOMEY: Commissioner
13 Iscol.

14 COMMISSIONER ISCOL: I do.

15 COMMITTEE COUNSEL TWOMEY: Dr. Long

16 DR. LONG: I do.

17 COMMITTEE COUNSEL TWOMEY: Deputy

18 Commissioner ??

19 DEPUTY COMMISSIONER ??: I do.

20 COMMITTEE COUNSEL TWOMEY: Director
21 Chimowitz.

22 DIRECTOR CHIMOWITZ:

23 COMMITTEE COUNSEL TWOMEY: Director
24 Greenberg.

25 DEPUTY DIRECTOR GREENBERG: I do.

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COMMITTEE COUNSEL TWOMEY: Thank you. You
may begin.

DIRECTOR SCHAEFFER: Good morning, Speaker
Adams, Public Advocate Williams, Chairs Brannan,
Brewer, and Ayala, and Members of the Finance,
Oversight and Investigations, and General Welfare
Committees.

I am Molly Schaeffer, the Interim
Director of the New York City Office of Asylum-Seeker
Operations. My colleagues and I are happy to be here
before you to discuss the surge of asylum-seekers
arriving in New York City and the fiscal impact on
the City's budget. Joining me at today's hearing is
Molly Wasow Park, Commissioner of the New York City
Department of Social Services, Zach Iscol,
Commissioner at New York City Emergency Management,
from the Office of Management and Budget are David
Greenberg, Deputy Director, and Michael Chimowitz,
Associate Director, Dr. Ted Long, Senior Vice
President at New York City Health and Hospitals, and
George Sarkissian, Chief-of-Staff at the New York
City Department of Housing Preservation and
Development join me as well.

2 New York City will always be a city that
3 welcomes immigrants. The Statue of Liberty continues
4 to be a beacon of hope for all new arrivals, both
5 foreign and domestic, and we are proud of that. Our
6 City knows the positive and long-lasting impact
7 immigrants can have on our city and country. Since
8 April 2022, our city has led a humanitarian response
9 that has sheltered, fed, and provided essential
10 services to over 130,000 asylum-seekers who have come
11 through our intake system. However, with over 65,000
12 currently in our care and nearly 4,000 new arrivals
13 entering our system each week, the City is over
14 capacity. To be clear, the City is at a point where
15 we don't have the capacity to house all the newly
16 arriving asylum-seekers or provide the level of care
17 that asylum-seekers or 54,000 long-time New Yorkers
18 in our care deserve. We've been consistent in saying
19 we need more support from other levels of government.
20 While we appreciate the resources that we have
21 received so far, more resources are needed to try and
22 sustain an unsustainable national crisis.

23 The City has pulled every lever of City
24 government to address and support asylum-seekers,
25 rapidly responding on a large scale to support

1 households. To put that into context, we've opened
2 213 emergency sites including our arrival center and
3 16 large humanitarian relief centers. We've helped
4 process over 6,000 federal asylum applications. We've
5 provided clothes for families with children. We've
6 provided diapers, formulas, baby wipes. We've
7 provided medical services. We've provided education.
8 This is just the tip of the iceberg.

9
10 I'm not saying we have done too much, but
11 we are saying we cannot sustain this level of
12 service. This Administration has led this
13 humanitarian crisis with compassion and an open
14 heart, but the City doesn't have unlimited resources
15 to fund this emergency crisis. All these services
16 have a significant cost associated with them, and the
17 cost of goods and services is the highest that it's
18 been in years. As public servants, it is our
19 fiduciary responsibility to use public funds to meet
20 the needs of the City. As we have consistently said,
21 if we do not receive additional funding, we will
22 eventually have to reduce or cut the services that
23 millions of New Yorkers rely on.

24 On September 9th, Mayor Adams announced
25 that the City would have to take several steps to

1 stabilize the City's finances because of the
2 significantly higher cost of the asylum-seeker
3 humanitarian crisis and due to the limited financial
4 support from other levels of government. To put that
5 into context, before Title 42 expired in early May of
6 2022, the City had over 35,000 asylum-seekers in our
7 car and 115 sites citywide. As of October 15th, just
8 six months later, we now have over 65,000 asylum-
9 seekers in our care and increased the total number of
10 emergency sites to a staggering 213. In other words,
11 in a span of six months, the population doubled,
12 forcing us to open dozens of emergency sites and
13 increase spending. Since April 2022, our City has
14 spent over 2 billion dollars in this emergency. If we
15 continue to spend funds at this rate, then we are
16 tracking to spend upwards of 12 billion over three
17 fiscal years.

19 Our City has taken urgent action to
20 support asylum-seekers, ensuring families with
21 children have not been forced to sleep on the street.
22 As City leaders, we have utilized every tool in our
23 toolbox to rapidly meet the need including emergency
24 contracting and procurement, in some instances
25 opening facilities overnight to respond to that day's

1
2 arrivals. Using these tools, we have opened emergency
3 shelters in all five boroughs, serving families with
4 children, single adults, and adult families.

5 Despite our best efforts, the City
6 doesn't control the front door at the border, and we
7 can't continue to solve a national crisis at the
8 local level. Asylum-seekers are arriving in our city
9 via differing modes of transportation. Our committed
10 City staff along with our contracted vendors
11 immediately act whenever the buses arrive and provide
12 health screenings, meals, and compassionately engage
13 with asylum-seekers who are suffering trauma after an
14 intense and arduous journey in search of the American
15 Dream. Every day, our teams meet and work around the
16 clock to prepare, discuss operational logistics, and
17 ensure we are providing a safe environment for
18 asylum-seekers. In addition to the thoughtful leaders
19 next to me, there are thousands of public servants,
20 some of whom have their own immigrant journeys,
21 committed to supporting and helping asylum-seekers as
22 they take the next step in their journey. They are
23 the real heroes, and we all owe them a huge debt of
24 gratitude.

2 The City's response to the asylum-seeker
3 issue is not only a whole-of-government effort, it's
4 a whole-City response. However, we can't continue to
5 do this alone, and you are seeing other municipal
6 governments across the country sound that alarm that
7 we've been raising for months. We thank our many
8 partners, community-based organizations, contracted
9 vendors, and others for moving at a quick speed to
10 help this City, our City, respond to this
11 unprecedented humanitarian crisis.

12 Thank you for the opportunity to testify
13 today, and we're now available to answer any of your
14 questions.

15 CO-CHAIRPERSON BRANNAN: Thank you, Molly.
16 I'm now going to hand it over to Speaker Adams for
17 her questions.

18 SPEAKER ADAMS: Thank you very much, Mr.
19 Chair. Welcome once again to everyone testifying here
20 today.

21 The impetus for holding this hearing is
22 for the Council to gain a better understanding of how
23 the Administration determines the budgeted costs for
24 providing shelter and services to asylum-seekers. The
25 adopted plan included 2.9 billion dollars budgeted

1 for Fiscal Year 2024 and 1 billion dollars in Fiscal
2 Year 2025 for the costs related to asylum-seeker
3 response efforts. In August, the Administration
4 presented adjusted cost projections which totaled 4.7
5 billion dollars in Fiscal Year 2024 and 6.1 billion
6 dollars in Fiscal Year 2025. Given that these
7 adjustments were made over two months ago and the
8 release of the November Plan is only weeks away,
9 should we expect to see further adjustments to the
10 projected costs?
11

12 ASSOCIATE DIRECTOR CHIMOWITZ: Thank you
13 for your question, Speaker. We are monitoring the
14 census trends daily against our August projection,
15 and we may adjust the forecast if we see a systematic
16 deviation from that projection.

17 SPEAKER ADAMS: Can you get a little bit
18 more granular with us what would be driving the
19 changes specifically from the cost estimates?

20 ASSOCIATE DIRECTOR CHIMOWITZ: I'm happy
21 to go over the changes that we made for that August
22 forecast and give a little context because there are
23 important dynamics going on that really changed the
24 situation that we're seeing across all systems.

25

2 In the adopted budget, we were
3 forecasting that the population in our care would
4 grow by 40 households per day, and that was based on
5 the trend that we were seeing in our care over the
6 medium to long-term. Since the expiration of Title 42
7 in May of 2023, we have seen a systematic
8 acceleration in that trend so we went from 40
9 households per day that we were growing in the long
10 run to in July of 2023 to 98 households per day so it
11 was a substantial acceleration daily of the number of
12 households in our care, and so when we had seen this,
13 a sustained acceleration, it became very clear that
14 we needed to update these numbers because the
15 situation on the ground had clearly changed. So when
16 we looked at this, we wanted to be careful with
17 potentially over-reading too much on near-term trends
18 because, as we know, the situation can be very
19 volatile month-to-month, and so we looked at a
20 balance between that long run rate of 40 households
21 per day and that short-term acceleration in July of
22 98 households per day, and that gave us a midpoint of
23 that range of 69 more households per day each day.
24 That's the average of those two numbers. Then the
25 finalized forecast, we were targeting a 20 percent

1 reduction of that midpoint, down from 69 to 55
2 households per day, and so it is at the low end of
3 the historical range but not at the lowest end, and
4 so we were sort of taking a balance of that
5 acceleration that we saw in July as well as the long
6 run average of 40 households and estimating 55
7 additional households per day. We continue that trend
8 going forward, and we cost out the cost burden to the
9 City of paying for that additional census growth over
10 the year.
11

12 SPEAKER ADAMS: Okay, thank you. The
13 influx of asylum-seekers to New York City, which
14 began in earnest nearly 18 months ago, we all know
15 has strained the City's resources, and I fully
16 comprehend how challenging this situation has been.
17 In April of last year, it would've been nearly
18 impossible to anticipate the actual breadth and depth
19 of the crisis. I appreciate that this truly was an
20 unforeseen event. The fact that this was an emergency
21 situation that necessitated extreme actions cannot be
22 denied. The utilization of emergency contracting was
23 likely necessary. I am particularly interested,
24 though, in how emergency contracting has impacted the
25 costs of the asylum-seeker response efforts as it is

1
2 assumed that emergency contracts generally tend to
3 cost more than had those contracts been awarded in a
4 typical manner. We do know from the previous hearing
5 that many of the emergency contracts were
6 competitively bid and that some contracts used for
7 response efforts are not emergency contracts.

8 Currently, how many contracts related to asylum-
9 seeker response efforts are emergency contracts
10 versus regular contracts, and what is the total
11 contract value of each?

12 COMMISSIONER PARK: Thank you, Speaker. To
13 build off of the comments that you made, yes, this
14 has been a very rapidly changing landscape on the
15 ground. One of the things that we have done is that I
16 think every agency here has tapped into the
17 requirements contracts that the City has
18 competitively bid to respond to emergencies. I know
19 the Department of Homeless Services, for example,
20 tapped into that to staff some of the shelters early
21 on in the process. Those contracts are, as you note,
22 not emergency contracts, but they are there to
23 respond to emergencies. They are expensive. Each of
24 the different agencies represented here has taken a
25 different approach to trying to manage down. In some

1 cases, this was the Department of Homeless Services'
2 approach. We pivoted away from those contracts, are
3 using different vendors, but my colleagues, and they
4 can speak to themselves, have taken different
5 approaches, all with the end goal of getting to more
6 cost-effective responses to managing the crisis. The
7 bottom line is that we have been adapting to this
8 very rapidly changing landscape. It's certainly, as
9 you note, not something we could've predicted 18
10 months ago, but even frankly the move from 2,000 or
11 so individuals a week to 4,000 individuals a week,
12 which is something that's happened just over the last
13 few weeks, was again something that we had to adapt
14 to so being able to tap into those emergency
15 structures has been incredibly helpful, but we are
16 all really cognizant of the fact that it is incumbent
17 upon us to manage the City's finances responsibly so
18 we're all taking steps to pivot the approach and get
19 to more cost-effective approaches.
20

21 With respect to the detailed numbers that
22 you're looking for, we can follow up with you. I
23 think we don't have that precise breakdown on hand.
24
25

1
2 SPEAKER ADAMS: So we don't know the
3 number of emergency contracts versus regular
4 contracts?

5 COMMISSIONER PARK: It is a more nuanced
6 answer just because, again I speak most directly to
7 Department of Homeless Services, we have well over
8 150 emergency sites. Some of them were procured
9 through emergency contracts, some of them not. Even
10 those that are emergencies were competitively
11 procured. My colleagues also have a high volume so we
12 will circle back with a listing of the contracts and
13 the procurement methodology that was used.

14 SPEAKER ADAMS: I appreciate that. Since
15 the beginning of the emergency, though, do we know
16 the percentage of which emergency contracts have been
17 competitively bid versus not competitively bid?

18 COMMISSIONER PARK: I don't have that at
19 my fingertips, but we will circle back with that
20 number.

21 SPEAKER ADAMS: Are these figures that are
22 typically kept somewhere or are you going to have to
23 configure them and then get them back to the Council?

24 COMMISSIONER PARK: It's a question of
25 configuring them, working with the Mayor's Office of

1 Contract Services to make sure that we are giving the
2 appropriate number.
3

4 SPEAKER ADAMS: So this is not an ongoing
5 calculation for you?

6 COMMISSIONER PARK: No.

7 SPEAKER ADAMS: Do you intend for this to
8 be an ongoing calculation for you?

9 COMMISSIONER PARK: Because what it means
10 to be an emergency contract, in some cases it means
11 shortcutting pieces of the procurement process. In
12 other cases, it's a fully competitively procured
13 process, but we are skipping steps like the hearing.
14 There's a variety of different methodologies that
15 fall under the rubric of emergency contract and then,
16 as noted, some of the contracts that we used to
17 respond to emergency are actually citywide
18 requirements contracts so what we are measuring
19 ourselves towards is are we serving those individuals
20 in need of service and how are we doing managing
21 costs efficiently. There are a variety of different
22 ways that we can do to get there and so we're focused
23 on those outcome metrics rather than the specific
24 procedural pieces.
25

2 SPEAKER ADAMS: This is very interesting.
3 Generally, what are the guidelines for the City's
4 need to use or cease using emergency contracting?

5 COMMISSIONER ISCOL: Thank you, Speaker. I
6 think there's just a little bit of confusion here in
7 terms of what is sort of the definition of emergency
8 procurement. To the extent possible, all of us really
9 try and avoid using the emergency procurement
10 process. For our agency, the vast majority of the
11 contracts, we hold 16 contracts, only four are
12 emergency procurements at this point in time, but I
13 think for all of us we try and use different
14 processes to find either requirements contracts,
15 contracts that might have been competitively bid that
16 are held by other agencies that we can use to try and
17 avoid the emergency procurement, and then what has
18 also been happening is the sunseting of emergency
19 contracts where we then, we use them initially. We
20 then move to competitively bid processes to displace
21 those contracts with something that might be more
22 cost-effective down the line, and I think that it's
23 very easy for us to provide all of that information
24 to you, we can circle back with it, there are a lot
25 of contracts that we're all holding, but we can

1
2 certainly give you that list and show which ones are
3 emergency procurements, which ones were competitively
4 bid through a sealed process or through an RFP
5 process or might have been a citywide requirements
6 contract, that information should be pretty easy to
7 provide but we'd be here all day if we were going
8 through the list of contracts.

9 SPEAKER ADAMS: Okay. Thank you,
10 Commissioner. It's interesting, and I know Chair
11 Brewer will probably get a little more deeper into
12 this, but the fact that you all actually do take a
13 look at the emergency contracts and then turn them
14 over to making it a non-emergency contract situation
15 is important.

16 Barring any major changes at the federal
17 level, it appears that the current situation is
18 definitely the new normal for us. We all have to
19 admit that and get used to it, and the City will
20 continue to shoulder the responsibility of providing
21 services to asylum-seekers for the near future. Given
22 the passage of time though, do you feel that it is
23 appropriate to consider ending the use of emergency
24 contracts for the provision of these services, and
25 does the Administration have a plan for moving away

1 from utilizing emergency contracts for these
2 services?

3
4 COMMISSIONER PARK: Let me start and my
5 colleagues will jump in. Thank you. Absolutely, we
6 are all looking for ways that we can get to stable,
7 predictable, longer-term ways of approaching this. I
8 think we share that goal and we share the assessment
9 that this is our new normal. That looks a little bit
10 different depending on which agency that you're
11 talking about so to speak for the Department of
12 Homeless Services, for example, we put an RFP out
13 early on in this process, right, so we are working a
14 host of not-for-profit vendors to operate sites. All
15 of those were competitively procured. We initially
16 did very short-term contracts in response to the
17 emergency. We are transitioning those to moderately
18 longer-term contracts now, and we'll adjust going
19 forward. We're also doing some longer-term, we're
20 breaking out that initial RFP. We're adding some RFPs
21 so that we are transitioning, again, to longer-term
22 contracts and breaking out the approach to that so
23 that we have clearer procurement methodology for
24 different pieces of our response. My colleagues can
25 jump in and speak to how they're doing. The bottom is

1
2 yes, we are transitioning to longer-term approaches
3 to this, but I did want to sort of come back to
4 reiterate that even in the places where we did have
5 very rapid emergency response, in a lot of cases,
6 that was a competitive procurement, and that we
7 wherever possible adhered to the bones of the City
8 procurement structure so that we were making sure
9 that we were getting efficient bids.

10 DR. LONG: What I want to do is break down
11 a little bit of how we approached emergency contracts
12 versus more long-term steady state contracts at H and
13 H since we started the first humanitarian centers. I
14 actually wrote down one of the things you said,
15 Speaker, which really resonated with me, how do we go
16 from emergency spending to long-term planning, and
17 what we've done at H and H is when we first started,
18 we ran our humanitarian centers like hospitals. We
19 laid out all of the different services, medical,
20 security, laundry, food, the actual hotel itself, and
21 we had an H and H staff member, which is still true
22 today, that's there 24/7, an administrator or
23 supervisor that all of those services that are
24 provided by vendors report up to so we, H and H, a
25 mission-driven organization, are in charge of all of

1
2 our sites. What we did is to the extent that we could
3 for emergency contracts is we tried to use contracts
4 that already existed within our H and H system when
5 we started our humanitarian centers. For example,
6 Sodexo provided laundry services which was procured
7 competitively through an RFP at H and H in the past
8 so we based our Sodexo contract on the terms that
9 were obtained through the competitively bid RFP
10 selection of Sodexo in the past. Similar with Arrow
11 Security, it's the same security company that
12 provides security at our hospitals and our clinics so
13 we started with Arrow Security at our sites as well.
14 The most important thing we're doing now though is
15 exactly what you said, which is going from the pace
16 where we needed to move at emergency speed and we
17 needed to open these sites very, very quickly to what
18 long-term planning looks like, and we're using the
19 gold standard which is putting everything out to RFP.
20 Specifically, we put out four RFPs now in even the
21 last couple of months so we put out RFPs for food,
22 laundry, security, and project management, and we're
23 going to be putting all of the services, again, as
24 you break down our sites, our sites are constituted
25 by the various services that all report up to H and

1 H, each of those service lines are going to be put
2 out to RFP because we believe that RFP is the gold
3 standard for getting the best possible competitively
4 obtained price so that's our plan going forward to
5 achieve what you said, which is our long-term
6 planning to the greatest extent that we can.

8 SPEAKER ADAMS: Dr. Long, thank you for
9 that. That's very helpful. In reassessing the
10 hospital template, I'll just say that, that you laid
11 out for these facilities, we are now going to be
12 backtracking, going to RFP, and the mission among
13 other things will be to lower the costs. Yes?

14 DR. LONG: Yes.

15 SPEAKER ADAMS: Okay, thank you. I'm going
16 to move on to the per-diem information. Over the last
17 18 months, as the population of asylum-seekers the
18 City is serving has increased, per-diem have
19 increased. In the most recent Term and Condition
20 Report on the asylum-seeker response efforts, the
21 Administration reported the per-diem cost as of the
22 end of the September was 394, and the increase from
23 the per-diem cost of 383 presented in the August
24 report and the 363 per-diem cost OMB provided in
25 January. Intuitively, one would think that as the

1 population served grew, the City could gain the
2 benefits of economies of scale. Thus, we would expect
3 the per-diem cost to trend lower rather than higher.
4 Why does it seem the City is not achieving economies
5 of scale as it serves more people?
6

7 ASSOCIATE DIRECTOR CHIMOWITZ: Thank you
8 for your question. I can go into this. When we think
9 about these kind of two major countervailing forces
10 that are really driving the per-diem changes that
11 we're seeing. The first is the cost efficiencies that
12 we are working with on the agencies to reduce the
13 per-diem so we're constantly working on refining the
14 model to find out ways that we can reduce the per-
15 diem. The other countervailing force right now is
16 actually putting upward pressure on the per-diem is
17 the fact, it's sort of just the foundational rule in
18 economics, that when you increase demand in a supply-
19 constrained environment, prices increase and so as we
20 have seen the census continue to increase from 30,000
21 before Title 42 expired to 65,000 today, it is
22 putting enormous pressure on us to find sites in a
23 very supply-constrained environment, and that is
24 raising the price. One thing that is affecting that
25 recently, in particular, is that it's not just that

1 the demand is increasing, but it's increasing at an
2 accelerating pace so the population is growing over
3 time, right, we saw that all the way back at the
4 Executive Budget when we said the long run trend was
5 40 more households per day, but then we saw in July
6 that it actually increased to the 98 households per
7 day that I mentioned earlier, so it's not just that
8 there needs to be more sites that are found at any
9 given point in time but the rapidity with which we
10 need to find those sites is actually accelerating,
11 and that's putting upward pressure on the per-diem
12 because we're sort of putting tremendous demand
13 pressure on a supply-constrained environment and so
14 prices are increasing. Of those two countervailing
15 forces, the per-diem is increasing because of that
16 demand pressure.

18 SPEAKER ADAMS: What's the projected per-
19 diem cost the Administration is anticipating for the
20 remainder of Fiscal Year 2024 and then we want to
21 know 2025 as well?

22 ASSOCIATE DIRECTOR CHIMOWITZ: Got it. In
23 the most recent projections from August, we were
24 basing the per-diem on the cumulative per-diem to
25 date so that was the 383, and we carry that forward

1 over the next two fiscal years. As you noted, we have
2 seen changes in that per-diem, and we are monitoring
3 that very closely, but we don't, in our modeling,
4 overreact to short-term changes in the per-diem
5 because we want to take sort of a longer-term view
6 and so that's an incredibly important parameter for
7 us to monitor in the model, so the August forecast
8 update, the cumulative per-diem to date was 383, and
9 we made the assumption that those two countervailing
10 forces, the demand pressure as well as the cost
11 efficiencies that we're working to find at each site,
12 would stabilize the per-diem at that level.

14 SPEAKER ADAMS: And you feel that's
15 realistic?

16 ASSOCIATE DIRECTOR CHIMOWITZ: It's very
17 challenging to forecast in an environment where
18 there's really no precedent for this, right, so
19 before this emergency there were approximately 45,000
20 individuals in the DHS system, and now we're in an
21 environment where there's real no historical data
22 that we have that says what is an average per-diem
23 when you're serving 120,000 approximately individuals
24 across all of these systems. As an economist and an
25 empiricist who goes through the data, the richness of

1 the forecast is built on the depth of history you
2 have in the data, but when you're forecasting across
3 a kind of dynamics that you've never seen before,
4 then you need to make judgements without necessarily
5 having that rich data that says we've been in this
6 situation before, this is what was achieved, because
7 as the census continues to increase what we're seeing
8 is that the population in care is higher than it was
9 in any week or month previously.

11 SPEAKER ADAMS: Given your expertise, at
12 383, are you comfortable staying with the 383?

13 ASSOCIATE DIRECTOR CHIMOWITZ: We are
14 continually monitoring it based on actual and
15 estimated spending to date, and, if we see systematic
16 deviations in it, and we think comprehensively,
17 right, so we don't just change the modeling based on
18 per-diem, we have to think about census as well,
19 inflows and outflows, and so over time, we make sure
20 we have this sort of comprehensive, holistic view of
21 all the dynamics that are happening in the system,
22 and, if we see a systematic deviation, then that will
23 need to be reflected in upcoming forecasts.

24 SPEAKER ADAMS: Okay, I'm going to take
25 that as a maybe.

1
2 The Administration has issued a number of
3 policy changes in an attempt to staunch the growth of
4 the cost of the asylum-seeker response. We would like
5 to get a better understanding of the changes
6 instituted, their implications for individuals, and
7 how they could reduce future cost. Can you provide
8 the Committees with the details of all policy changes
9 for asylum-seekers related to time limits and the
10 provision of services that have been implemented
11 since the budget was adopted?

12 COMMISSIONER PARK: Thank you, Speaker.
13 I'm going to get started, and my colleagues are going
14 to jump in. As you note, there have been a lot of
15 policy changes. This has been an incredibly rapidly
16 evolving situation and, while all of us have
17 expertise in serving an aspect of this crisis, none
18 of us are experts in essentially running a refugee
19 system, right, which is what we are doing, none of us
20 are immigrant experts, so we've had to adapt and
21 learn and change as the situation on the ground
22 changes and as we learn more about what is and isn't
23 effective so just talk a little bit about some of the
24 changes that we've made starting with the Department
25

1 of Homeless Services system and the Department of
2 Social Services and then my colleagues will jump in.

3
4 We have significantly expanded our
5 provider base, and I'm thinking about who we are
6 working with. When this started, we put out a call to
7 our normal providers, that's what we do, and many of
8 them stepped up. They are providing terrific
9 services, but we also learned really quickly that we
10 had tapped out our normal providers. They were
11 serving other clients, they were strained as
12 organizations, so we're working with a host of new
13 organizations including groups that hadn't worked in
14 the city before. Honestly, I think this is a little
15 bit of a silver lining for us because we are building
16 a not-for-profit base that can work with low-income
17 New Yorkers. We are working with the National Guard.
18 Honestly, if you had told me a year and change ago
19 that I would be thrilled to have the National Guard
20 running shelters, I would've told you you were crazy,
21 but they have been a terrific partner. We are very
22 grateful for the State support there and the service
23 men and women are doing a wonderful job on the ground
24 day to day. I think as Deputy Speaker Ayala
25 referenced, we have really been prioritizing hotels

1 for families with children so the Department of
2 Homeless Services was using a large number of hotels
3 for both single adults and families with children.
4 Over the last few months, we have been shifting the
5 single adults to congregate settings so that we can
6 ensure that the private spaces could be used for
7 families with children. That's a reflection of all of
8 the capacity constraints that have come up in earlier
9 conversations, really wanting to make sure that when
10 we have this high level of demand and very scarce
11 resources that we are allocating appropriately. I
12 think our approach to intake is a place where you've
13 seen a number of different changes. Early on in the
14 crisis, asylum-seekers were going to the DHS intake
15 facility for the appropriate population, so PATH, to
16 30th Street. We then, the Department of Social
17 Services, thought that we would stand up our own
18 intake site that was specifically for asylum-seekers.
19 We put the wheels there into motion, but, at the same
20 time, as the scope of the crisis was growing and we
21 gained better understanding as a City as to what we
22 were facing, we were moving from this being a DHS
23 response to really a whole-of-government response so
24 we paused the DHS intake center and what was done
25

1 instead was to create a citywide arrival center which
2 my colleague, Dr. Long, can speak to better than I
3 can, but really it's a centralized intake for the
4 system as a whole.
5

6 Then there are smaller things on the
7 ground. Our language access approaches had to be
8 really different. Traditionally, we've used largely
9 Language Line, but we brought in many more in-person
10 interpreters. We've also had to adapt and translate
11 documents into languages that were not common for us.
12 Wolof, for example, is something that we're seeing a
13 lot of from West Africa that was not traditionally
14 part of our shelters so every day we are making
15 operational and policy decisions to try and adapt and
16 manage the system better. Sometimes, I certainly can
17 appreciate from the outside that it seems like a lot
18 of change, but it is really us trying to adapt to
19 changing circumstances and circumstances for which we
20 don't necessarily have a deep expertise as
21 immigration efforts, but my colleagues have also made
22 changes so I'm going to pause and pass it off.

23 DR. LONG: I'm happy to go next. Just to
24 make sure we're tracking your questions, your first
25

1 is around policies and the second one is around
2 provision of services.

3
4 I'll talk a little bit about provision of
5 services first. As Commissioner Park said, one of I
6 think the most important things that we've done to
7 streamline services is open the arrival center. When
8 we first opened our humanitarian centers, we were
9 doing vaccines on site, we had urgent care services
10 on site as well. We had vaccines on site because we
11 wanted to enroll children in school as fast as
12 possible. We didn't want to miss a single second.
13 Neither did their families. Enrolling children in
14 school is one of the most important things that we've
15 done. Over time, we've realized that the best way to
16 offer the vaccine is when you first enter our
17 collective front door which is at the arrival center
18 so the success of that is that our humanitarian
19 centers and our arrival center, we've now
20 administered more than 40,000 vaccines to date.
21 That's 40,000 not only diseases prevented but
22 thousands of children that are in school because of
23 that effort.

24 On the urgent care side, we also have
25 learned a lot too. Initially, asylum-seekers had a

1 tremendous amount of need. I've seen some horrific
2 things. My team has seen some horrific things as
3 well. We've had a child that had a witnessed seizure
4 in front of us on the ground, almost died. We had a
5 woman just two weeks ago that we gave her first
6 prenatal visit to at being nine months pregnant,
7 which is unacceptable. Healthcare is a human right,
8 and the fact that that child had his medication taken
9 away by ICE and that woman didn't get any care in
10 Texas is a violation of their rights in my opinion.
11 Moving forward, what we've sought to do to be able to
12 address that in the best way is instead of offering
13 urgent care at all of our sites, let's use telehealth
14 through H and H and let's get them plugged into
15 primary care so they can see me as their doctor and
16 they can develop a relationship with me that can last
17 for the rest of their life. The success of that in
18 terms of again streamlining the providing services
19 using our already existing healthcare system is we've
20 now had more than 29,000 visits among asylum-seekers
21 at Health and Hospitals alone. That's 29,000
22 opportunities to talk about the traumatic journey
23 they've been through, to get them the care that they
24 need, and to plug them into regular care so they
25

1 aren't reliant on care at our sites but are getting
2 care the same way that you or I would.

3
4 For provision of services too, I did just
5 want to take a second if I may add on to your
6 question a little bit and talk about forward-looking,
7 what have we not done that we want to do going
8 forward that we believe will lower costs overall, and
9 a key component of that is case management. When I go
10 and talk to asylum-seekers and I ask them what they
11 need in order to take the next step forward in their
12 journey is, and my team and I do this on a regular
13 basis, number one thing, of course, is everybody
14 wants to work, but others want to resettle in
15 different communities, maybe less expensive
16 communities, others want certain trainings or need
17 the ID to get that job that they want so OSHA
18 training, IDNYC, things like that, others want to go
19 to a different place. They've tried out New York
20 City. They have a brother in Chicago they want to go
21 so they want to be reticketed but don't exactly know
22 how to approach that. Case management is the glue
23 that enables us to do everything I just said, which
24 we've started to in different ways, but will
25 comprehensively bring all of that together when we

1 launch this large case management program we're
2 calling our Red, Yellow, Green Program in early
3 November. Right now, we're finishing an assessment
4 survey where we're asking the same questions of every
5 asylum-seeker in every part of our system, but
6 knowing who needs help with work authorization, who's
7 interested in resettling upstate, who wants to be
8 reticketed to Chicago, having that information so
9 that we can empower our case managers to have
10 targeted interventions to every asylum-seeker in our
11 system because not only would we have statistics on
12 who generally wants those types of services, that
13 type of help, it's more than a statistic. We'll know
14 where they are. We'll know what their phone number
15 is. We'll be able to, when they come into the
16 building every day, when they scan their QR code,
17 follow up with them about the plan they started with
18 us so all of those things forward-looking I think
19 represent an important direction at this stage of the
20 crisis. How can we help people to give them the
21 specific services and address what they need in order
22 to take the next step forward.

24 I'll finally say I'm convinced this is
25 going to work because I believe it already has

1 started to work. We've helped more than 130,000
2 asylum-seekers in New York City to date. Just look at
3 that number compared to what any other city in the
4 country has done. We've helped the lion's share of
5 people get back on their feet. Of that 130,000, it is
6 so critical to remember that because of our New York
7 City help, half of them, half have left our city
8 system and started the better life that they came
9 here for. Let's get that number even higher, but I
10 know it can work because it's worked already, and
11 case management is the glue that will enable us to
12 use all of the strategies that we need to use moving
13 forward.
14

15 SPEAKER ADAMS: Thank you very much, Dr.
16 Long, and as I have in the past commend you on your
17 work which is outstanding.

18 We really want to dig though into recent
19 changes as it pertains to the adopted budget so
20 that's really what we want to get back to, any
21 changes in policy that have been implemented since
22 the budget was adopted?

23 DIRECTOR SCHAEFFER: Thank you for your
24 questions, Speaker. I think one of the policy items
25 that you mentioned was our time limits. As we've said

1 before, more than 130,000 migrants have come through
2 our care since last spring. We have more than 119,000
3 people currently in our care including long-term
4 unhoused New Yorkers and, in recent weeks, we've been
5 seeing migrants arriving more and more quickly. We
6 started with 2,000 a week just a couple of weeks ago
7 and now we're at nearly 4,000, and so we really did
8 shift to time limits to make sure that we can support
9 everybody who's coming in and we've paired it with
10 intensive casework support, and we're seeing that
11 initially it's working. Many asylum-seekers are
12 moving in with families and friends or finding other
13 places to stay instead of returning to the arrival
14 center. At this point, we know it's less than half of
15 the population who have reached their 61st day is
16 still with us, and we're going to continue to use the
17 successful model to help those with other options
18 take advantage of them, and it really gives our teams
19 a time limit to help those individuals.
20

21 SPEAKER ADAMS: So you see the time limits
22 as being successful thus far?

23 DIRECTOR SCHAEFFER: It's early days. So
24 far, they have been successful.
25

1
2 SPEAKER ADAMS: Can you confirm that no
3 shelter time limits apply to asylum-seekers in DHS?

4 COMMISSIONER PARK: We are not
5 implementing at this time the families with children
6 time limit. We will be working to roll out the single
7 adult. Only a very small fraction of the single
8 adults are in the DHS system.

9 SPEAKER ADAMS: Does that mean you are
10 considering time limit rules for asylum-seekers at
11 DHS or no?

12 COMMISSIONER PARK: For adults, yes.

13 SPEAKER ADAMS: For adults, you are
14 considering or will that be policy?

15 COMMISSIONER PARK: We anticipate that in
16 the next several weeks, we will be rolling out the
17 30-day notice for adults in the DHS system with the
18 understanding that we will work with individuals who
19 still need assistance at the end of 30 days.

20 SPEAKER ADAMS: Okay, thank you. I'll let
21 my Colleagues ask you further on that.

22 The September 9, 2023, PEG letter said
23 that the City must reduce the cost associated with
24 caring for asylum-seekers as the current and
25 projected levels of spending are unsustainable. The

1 letter went on to say that the City would be reducing
2 services being provided to asylum-seekers and closely
3 monitoring those services to ensure that they're
4 being delivered in the most efficient and cost-
5 effective manner possible. What services to asylum-
6 seekers have or will be reduced to generate this
7 saving?
8

9 DIRECTOR SCHAEFFER: I'll just mention
10 we're working across each agency to really take a
11 look at our operational costs and figure out how to
12 be good stewards of taxpayer dollars. We've already
13 identified a lot of savings across the systems, but
14 I'll let each of my colleagues go into more on that.

15 SPEAKER ADAMS: Can you name the agencies...

16 DR. LONG: Ted from Health and Hospitals.
17 I'll just give the first example of the medical
18 services and how we've changed them and the rationale
19 for it over time. When we first opened our first
20 humanitarian center which was a little over a year
21 ago, the Roosevelt Hotel, we were offering vaccines
22 on site and urgent care on site. Fast forward to
23 today where we're offering vaccines upstream at the
24 arrival center so it's the first thing that happens
25 to you, and, for urgent care and primary care, we've

1
2 successfully again helped for people to have 29,000
3 visits in our Health and Hospitals system in addition
4 to setting up our sites with urgent care which is a
5 24/7 service called Virtual Express Care. We set it
6 up during COVID. It's very successful, but it's
7 something through our system that we have anyways,
8 and we've attempted to enroll as many people as we
9 could in health insurance so actually those services
10 can be billed to the health insurance provider as
11 opposed being provided by the City.

12 SPEAKER ADAMS: Dr. Long, RFPs that you
13 mentioned before, would they be included in this
14 cost-savings, be it revisiting the contracts, Sodexo
15 and others?

16 DR. LONG: I can confirm right now that a
17 key purpose of doing the RFPs is to have cost-
18 savings. It's the gold standard, as you know, the
19 best way to achieve the best competitive pricing for
20 vendors that provide these specific and designated
21 services. In terms of how they might factor into the
22 overall model for cost-savings, I have to defer to my
23 colleagues at OMB.

24 ASSOCIATE DIRECTOR CHIMOWITZ: The way
25 that we monitor cost is by taking a holistic view of

1 estimated cost that the agencies give us on a monthly
2 basis because what we need to do is to think
3 holistically about those two dynamics I was talking
4 about earlier, both the pressure that opening up new
5 sites can put on the price that we're paying but as
6 well as all these changes that we're seeing that can
7 reduce cost, and so we update the per-diem based on
8 estimated costs going forward so our model will
9 naturally embed any of these changes into future
10 iterations.
11

12 SPEAKER ADAMS: Thank you. On the other
13 side of that, we're speaking about policy changes and
14 numbers. Are we configuring also the impact on the
15 individuals that these changes will or have already
16 made, and how are we looking at that?

17 COMMISSIONER PARK: Yes, thank you.
18 Absolutely. At the end of the day, our core mission
19 is to provide services. Our absolute goal is to make
20 sure that families and individuals are able to
21 integrate into New York City so although we are going
22 very carefully and looking for ways that we can save
23 resources, we've also been looking at ways that we
24 can invest in what we think is most critical to
25 helping households transition to life in the United

1 States. For example, we've continued to invest in the
2 asylum-seeker application work and collaborated with
3 the federal government on standing up (INAUDIBLE)
4 they did a pilot clinic on helping people apply for
5 work authorization so that spending has occurred
6 because we know that it is really important that we
7 help people take that next step. As Dr. Long
8 referenced, looking at the different ways of
9 providing medical service is not to deny people
10 medical services but are there ways that we can do
11 things more efficiently so coming back to that core
12 value statement of we want to make sure that people
13 are able to transition to life in the United States
14 is always something that we are keeping in mind.

16 DR. LONG: I'll just add on to that
17 briefly. I think it's important as Commissioner Park
18 was saying to take a step back which your question
19 gets at and what is our mission here, why are we
20 doing this work that we view as incredibly important,
21 and it's not in our words, it's in the words of
22 asylum-seeker, it's so that they can start a better
23 life with their families here in the United States of
24 America so one of the things we look closely at,
25 which is a metric that over time, especially as we

1 start our case management program, we'd love to share
2 more with you about is how successful we've been in
3 helping people to get what they want, to leave our
4 system and start a better life either in New York
5 City or in another place in our country so that's
6 something we're going to have a laser focus on going
7 forward.
8

9 On the medical care side too, I think how
10 do we just the effect on an individual, I think every
11 individual that's plugged into longitudinal primary
12 care, and we've seen asylum-seekers at my practice at
13 Morrisania in South Bronx where I am, as you know,
14 every Friday. I think that makes an incredible
15 difference in their lives, and I think it makes an
16 incredible difference in the lives of the children
17 that have been through this intense trauma to get
18 here to New York City so I think every time we
19 successfully enroll a family and children into
20 medical care that they can keep for the rest of their
21 life, which is their human right, I think that is a
22 big success and victory, and that's something I want
23 to see us do a lot more of.

24 SPEAKER ADAMS: I agree with, Dr. Long,
25 wholeheartedly.

2 Along those same lines, this is a concern
3 of mine, and I know that it is a concern of the
4 Deputy Speaker as well and I'm sure that she is going
5 to get even deeper into this. When we're taking a
6 look at the limits of time now, we're taking a look
7 at the impact on families with children and
8 specifically what's being done to prevent negative
9 impacts on families with children. What's being done
10 to ensure the stability for children and to
11 specifically ensure that they're able to maintain a
12 consistent school placement, other placement, health
13 concerns, and everything else that comes with the
14 trauma that these children have already gone through
15 and now putting a term limit on their stay in the
16 shelters?

17 DIRECTOR SCHAEFFER: We take the safety,
18 security, the health of families with children
19 incredibly as our sort of north star here. As the
20 Mayor repeatedly said, educational journeys will not
21 be interrupted. We're working daily with the
22 Department of Education. As Dr. Ted mentioned, we're
23 making sure that we're frontloading health services
24 to make sure that no child even as we go through
25 these changes will have any negative impact, and I'll

1 turn it over to Dr. Ted about anything else related
2 to health.

3
4 DR. LONG: I think as people go through
5 transitions also when they leave our sites and start
6 a new life maybe in a different borough than the site
7 where they were at, on the healthcare side is our
8 mandate and our highest priority to keep them
9 connected to the care that we've started with them so
10 I think it's a little early in the process in terms
11 of seeing how we are going to continue to deal with
12 that, but I can tell you that my conviction is that
13 we want people that have started to engage in primary
14 care and healthcare at New York City Health and
15 Hospitals, for example, to keep that care, and we are
16 in every borough so one of our goals is to make sure
17 as people as people are entering our system, if they
18 do move for whatever reason, we keep them connected
19 into care, either in the place where they started
20 their care or in the closest site to where they're
21 now moving to, and that's one of our key goals for
22 this next period of time is making sure people stay
23 engaged in care. We have really unique resources at
24 New York City Health and Hospitals that no one other
25 cities have. We have two Survivors of Torture Clinics

1 at Bellevue and the Libertas Clinic at Elmhurst so we
2 have a ton of things that we can do to uniquely help
3 asylum-seekers, and, again, it is our mission at
4 Health and Hospitals to help everybody without
5 exception and to keep them in our care once they
6 start.

8 SPEAKER ADAMS: Thank you very much. I
9 have another question, but I know the Deputy Speaker
10 probably has that question already in her arsenal of
11 questions.

12 I'm going to go back to policy. We talked
13 about the policy changes and the implementation, and
14 we know that it's very new right now. Do we have any
15 actual figures at this time of actual savings that
16 the City has realized at this time?

17 ASSOCIATE DIRECTOR CHIMOWITZ: We do not.
18 We are monitoring the trends that we are seeing in
19 the census regularly, and our methodology will pick
20 up any changes in the census which will then filter
21 through in future updates of the forecast.

22 SPEAKER ADAMS: Okay, thank you. I'm going
23 to move on to my final subject matter at least at
24 this time for me, and that's going to be the TPS
25 status, something that we've all been looking forward

1
2 to gaining. I was very encouraged by the Biden's
3 Administration's decision to extend Temporary
4 Protection Status to Venezuelans. This policy change
5 will allow many individuals in the City's care to get
6 expedited work authorizations, permitting them to
7 work legally to support their families as well as to
8 contribute to our local economy. Currently, how many
9 of the asylum-seekers residing in the City's care are
10 from Venezuela?

11 COMMISSIONER PARK: I can speak to the
12 numbers from the Department of Homeless Services.
13 It's about 43 percent for those currently in shelter.

14 SPEAKER ADAMS: Anybody else have any
15 figures?

16 DIRECTOR SCHAEFFER: I can mention that,
17 as we said before, more than 15,000 Venezuelans
18 currently are eligible for TPS because they came into
19 our shelter system before July 31st, and so that is
20 the population we're targeting.

21 SPEAKER ADAMS: Okay, thank you. Since the
22 announcement, how many of the individuals in the
23 City's care have actually submitted their
24 applications?

25

1
2 DIRECTOR SCHAEFFER: As soon as we got the
3 announcement and the Biden Administration registered
4 it, we immediately started scheduling people for
5 appointments in our asylum application help center.
6 At this point, we have scheduled more than 600
7 individuals, and we just opened our first satellite
8 last week and plan to get through every single
9 individual by the end of this year.

10 SPEAKER ADAMS: Currently, we have 600 on
11 the schedule.

12 DIRECTOR SCHAEFFER: At our asylum
13 application help clinic.

14 SPEAKER ADAMS: We don't really have
15 anyone who has actually received the work
16 authorization to date?

17 DIRECTOR SCHAEFFER: Not through TPS, but
18 that's because it just opened up a couple of weeks
19 ago, and once we submit the application, it takes the
20 federal government many weeks to months to
21 adjudicate.

22 SPEAKER ADAMS: What is the City doing to
23 prepare for the expected increase of asylum-seekers
24 with work authorization to come? What are we doing to
25 take care of the influx, the migrants continue to

1
2 come, what are we doing as far as planning ahead when
3 it comes to TPS and the work authorization?

4 COMMISSIONER ISCOL: I think just one
5 important note of clarification on TPS. It only
6 applies to Venezuelans who arrived before July 31st.
7 That's one of the reasons that you've heard different
8 numbers from the Administration. There's a question
9 of how many Venezuelans are in our system, how many
10 Venezuelans arrived in the country before July 31st
11 that would then qualify for TPS and then there are
12 the issues around the application process. I will say
13 one of the greatest sort of whole-of-government
14 efforts that took place was a two-week initiative not
15 around TPS but around other work authorizations down
16 on Beaver Street with the federal government, with
17 INS, with the state and us, it was only 10 days, two
18 weeks, five business days each week, but we are
19 hoping that the federal government will commit to
20 doing that again with us, and, Molly, how many folks
21 went through that site?

22 DIRECTOR SCHAEFFER: 1,700.

23 COMMISSIONER ISCOL: 1,700 people went
24 through that site in about 10 business days.

1
2 SPEAKER ADAMS: Great. Thank you for that
3 clarification, Commissioner.

4 COMMISSIONER PARK: If I could just jump
5 in. I want to thank you, Commissioner Iscol. I want
6 to clarify that the 43 percent that I have is people
7 from Venezuela currently in shelter on the DHS side
8 so that does not filter for the date of entry so it
9 doesn't necessarily..

10 SPEAKER ADAMS: In general.

11 COMMISSIONER PARK: Exactly to TPS
12 eligibility.

13 SPEAKER ADAMS: Okay. Thank you both for
14 that clarification. Thank you very much. Are we
15 looking ahead as far as workforce development, job
16 training? Are we looking towards doing those types of
17 things and, if so, how are we doing that?

18 COMMISSIONER PARK: Speaking now from the
19 other side of my shop on the HRA side, we have
20 extensive career service development programs for
21 anybody who is in our systems, people who are
22 receiving cash assistance, so we do a lot of work. We
23 have a program called Business Link where we are
24 having regular career fairs that are marketed towards
25 people, whether they're in DHS shelter, receiving

1 cash assistance, otherwise interacting with the
2 Department of Social Services so that is a tool that
3 we have that we can leverage for those who have
4 received work authorization. I think the State has
5 done a lot of work to identify jobs across the state
6 that are available for people with work
7 authorization, but we need to have the plans in place
8 and we have the tools in place where we can
9 communicate broadly, but at the end of the day we
10 know we're going to have to be able to work on a
11 retail level with individual households, right? Some
12 people are going to want to do construction work.
13 Other cases it's healthcare. Some of these people are
14 coming with actually quite extensive education
15 backgrounds.
16

17 SPEAKER ADAMS: I've been saying that
18 quite often.

19 COMMISSIONER PARK: Right, so then it's
20 going to be a question potentially of helping them
21 access whatever licensing that they need to be able
22 to do the job for which they're trained here in the
23 United States. That's a little bit different than
24 what HRA does on a daily basis, but we will certainly
25

work with our colleagues to be able to meet people
where they are.

SPEAKER ADAMS: Commissioner, how
successful is the HRA workforce planning right now?

COMMISSIONER PARK: I don't have current
statistics right now because during COVID much of our
workforce development and the engagement was turned
off. We are now in the process, now that the public
health emergency is officially over, rolling back out
all of the workforce engagement programs that we have
to all of our participants, but I can tell you that
last fiscal year was a record-breaking year in terms
of connecting people on public assistance to jobs
with organizations that have City contracts, that
it's a requirement that human service providers who
have City contracts hire people on public assistance,
and last year, I don't have the exact number in front
of me, but I do know it was a record-breaking year.

SPEAKER ADAMS: Okay. Thank you very much.
I think I'm going to leave it there because I know my
Colleagues really want to jump in here.

Before I do, though, I just think it's
really, really important because this is something
that's come up throughout my District and I'm sure

1 across the City, Dr. Long, when it comes to
2 vaccinations and asylum-seekers coming through
3 obtaining vaccinations, children obtaining
4 vaccinations specifically, so I really do want to get
5 this on the record in case it hasn't been on the
6 record or clear on the record as far as what the City
7 stance is when it comes to vaccinations for children
8 going into school.

10 DR. LONG: Healthcare is a human right,
11 and we'll provide vaccinations to any children that
12 come to us in New York City Health and Hospitals
13 without exception. Again, I'm really proud that we've
14 provided more than 40,000 vaccines to asylum-seekers,
15 predominantly among children. That helps all of them
16 not only be in school but is unacceptable in my
17 medical opinion to have a child get measles nowadays
18 when we have effective vaccines that could save their
19 lives and prevent an outbreak from occurring in the
20 first place. They are not getting this life-saving
21 care in Texas. They are going right through Texas
22 missing the opportunity to receive their human right
23 of a vaccine that could save their lives or prevent
24 an outbreak in whatever city they're going to. We in
25 New York City doing the right thing, but just to be

1 clear and agree with your point, we are picking up
2 the tab from Texas. We are doing things that could be
3 done in Texas and would be better done in Texas
4 because they'd have more protection by the time they
5 get here, but in New York City, again, we're doing
6 everything in our power to do the right thing to
7 protect children, and I'm very proud of that.

9 SPEAKER ADAMS: Thank you very much, Dr.
10 Long. Thank you all for your testimony today. Chair
11 Brannan.

12 CO-CHAIRPERSON BRANNAN: Thank you,
13 Speaker. We've also been joined by Council Members
14 Krishnan and Restler.

15 I want to dig in a little bit more on the
16 per-diem costs. The two variables that most influence
17 the Administration's estimates for the costs related
18 to the asylum-seekers are the estimates of population
19 served and the per-diem costs. The Council doesn't
20 receive any detailed information as far as what the
21 per-diem costs are comprised of so could you provide
22 us with all the components that go into calculating
23 the per-diem costs?

24 ASSOCIATE DIRECTOR CHIMOWITZ: Thank you
25 for the question. The per-diem that we calculate is

1 comprehensive of all asylum spending to support this
2 population so that would be services and supplies at
3 the site, housing, rent, and initial outfitting to
4 get the sites set up appropriately for the
5 populations, IT/administrative costs, food, and
6 medical, and so we aggregate all those categories to
7 make sure that we have a comprehensive view of all
8 the spending we're doing to support this population
9 and then we amortize it over the household nights
10 that we've served over the period of time.

11
12 CO-CHAIRPERSON BRANNAN: Is the per-diem
13 calculation the same for all agencies?

14 ASSOCIATE DIRECTOR CHIMOWITZ: When we do
15 the asylum calculation, we aggregate across all
16 agencies because we see this as one ecosystem. There
17 are important costs, such as centralized costs, that
18 you cannot draw a direct for our populations that are
19 residing in any of the agencies, and so to make sure
20 that we have an accurate picture of the total cost
21 per-diem for the populations, we have to make sure
22 that we capture the centralized costs and so we
23 aggregate the entire system into one ecosystem and
24 calculate the per-diem that way.

25

1
2 CO-CHAIRPERSON BRANNAN: The components
3 that make up the cost for the asylum-seekers, do they
4 differ greatly from the historical costs for a
5 traditional DSS shelters?

6 ASSOCIATE DIRECTOR CHIMOWITZ: I think
7 it's here to take a bit of a step back in the sense
8 that this per-diem calculation, while it's a per-
9 diem, it is conceptually a little bit different than
10 the DHS one because the DHS per-diems that you
11 might've seen before the asylum-seeker crisis are
12 really based on the cost of serving a population at a
13 site whereas our use of this per-diem is to get a
14 sense of the entire costs, including the centralized
15 costs of the intake facility for these migrants as
16 well as other centralized costs like there's
17 transparency across facilities and so it's a
18 different type of per-diem that is sort of in some
19 way more comprehensive because that's the purpose of
20 using this number to get an estimate of the cost
21 going towards the entire support to the asylum-seeker
22 response.

23 CO-CHAIRPERSON BRANNAN: As far as the
24 cost breakdown, I'm trying to get a better
25 understanding of what's included in the

1 Administration's expense categories so the cost of
2 the asylum-seeker response has typically been
3 represented to us through costs broken down by the
4 type of work so the reports usually have included
5 five different work types, housing, rent, initial
6 outfitting, services and supplies, IT and admin
7 costs, and other, medical and food. Could you give us
8 a detailed breakdown of the specific costs that are
9 included within each of those five work types?
10

11 DEPUTY DIRECTOR GREENBERG: Thank you for
12 the question. I can break down what we've spent so
13 far in this Fiscal Year by those categories to
14 contextualize this. Services and supplies have been
15 464 million, housing, rent, initial outfitting 333
16 million, IT/administrative 122, food 64, and medical
17 26. Within those categories, for example, services
18 and supplies, this captures things like the staff at
19 intake who do registration, the security, the
20 laundry, guest transportation, a lot of those
21 administrative components that are not just for the
22 arrival center but also for the sites including
23 cribs, diapers, baby formula. In the housing, rent,
24 and initial outfitting, it's the room rate, a lot of
25 times now we're seeing furnishings because we're

1 building out new sites completely. Medical is the
2 baseline medical staff, the isolation staff, TB
3 screening, vaccinations. On the IT side, we have the
4 technology buildout, wi-fi, staff laptops, and those
5 kinds of costs.

7 CO-CHAIRPERSON BRANNAN: Is the actual
8 sheltering the lion's share of the cost or is it
9 something else?

10 DEPUTY DIRECTOR GREENBERG: Sure, let me
11 look at the spending to tell. If we look at the grand
12 total of what we have spent since the beginning of
13 the crisis, which is the 2.46 billion, 1 billion is
14 for services and supplies and about 893 is for rent
15 and the initial outfitting so it's not the majority,
16 but it is the second largest cost.

17 CO-CHAIRPERSON BRANNAN: Out of the
18 current 394 dollar per-diem costs, can you break that
19 down to us by dollar, what it breaks down to, food,
20 rent, shelter services?

21 DEPUTY DIRECTOR GREENBERG: As Michael was
22 saying, we look at this from a holistic view because,
23 unlike the DHS per-diem from before we had the asylum
24 crisis, that system is pretty homogenous when you
25 look across the board so you have families with

1 children side, it kind of looks the same across the
2 board, the same with the other populations, single
3 adults, and adult families. Because this is a totally
4 different system that we essentially built from the
5 ground up, we don't break out the per-diem in that
6 way because we're seeing so many agencies incur costs
7 that benefit each other's systems so we don't want to
8 mislead by saying this cost and this agency as
9 opposed to the whole thing because really there's a
10 lot of shared resources and shared contracting that's
11 happening and so, when we do the per-diem, we look at
12 the system-wide costs.

14 CO-CHAIRPERSON BRANNAN: If I'm looking at
15 pie chart of 394 dollars, can you break down what
16 makes up that 395? It doesn't have to be exact to the
17 cent. I'd like it to be, but it doesn't have to be.

18 ASSOCIATE DIRECTOR CHIMOWITZ: Because we
19 sort of need to have a comprehensive view of all
20 costs, we aggregate all the costs and do not break
21 them down into the subcategories. You can see the
22 historical spending, but, because there is sort of a
23 mixture in the historical spending to date of one-
24 time costs, recurring costs, and variable costs,
25 those breakdowns are very volatile, and so in order

1
2 to have the most accurate forecast, we look at the
3 aggregate number and trends in the aggregate number.

4 CO-CHAIRPERSON BRANNAN: I understand, but
5 you can't tell me out of the 394 dollars, 50 dollars
6 goes to this, 120 dollars goes to that?

7 COMMISSIONER ISCOL: Part of the problem
8 that they're trying to articulate is because it's a
9 system, right, and so you have different folks that
10 are receiving different sort of services within that
11 system, but there's also cross pollination across
12 sites and across the system so it's not like you
13 could just say of that 300-some-odd dollars, 25
14 dollars for everybody is security costs. What I think
15 that they could provide is sort of this is a holistic
16 look at the budget and the breakdown of the entire
17 ecosystem that they could provide that pie chart to
18 you, but it would not equate to an individual because
19 different individuals are receiving different
20 services or different pieces of that based on what
21 type of site they might be at, based on the makeup of
22 their family, based on what their particular needs
23 might be in this system, and so that's why they're
24 taking this more sort of ecosystem approach where
25 they look at the top line number and divide it by the

1 number of people in our care as opposed to something
2 that has a more homogenous population so that larger
3 number could be provided but not a breakdown for each
4 individual.
5

6 CO-CHAIRPERSON BRANNAN: I understand
7 that. We're coming up with 395 somehow, right, so how
8 are we getting there?

9 ASSOCIATE DIRECTOR CHIMOWITZ: The 394
10 takes the estimates of all costs that the agencies
11 give us between July of 2022 and August of 2023 and
12 divides by the household nights in care.

13 CO-CHAIRPERSON BRANNAN: Okay. I want to
14 talk about the HERRCs. I want to get a better
15 understanding of how these costs differ so OMB
16 indicated that the per-diem costs for asylum-seekers
17 in the HERRCs was 400 dollars while the costs for
18 those in DHS shelter systems was 254 dollars. The
19 Council never received any kind of breakdown of any
20 per-diem costs, I think as we just detailed just now.
21 If the HERRCs are so much more expensive, why are we
22 relying on them so much? Are they better than what's
23 happening at DHS or why are they so much more
24 expensive?
25

2 COMMISSIONER PARK: Thank you, Council
3 Member. Let me start and my colleagues will jump in.
4 I think for the first almost year of this crisis, DHS
5 was on the frontlines, and we reached out to all of
6 our traditional providers then we reached out to
7 providers that worked with ACS and DYCD. We brought
8 in providers who had never done any business with the
9 City before. This has been an overwhelming challenge,
10 and there is no possibility for this to be a DHS
11 response alone. Our system is one that evolved over
12 40 years, and in 18 months we've more than doubled
13 the size of the universe of people receiving
14 sheltering services so we absolutely depend on the
15 colleagues here at the table for this to be a whole-
16 of-government response. It's just too big for one
17 agency to handle alone.

18 That being said, I think, high level,
19 some of the reasons for cost differences that you see
20 is we do have some infrastructure that we can
21 capitalize on, that's helping, but also that I think
22 there are costs that are system-wide that because
23 they might be initially paid for out of the H and H
24 budget or may be getting frontloaded into the some of
25 the HERRC dollars, when you're looking at per-diem,

1 it isn't necessarily an apples to apples comparison,
2 but also note that we have about a third of our sites
3 at this point are staffed by the National Guard,
4 which is a real cost but not one that you're going to
5 see reflected in the per-diem because it's being
6 borne by the State, and the HERRC side doesn't
7 necessarily have that particular piece of it so I
8 guess to be somewhat brief I think there are two
9 pieces. One is it cannot be DHS solo given the scope
10 of the emergency, and, two, when you're comparing the
11 numbers, they aren't necessarily apples to apples
12 because of the way costs are allocated.

14 DR. LONG: If I may add a third factor
15 that contributes is when Health and Hospitals raised
16 our hand to help our DHS colleagues when this was an
17 emergency crisis that was going at an emergency level
18 speed, we used emergency contracts. Emergency
19 contracts are probably always going to be more
20 expensive than tried-and-true RFP-chosen vendors that
21 can competitively drive down the price, but, going
22 back to what Speaker Adams said a few minutes, that's
23 why the most important thing I'll tell you about this
24 third factor is that we're transitioning to do long-
25 term planning now by having already put out four

1
2 RFPs, thinking about our sites as a series of
3 services, four of those services are out to RFP, and
4 some RFPs have already close so I think that going
5 forward, that's a cornerstone of our strategy to
6 reduce costs is bringing in as much competition as
7 possible through the vehicle of the RFP so we'll soon
8 see some of the effects of that, but it's not
9 something we've waited to do. We put these RFPs out
10 during, as we refer to it as, the fourth surge for a
11 lot of them so it was very hard to do long-term
12 planning in the midst of having a sharp uptick of the
13 number of people coming each day to us, but it's a
14 high priority for us, and I know it is for you all as
15 well, and that's why we did that during this fourth
16 surge.

17 CO-CHAIRPERSON BRANNAN: I think we've
18 identified 16 agencies that are involved in the
19 asylum-seeker response, and some of them are not
20 agencies that typically would handle something like
21 this so could you provide a summary of the services
22 that each of those agencies are providing? If not,
23 especially the ones that are not attending the
24 hearing today?

25

2 COMMISSIONER ISCOL: Do you want to list
3 out what the 16 agencies are that you are speaking
4 of?

5 CO-CHAIRPERSON BRANNAN: Sure, yeah. We've
6 identified obviously DHS and HRA, H and H, HPD,
7 Emergency Management, DCAS, OTI, Department of
8 Health, DDC, NYPD, DEP, DYCD, FDNY, Parks, ACS, and
9 DOB.

10 DIRECTOR SCHAEFFER: I can start. A lot of
11 the agencies that you see reflected here are involved
12 in our siting processes in one or another so, for
13 instance, DDC, HRA, and DCAS, for varying parts of
14 this will hold parts of contracts or leases or parts
15 of the siting process because, again, this is a
16 whole-of-government approach and we needed to pull in
17 capacity from everywhere. OTI is really managing our
18 entire technology needs. We're working with NYPD on
19 all the safety and security at our sites, not just
20 the safety of our individuals but also when there are
21 protests outside our sites, for instance, then we
22 need NYPD to be there. DOHMH is also helping on some
23 of the health-related needs. We also have little
24 pieces of Parks, whenever we were using Parks land,
25 for instance, they need us to fix the ground or they

1 need to do processes to make it possible for us to be
2 there.

3
4 COMMISSIONER ISCOL: (INAUDIBLE) places
5 like that. Look, this is completely normal for
6 emergency management, correct, that you sort of have
7 a host of agencies that you tap into based on their
8 core competencies so, for example, when it comes to
9 sheltering and housing, there are certain core
10 capabilities that we at Emergency Management have
11 based on the ability to run coastal storm shelters.
12 It's not a one-to-one, but it's something that we can
13 adapt to this. HPD is another example of that, right?
14 They run emergency sheltering programs through the
15 Red Cross, and we work very closely with them after
16 disasters to find housing for folks so there is a
17 core competency there as well that also extends to
18 Health and Hospitals. To the extent possible, what
19 we've done is tapped into the resources of various
20 City agencies to coordinate a collective response. As
21 Molly said, there are a lot of agencies that, in
22 particular, are involved in the establishment of
23 these sites, whether it's DOB, FDNY, DYCD, etc.

24 COMMISSIONER PARK: On the human services
25 side, as I noted, we have a number of our shelters

1 that are being run by National Guard. They are
2 terrific operational folks but not social service
3 experts. We have partnered with ACS, DYCD, DOHMH,
4 others to provide services on-site, particularly the
5 families with children shelters. We're very grateful
6 for their partnership.
7

8 DR. LONG: I tried to furiously write down
9 everything as you were saying it, but I'm not as fast
10 as I used to be. Just to give you some precise
11 answers to, but Molly's faster than me. OTI helped to
12 build out the database and how we store and look at
13 data across our whole City system which has been I
14 think pivotal, and I would actually say one of the
15 things that's unique about New York City is all of
16 this assessment data that I referenced earlier,
17 that's our opportunity to have specific targeted
18 interventions which we have in New York City that I
19 don't know if other places have, but it's going to,
20 again, be a very important part of our approach.
21 DOHMH has been a critical partner to think about
22 communicable disease, both prevention, screening,
23 management, things like that the whole way through.
24 DYCD has enabled us to have English as Second
25 Language classes which we've had, Director

1
2 (INAUDIBLE) can correct me here but I believe five or
3 six so far through DYCD. I've attended some myself.
4 It's really heartwarming. People are learning to
5 speak English so that they can get the jobs they want
6 which is their number one goal. ACS has been a
7 critical partner too, thinking about the safety of
8 children. We're in constant communication with them
9 if there are any concerns. I think your question
10 actually is a really nice way of just outlining that
11 this is not just one agency, not just DHS holding all
12 of the weight themselves. This really is a whole-of-
13 government approach, and I think it's the best of
14 government seeing what we've been able to do when we
15 all come together as a whole-of-government in New
16 York City.

17 CO-CHAIRPERSON BRANNAN: Dr. Long, I think
18 H and H is doing a great job. The question I have is
19 as far as the spending for H and H versus DSS, is
20 greatly outpacing the spending at DSS. Going back to
21 what you said before, I'm assuming you attribute all
22 that to the emergency contracts?

23 DR. LONG: I think there's two other
24 important factors, and then I'll turn to my
25 colleagues at OMB to share more, but one is that H

1 and H started things that affect the whole system
2 such as the arrival center so the arrival center was
3 a tremendous endeavor in terms of our ability to
4 streamline services and localize as much upfront as
5 we can. We do everything from communicable disease
6 screens, urgent care, screening for depression for
7 everybody 12 and above, vaccinations while you're
8 waiting to speak with one of our caseworkers. It's a
9 streamlined model, but, overall, it touches every
10 asylum-seeker coming into New York City each day.
11 That's a cost that we have on the H and H side.
12 Another is that over time we've opened more families
13 with children sites, and that's also had a roll, and
14 finally, I guess I had three things, some of our
15 NYCEM sites that have open which Commissioner Iscol
16 can share more about utilize H and H contracts so
17 that may be coming up as a cost on the H and H
18 contract side but, in fact, it's for a different part
19 of our system so that every part of our system can
20 succeed in making sure that we're offering shelter to
21 everybody as they enter our city, but I'll turn to
22 OMB to share more.

24 COMMISSIONER ISCOL: Sure. Thank you.

25 You're right to note, Council Member, that you're

1 seeing a shift, and the costs on the non-DSS system
2 are starting to go up. I think there's a few reasons
3 for that. Just to add on to what Dr. Long was saying
4 is that as DHS is sort of tapped out, there's only a
5 limitation of how many more sites they can bring on,
6 we've had to bring in other partners, and the
7 marginal cost of new capacity that comes on, every
8 extra unit is going to get more expensive because of
9 the market dynamics that Michael was describing
10 earlier so that's a big part of why you're seeing
11 this shift. Again, we also had to create an entire
12 infrastructure that did not exist before, and so that
13 is also why you see the costs on the non-DSS side of
14 the world starting to go up over time.

16 CO-CHAIRPERSON BRANNAN: Last question for
17 me would be with regard to the DSS shelters, how has
18 the percentage changed as far as asylum-seeker
19 population versus homeless New Yorkers?

20 COMMISSIONER PARK: Thank you. At the
21 start of this Administration, there were about 45,000
22 people in the DHS shelter system, essentially 100
23 percent of them long-term New Yorkers. At this point,
24 there are about 85,000 give or take people in the DHS
25 shelter system, and about 54,000 of them are more

1
2 traditional clients. We have about, I'm probably
3 scrambling my arithmetic slightly, but we have about
4 33,000 asylum-seeker. At the start of the Atrial
5 septal defect, we were a system serving traditional
6 clients. At this point, the DHS shelter system, not
7 quite half, maybe a third of our clients are asylum-
8 seeker.

9 CO-CHAIRPERSON BRANNAN: Okay. We've also
10 been joined by Council Members Moya and Velázquez,
11 and now I'm going to hand it over to Deputy Speaker
12 Ayala for her questions.

13 DEPUTY SPEAKER AYALA: Thank you, Chair.
14 My first question is regarding the OASO operations.
15 On March 7, 2023, the Mayor issued a report called
16 The Road Moving Forward, outlining a blueprint for
17 the City's response to the asylum-seeker crisis going
18 forward, and the plan included the creation of a new,
19 the Office of the Asylum-Seeker Operations. The
20 Council is still not fully clear about where this
21 office is located or funded and what the
22 responsibilities of the office are.

23 DEPUTY DIRECTOR GREENBERG: I can start
24 with the funding and then hand it over to Molly. The
25 budget for the Office of Asylum-Seeker is 1.6

1 million, and it supports 10 staff. That is going to
2 be reflected for this year and for FY-25 in the
3 upcoming November modification.

4
5 DIRECTOR SCHAEFFER: Thank you for that
6 question. Our Office has been working since even
7 before that Blueprint was released. We brought over
8 people from lots of different places and lots of
9 different agencies to play the real key central
10 coordination role that we're playing and to really
11 help think of and move the City forward in thinking
12 of this as an immigration issue rather than a
13 homelessness issue and trying to bring in lessons
14 from other cities, lessons from the federal
15 government, lessons from everywhere else to sure up
16 our operations and make it a cohesive ecosystem
17 across all the different agencies that sit here. We
18 continue to pivot as the crisis pivoted, and so at
19 this point we are really looking to sure up our
20 operations and that's also why I'm sitting here
21 before you today.

22 DEPUTY SPEAKER AYALA: Can you share with
23 under which City agency is the OASO office located?

1
2 DIRECTOR SCHAEFFER: Currently, we're in
3 the Mayor's Office. We report to the Chief-of-Staff
4 Camille Joseph Varlack.

5 DEPUTY SPEAKER AYALA: Okay. We mentioned
6 the budget which seems pretty minimal in comparison
7 to all of the funding resources that are being spread
8 across the different agencies. You mentioned 10
9 staffers. Are you fully staffed or is there an
10 expectation that you will be hiring and, if so, how
11 many staffers would the Office need to operate?

12 DEPUTY DIRECTOR GREENBERG: We're working
13 together on the budget. This is being put together,
14 typically with these kinds of offices at the
15 beginning you pull in people that are already in the
16 City infrastructure and then you start building it
17 out so the budget we have right now for those 10
18 folks is largely made up of people that we pulled
19 from other roles within the City infrastructure.
20 Going forward as a part of the November Plan and as
21 we need to modify since this is an evolving
22 situation, we will add resources to staff up the OASO
23 office, and Molly can speak more on the roles and the
24 kinds of folks she's looking for.

1
2 DIRECTOR SCHAEFFER: Our Office is really
3 focused right now on forward planning, how do we sure
4 up the legal to work pipeline as, you know, my
5 colleague, Masha Gindler, testified last week about
6 the amazing work we've been doing with asylum
7 applications and TPS and work authorization so we're
8 really looking to sure up that work. We're really
9 looking at citywide infrastructure, what do all these
10 agencies need to continue doing this work to the
11 level that we want to. Obviously looking at cutting
12 cost. That is something key to our mission, and
13 really looking at resettlement models and how we can
14 move forward and really do resettlement long-term,
15 and so all of those things are the roles that we're
16 looking for as well.

17 DEPUTY SPEAKER AYALA: So you are
18 currently hiring?

19 DIRECTOR SCHAEFFER: We are currently
20 hiring.

21 DEPUTY SPEAKER AYALA: Yeah, because I did
22 see there were about, I think 16 positions that were
23 posted, so that will get you to 26. Is that the
24 number you're looking for?
25

1
2 DIRECTOR SCHAEFFER: At this time but, as
3 mentioned, we continue to pivot and shift as this
4 crisis requires us to.

5 DEPUTY SPEAKER AYALA: I'm still a little
6 bit confused about what the actual function, I'm
7 getting that there's a lot of coordination that
8 happens under your purview, but can you walk me
9 through that a little bit just so I better
10 understand? It's been a long morning for me.

11 DIRECTOR SCHAEFFER: You can talk to each
12 of these Commissioners. I annoy them daily. I call
13 them probably throughout the day. Our Office is
14 really tasked to making sure that we're continuing to
15 shelter people in the way that we can, that we're
16 finding beds, that we're bringing sites online, that
17 we're really connecting all of the individuals
18 throughout our system to each other and to the
19 resources that the City has to offer, and that we're
20 really, again, looking ahead, talking to other
21 cities, making sure that we know what's happening at
22 the border. We're able to communicate that out to
23 everyone here, get some situational awareness, and
24 that we're helping to work with the state and federal

1
2 partners to make sure we get the most support out of
3 them as we can.

4 COMMISSIONER ISCOL: I would just like to
5 remind Director Schaeffer that she's under oath. She
6 doesn't just call us during the day. She calls us
7 24/7, but I would just say I mean the work that Molly
8 in particular and her team have been doing is really
9 remarkable. They've really behind the scenes been
10 keeping this City's head above water. Every day they
11 are hosting calls with all of the different agency
12 partners, making sure that we are coordinating
13 movements of the population, spearheading the opening
14 of new sites, making sure that we're all staying on
15 task, and that is a 24/7 operation, and so it's
16 really been incredible working with them and it's
17 great to see this now, taking something that Molly
18 has been doing sort of as an additional role over the
19 last 18 months and now having some infrastructure so
20 she's not just doing it by herself which she has been
21 doing.

22 COMMISSIONER PARK: I just want to echo
23 what Commissioner Iscol said and note that it's not
24 just Molly calling us, but every time we run into a
25 question, into a hiccup, into a I need to get these

1 three people on the phone, I need to problem-solve X,
2 Y, and Z, I call Molly so she's doing an incredible
3 job herding all of us categories.
4

5 DR. LONG: Just to hearken back to what
6 Chair Brannan was saying a few minutes ago, the way
7 this is a whole-of-government response is by having
8 excellent communication among all of the agencies
9 with our daily, seven days a week phone calls. That's
10 like the secret ingredient to being able to take all
11 of the agencies respectively what they do best and
12 bring it all together into the New York City
13 response.

14 DEPUTY SPEAKER AYALA: George, you don't
15 want to share how great Molly is?

16 DEPUTY COMMISSIONER SARKISSIAN: I'm
17 sitting here next to Dr. Ted so I don't necessarily
18 get the air time I might want.

19 The thing you should know also about what
20 Molly does is we all are coming every day into this
21 coordination meeting, and she's coordinating with Dr.
22 Ted at the arrival center, how many people are coming
23 in, how many rooms do we need, and then she's pushing
24 all of us to get those rooms and bring them online.
25 I'm at HPD, Zach Iscol is at OEM, so we all have our

1
2 other hats that we wear in addition to this hat, and
3 when we say we're bringing on a new hotel, she tells
4 us to do it today because she's thinking about the
5 people that are standing in line at the arrival
6 center so she's helping us focus on what's important
7 and keeping people off the streets so, for us, it's
8 like an accountability system that's like super
9 important to all of the folks that are working on
10 this at HPD.

11 DEPUTY SPEAKER AYALA: Molly is like the
12 holder of information and coordinator extraordinaire.
13 That's great. Obviously, in light of what's
14 happening, you need a person that's kind of centered,
15 right, that is not as preoccupied with the day to day
16 of running these facilities so obviously appreciate
17 all of those efforts.

18 Obviously, you know my opinions on the
19 60-day rule, the 30-day rule. It's been three months,
20 and in three months we've had three different
21 policies presented. I get the nature of the
22 seriousness, but I would love for somebody to explain
23 to me, and I don't know if it's too soon, but if it
24 is too soon then that speaks to a larger question of
25 should we be implementing a new policy in light of

1
2 the fact that we don't have enough information yet,
3 but what is the cost savings to the City to implement
4 the 60-day policy, like how much money are we
5 actually saving by doing that, and I ask because I
6 don't know what the exact number is, Molly, maybe you
7 can share or Zach, of individuals that already
8 received the 60-day and the 30-day that have rotated
9 out and are possibly either relocating or rotating
10 back in?

11 DIRECTOR SCHAEFFER: I can't talk to the
12 cost savings as it's very early days as you know,
13 but, at this point, we have given over 13,500 60-day
14 notices and 5,300 30-day notices. As mentioned, we
15 have 4,000 people coming each week. We coordinate
16 every morning to find spaces for them, but it gets
17 increasingly hard as we continue, and we've had more
18 than 130,000 folks through our doors as Dr. Long
19 mentioned earlier today. More than 60,000 people have
20 already left our shelter system and been able to
21 connect with family, friends, and connect to other
22 resources in the City. This is just really, again,
23 giving us a time limit to help people and making sure
24 that we're pairing this with really intensive case

1
2 management and, again, we've seen some early success
3 in this.

4 DEPUTY SPEAKER AYALA: How do you define
5 success?

6 COMMISSIONER ISCOL: Do you mind if I just
7 add one thing?

8 DEPUTY SPEAKER AYALA: Yes.

9 COMMISSIONER ISCOL: I think one thing
10 that I know you've heard this a lot before, but we
11 are not operating in a place where we have good
12 options or choices. We are operating from a place now
13 where we are forced to make decisions that are
14 sometimes just the least worst option. I think with
15 the deadlines in place, there's a number of sort of
16 things that we are looking at. Cost savings is one of
17 them that we're assessing. Space is another, and
18 operational capacity to support incoming people. I
19 think there's another piece that we're looking at
20 which is the resourcefulness and ingenuity of the
21 population in our care and that if given a deadline
22 and if given the intensive case management, they
23 often find their own way and we're seeing that, and
24 that is success ultimately. Being in our system is
25 not successful. People leaving our system, getting on

1
2 their own two feet. That is successful, and I think
3 this is something that we're going to continue to
4 look at. We share your concerns about the potential
5 downside of these deadlines. We get it. The people up
6 here, we care deeply about the people in our care,
7 and it's something that we are going to be watching
8 very, very closely, and, if it is not working for
9 some reason, if we see large numbers of encampments
10 or people on the streets, this is an Administration
11 that will then adjust to those challenges if we need
12 to, but I think what we are seeing right now is some
13 initial success with this with the deadline,
14 ingenuity, and the capabilities of this population of
15 people then making it out on their own.

16 COMMISSIONER PARK: Let me just jump in
17 there since Commissioner Iscol mentioned encampments.
18 As you know, DHS operates 24/7, 365 days a year
19 outreach to people experiencing unsheltered
20 homelessness. Something we're monitoring very
21 closely, but, to date, we have not seen any
22 meaningful number of asylum-seekers among those
23 experiencing unsheltered homelessness.

24 DR. LONG: I just wanted to add because we
25 think a lot about what success looks like, and,

1 ultimately, I think our mission is to help asylum-
2 seekers complete their journeys. They're all here for
3 the same reason, to create a better life and escape
4 from horrors and trauma that they experienced in
5 their countries of origin. When they get here, one
6 point I just wanted to drive home, is I don't think
7 the limits in and of themselves are what's enabling
8 people to achieve the goal of a better life. I think
9 it's our ability which we have started to do so far
10 to pair notices with case management services, and
11 that's why I'm particularly interested as we go
12 forward here having that be the cornerstone of
13 everything that we do, as the glue that connects
14 people. It's not just a way of saying you have a
15 certain number of days in the system. It's our way of
16 saying we have this much time to either help you to
17 get resettled, to get authorized to work, to get OSHA
18 training, to get IDNYC to get the job you want, or to
19 get reticketed anywhere in the country once we've
20 worked with you to identify that's the best option
21 for you, maybe, and your children so I just wanted to
22 make the point that the case management piece here is
23 beyond critical. I think it's the cornerstone of how
24 we need to be looking at this.
25

1
2 DEPUTY SPEAKER AYALA: Just reminding
3 everybody that you're under oath and I need to ask a
4 serious question. Does his pleasant demeanor and
5 disposition annoy the crap out of you? I've never
6 seen him angry or upset or stressed out.

7 COMMISSIONER ISCOL: Are we supposed to
8 talk about Dr. Long?

9 DEPUTY SPEAKER AYALA: Yes.

10 COMMISSIONER ISCOL: It did originally,
11 but he's grown on all of us. He was New York's
12 favorite doctor. He's now America's favorite doctor I
13 think it's safe to say.

14 DEPUTY SPEAKER AYALA: I don't even know
15 how to question him. I try to be mean and tough with
16 him. I can't.

17 All right, so I think I'm going to go
18 back a little bit. I think part of the issue here is
19 that there are so many agencies and so many hands
20 that are involved. Obviously, this is horrible. It
21 makes it a little bit more difficult to kind of
22 ascertain where we are, where we're doing really
23 well, where we're not, what we could be doing better.
24 I, obviously, will continue to say on the record that
25 I do not agree with applying the 60-day rule to

1 families and children. I just think it's really
2 catastrophic that we would even think about doing
3 that. Many of these families came here with nothing,
4 and, throughout the course of time, they've been able
5 to kind of be able to get access to clothing and
6 materials and things that make them feel a little bit
7 whole. Now you imagine you have four children and you
8 have to leave the shelter after 60 days and you're
9 one of the families that doesn't have anywhere to go,
10 then you have to grab all of your stuff, because I'm
11 assuming on the day of, you have to pack up all your
12 stuff and you have to leave, right?

14 DIRECTOR SCHAEFFER: We'll get back to you
15 on the details of exactly what happens on day 61.
16 We're still formulating the exact plan of what
17 happens. By that day, we should know which families
18 are going to leave and which ones aren't because of
19 our intensive case management.

20 DEPUTY SPEAKER AYALA: If the letter was
21 handed out to 1,000 people, those 1,000 people are
22 leaving? That's the rule.

23 DIRECTOR SCHAEFFER: Some percentage of
24 them are going to move on, hopefully within the 60
25 days to other parts of the city, to housing, to

1 wherever they're going, but what I'm saying is
2 ultimately the way that the 30- and 60-day is working
3 is people come back to the arrival center. I can't
4 tell you today that that's exactly the same way that
5 we're going to handle the families with children.
6 We're still formulating that, and we'll get back to
7 you on it.
8

9 DR. LONG: I think the two critical pieces
10 to mention is school and healthcare. On the school
11 side, the Mayor has said this, we're committed to
12 working with DOE who has been a terrific partner, I
13 don't know if they were on the list we talked about
14 earlier, connecting to kids to school oftentimes the
15 day of when they arrive at one of our sites to make
16 sure that we are offering the families everything to
17 support their children's continuous education. On the
18 healthcare side, the same thing goes. If a family is
19 receiving healthcare at one of our sites and they're
20 going to be moving for a variety of reasons, maybe
21 they're moving because they found the apartment they
22 want, we're going to be working with them through the
23 vantagepoint of case management during that time
24 period to make sure they get uninterrupted care that
25 they and their family deserve so those are things

1 that are ongoing, but those are, I think, two very
2 high priority things that we'll be sharing more
3 information with you as we go forward.
4

5 DEPUTY SPEAKER AYALA: I've heard the
6 number 4,000 being shared regularly, that there are
7 4,000 people coming in a week, right? Is that right?
8 Of those 4,000 people that are coming in, how many
9 are families? I'm asking because initially what we
10 were told was that out of the influx number of people
11 that were coming in, they were primarily singles,
12 right? We had a lot of single, primarily males that
13 were coming in. So out of the 60,000-plus people that
14 we have in care now, how many of those are families?

15 DR. LONG: As Molly pulls up the number
16 here, and we can get it for you shortly, just to
17 agree with the first part of what you said. For sure,
18 that's true. When we started doing this work, when
19 Health and Hospitals got involved in October of last
20 year when we opened with Commissioner Iscol the first
21 Randall's Island site, the majority of people coming
22 in were single men. Interestingly at that time, too,
23 because we spent a lot of time talking to the asylum-
24 seekers at that juncture about what they wanted, and,
25 like clockwork, they would often say we want to work

1
2 for three weeks because that's as much time as it
3 would take for us to make enough money to bring our
4 children and the rest of our family up from typically
5 Venezuela up here to New York City so that we could
6 be together again and we'd see them get reunited, so
7 that's part of the reason why..

8 DEPUTY SPEAKER AYALA: Three weeks?

9 DR. LONG: Three weeks was the..

10 DEPUTY SPEAKER AYALA: Doing what kind of
11 job because I need to be in that industry because I
12 don't know that I can bring anybody up on even what I
13 make (INAUDIBLE)

14 DR. LONG: Again, I think as Zach said a
15 few minutes ago, people that have made it this far
16 come with a variety of resources individually but
17 many come with nothing except for their
18 resourcefulness, and the journey to get up here is
19 literal hell as you know, and, when they get here,
20 they're the most highly motivated people you could
21 possibly imagine. All of that's to say to make the
22 point around we were seeing initially adults. We did
23 see more adults exit our system day by day, and I
24 think a factor of that is the fact that they had

1
2 specific goals, and the goals of families with
3 children are going to look different...

4 DEPUTY SPEAKER AYALA: But has the number
5 of families grown is what I'm trying to get at?

6 DR. LONG: Yeah. Do we have the...

7 DIRECTOR SCHAEFFER: A majority of the
8 asylum-seekers in our care, more than 40,000, are
9 families with children. It's incredibly dynamic week
10 to week also because it changes the nationalities
11 that come in change and so does the population that
12 comes in. Originally, it was single males, and then
13 it shifted to mostly families with children that were
14 coming in week by week. We've seen another uptick of
15 single males so it continuously changes, but I will
16 say that the majority of the folks in our care are
17 families with children.

18 DR. LONG: To give a specific number on
19 the H and H side if it helps, at our H and H
20 humanitarian centers today, we have 22,861
21 individuals. Of those, 15,417 are among families with
22 children.

23 DEPUTY SPEAKER AYALA: Okay.

24 DEPUTY COMMISSIONER SARKISSIAN: For the
25 entire system here in our terms and conditions which

1 we sent over to you all at Council, we have 63,000
2 total people, 47,864 are families with children.

3
4 DEPUTY SPEAKER AYALA: Okay, and so I'm
5 assuming that the original 60-day and 30-day rule
6 idea that we would be able to empty out enough beds
7 to better accommodate for families with children is
8 not sufficient, is not yielding sufficient vacancies
9 at this point?

10 DIRECTOR SCHAEFFER: We're still getting
11 4,000 people per week. We still have more than
12 130,000 people who have come in. This is not
13 something that anybody wants to do, but it's sort of
14 out of necessity at this point, and I will also
15 mention that we know that our families with children
16 are our longest stayers, both in the traditionally
17 unhoused shelter system and in the asylum-seeker
18 system.

19 DEPUTY SPEAKER AYALA: Understood, but if
20 you run out of beds, right, if we have 60 beds and we
21 are at 60, and now we have an additional person come
22 into the system, then am I going to get rid of one of
23 the 60 to make space for that one and then take that
24 person and then move them, like it doesn't make sense
25 to me so the only conclusion that I can come to is

1 that this is a way to kind of go around the right to
2 shelter law. Is that a correct assessment of the
3 rationale for that because I don't understand why not
4 just say we're at capacity, we have 60 beds, we don't
5 have any more beds, we cannot identify any new beds
6 so, unfortunately, we're not going to be able to take
7 anyone new unless a bed becomes available. Does that
8 make sense?
9

10 COMMISSIONER ISCOL: I understand your
11 question. With the caveat that we don't have children
12 in the sites that Emergency Management is running,
13 but I think just one thing to sort of think about is
14 it is in our estimation infinitely worse to say to a
15 family that just arrived here we don't have a place
16 for you than it is to provide services and help to a
17 family over a period of time where you can then help
18 them get on their feet, help them get established,
19 and then make room for a new family to provide those
20 services to, and I think that's just one sort of
21 variable that I think is missing from that
22 assessment.

23 DIRECTOR SCHAEFFER: And as we mentioned
24 before with our 30 and 60 days, we have seen some
25 individuals make other plans, and it, again, really

1 gives us a time limit for really intensive case
2 management to pair with that to really help
3 individuals make the best choices for them. We've
4 said many times living in a hotel room with your
5 family is not the best, and so this really gives us
6 an opportunity to do that intensive case management
7 and see if we can shake up some capacity that way as
8 well.
9

10 DEPUTY SPEAKER AYALA: I agree with all of
11 the rest of it. I agree with the case management. I
12 agree that the spaces that we're housing people are
13 sometimes not ideal, are not places that would be my
14 first or second or even third option. I agree with
15 all of that. I just wonder if there's a different way
16 to do this without having to disrupt families, and
17 I've heard many reasons why. One of them being that
18 the more we move people around, the likelier it is
19 that they'll leave, which I don't agree with. I think
20 that that is really, really just poor policy, and I
21 don't think that that's something that we should be
22 adhering to here in New York City, and I'm not
23 accusing any one of you saying it, but it's something
24 that I have heard, and it's something that really
25 bothers me that we have that thought process.

1
2 I have a few questions here, I'll try to
3 ask them quickly, but, before I do that, I have a
4 question regarding security. How much money are we
5 spending on security for these sites? I imagine that
6 varies by agency.

7 COMMISSIONER PARK: Thank you, Council
8 Member. Without actually giving a specific answer,
9 and we can circle back if we don't have it, I
10 actually say it varies not just by agency but really
11 by site. One of the things that we look at most
12 importantly when we're developing a security plan by
13 site is how many points of entrance are there in a
14 building. We need to make sure that the doors are
15 secure and that nobody unauthorized can get in so
16 there's some buildings that have two doors and
17 there's some buildings that have eight doors, and
18 we're going to need a very different security plan
19 depending on what the actual physical layout is so we
20 at the Department of Social Services go site by site,
21 develop the security plan for each site. The minimum
22 is that there will be security on site 24/7 every
23 day, but it's going to look different depending on
24 what population and what the physical layout of the
25 site is.

1
2 DEPUTY SPEAKER AYALA: I'm assuming the
3 security is there to intervene to make sure that
4 everybody is safe and, if a fight were to break out,
5 are they then tasked with calling the NYPD if
6 necessary if they deem that necessary or..

7 COMMISSIONER PARK: Yes, absolutely.
8 They'll escalate a situation if needed. The primary
9 role of security at the Department of Social Services
10 sites is to manage access control, make sure nobody
11 unauthorized is coming in, and then to intervene in
12 any kind of emergency, could be some kind of a
13 conflict as you mentioned, but also to make sure if
14 we need to call 9-1-1 because somebody is having a
15 health emergency. They can also do that. Then they
16 will flag issues to the Social Service staff that are
17 on site as well for followup.

18 DEPUTY SPEAKER AYALA: Does anybody here
19 know why then Mr. Pearson, Tim Pearson, was in my
20 District at Wards Island last week with what I read,
21 I don't have any real information other than this is
22 information that was shared in the press, 100 police
23 officers, two drones, and dressed in an NYPD uniform,
24 not uniform but he had a jacket that said NYPD on the
25 back. This is in my District. I hadn't heard that

1 there were any issues, but I know that we have
2 security there because I've been there myself, and I
3 understood that there were some issues with quality
4 of life. There was some vending that may not have
5 been permitted on site. There was some maybe can
6 collecting happening in the perimeter of that
7 shelter. But would anybody know why exactly Mr.
8 Pearson would have been at that site or any other? I
9 don't even want to touch the fact that he is alleged
10 to have choked and thrown a female security officer
11 at another site that same day, but I don't understand
12 if we're paying for security, what is that role, what
13 exactly is Mr. Pearson's role in the security of your
14 sites?
15

16 DIRECTOR SCHAEFFER: Thank you for that
17 question. We work closely with the NYPD and all our
18 agency partners to ensure our sites are safe and
19 secure, and the safety and security of our staff and
20 those in our care are our top priority. The incidents
21 you mentioned are under review so I can't comment
22 further but happy to circle back if we have any
23 updates.

24 DEPUTY SPEAKER AYALA: I would. I think it
25 would've been nice to kind of get just a little bit

1 of a heads up that something did happen on Randalls
2 Island because, again, I've been very supportive of
3 the process and trying to be as helpful as possible
4 so it's really alarming to me when things like this
5 happen and I have to read about them in the press. I
6 had no idea that there was even a question about
7 illegal vending or anything else, which obviously I
8 think that could've been taken care of in a different
9 way. I don't think that it's a good use of resources
10 to bring in 100 police officers for quality-of-life
11 concerns that could've been addressed by the security
12 there, by Social Services providers that could better
13 explain what New York City rights and laws are
14 pertaining to that so I hope that there is an
15 investigation that's ongoing and that, at some point,
16 we get a little bit more clarity, but I have said and
17 I will stand by this if, in fact, Mr. Pearson is
18 guilty of the things that he has been accused of, he
19 needs to step down immediately.

21 With that, I will just ask you two or
22 three questions really quickly. In Fiscal Year 2023,
23 the asylum-seeker response expenditures for DSS
24 totaled 764 million. In Fiscal Year 2024, spending to
25 date for the agency totals 306 million. What

1 percentage of each year's spending is specifically
2 for emergency shelter costs?

3
4 COMMISSIONER PARK: Thank you. The vast
5 majority of that is emergency shelter cost, but we
6 lump into the emergency shelter, that would include
7 the cost of the physical space but it's also the
8 contract with the provider which covers the social
9 services, the food, the security so we consider all
10 of that to be the sheltering cost because we don't
11 break out the cost of the real estate versus the
12 services. We think both of them are important. That
13 being said, the cost of hotel rooms is a key driver
14 of that, of the approximately 2 percent of those
15 total numbers that are not related to sheltering. It
16 includes some legal services, translation contracts,
17 various other related support services.

18 DEPUTY SPEAKER AYALA: Would it be
19 possible to provide a breakdown of the non-shelter
20 cost budgeted for each, DSS and HRA?

21 COMMISSIONER PARK: Yeah, we can follow up
22 with that.

23 DEPUTY SPEAKER AYALA: Okay, and also
24 include how much has HRA and DHS spent on staff
25

1
2 overtime related to the response in Fiscal Year 2023
3 and Fiscal Year 2024 to date?

4 COMMISSIONER PARK: Sure. Fiscal Year 2023
5 is a total of 6 million split relatively evenly
6 across the two agencies. Fiscal Year 2024 for the
7 first two months, which is the most recent data that
8 I have, it's been about 1.8 million. Although the
9 bulk of the response is on the DHS side, we do
10 solicit volunteers from across the combined DSS
11 agency to work overtime at the shelters which is why
12 you see the overtime costs covering both DHS and HRA.

13 DEPUTY SPEAKER AYALA: Great. Thank you.
14 DHS is the primary agency providing temporary shelter
15 to unhoused individuals largely through contract and
16 non-profit shelter providers who administer services.
17 As a result, these contracts offer the best basis for
18 comparison of how costs for similar services differ
19 between regular and asylum response contracts,
20 whether they are emergency contracts or competitively
21 bid contracts. How do asylum-seeker contracts
22 compare, and I know that this sounds like we've asked
23 this question a million times, but how do the asylum-
24 seeker contracts compare in costs to similar

1 contracts issued under the regular process of DHS?

2 Please provide specific examples if you can.

3
4 COMMISSIONER PARK: Thank you. It is a
5 little bit of an apples and oranges comparison. Just
6 to give you the pre-asylum per-diem numbers for DHS,
7 and these are as reported in the MMR. I'm using
8 Fiscal Year 2022 because that's the last year where
9 there were no asylum numbers in there. For single
10 adults, it was about 136 dollars, for adult families,
11 172, and families with children 188. Those are
12 significantly less than the asylum per-diems on
13 either the DHS side or across the board as we've
14 previously discussed. I think a big piece of that is
15 that a typical DHS site is in a site that was
16 developed as shelter, sometimes ground up new
17 construction, sometimes a building that has been
18 adapted for the use and then has a nine-year contract
19 where we're paying rents that are sized on market
20 comparables for residential uses in the neighborhood.
21 When we have to use hotels, those are much more
22 expensive. Hotels can be turned on very quickly for
23 use as shelter. It is a really important part of our
24 response. It's something that we've used during

1
2 emergencies in other contexts, but hotels are quite
3 expensive.

4 DEPUTY SPEAKER AYALA: How many hotels are
5 we using now?

6 COMMISSIONER PARK: I believe I have this.
7 Sorry, just a moment. DHS is in 144 commercial hotels
8 specifically for asylum-seekers. My sister agencies
9 are also using some commercial hotels as well.

10 DEPUTY SPEAKER AYALA: How many are you
11 using, Zach? None?

12 Is HPD using any?

13 DEPUTY COMMISSIONER SARKISSIAN: We have
14 about 35 hotels.

15 DEPUTY SPEAKER AYALA: Here in New York
16 City?

17 DEPUTY COMMISSIONER SARKISSIAN: No, no.
18 Sorry. Upstate as well.

19 DEPUTY SPEAKER AYALA: Upstate.

20 DR. LONG: At H and H, I believe we have 8
21 of our 15 humanitarian centers are hotels.

22 DEPUTY SPEAKER AYALA: Eight? Okay.

23 COMMISSIONER PARK: Just to circle back to
24 the question about why DHS traditional per-diem
25 differ from some of the numbers that we've used for

1
2 asylum. As my colleagues at OMB have said, there are
3 various system-wide costs we are really working in
4 this infrastructure that are incorporated into the
5 figures for the asylum per-diems, and I will let them
6 speak more to that.

7 ASSOCIATE DIRECTOR CHIMOWITZ: In the per-
8 diem that we're talking about that's associated with
9 asylum-seekers, there are centralized costs that make
10 it a little bit of an apples and oranges comparison
11 to DHS because it's just a different composition of
12 what goes into the per-diem. To give you a sense of
13 those centralized costs would be, it would be
14 transportation from the arrival center between site
15 operation of the navigation and arrival center,
16 household reticketing, development and management of
17 a centralized guest intake and tracking system,
18 agency staff time, screening and testing for
19 communicable diseases, and so that is all kind of
20 centralized costs that are quite unique to our
21 response in this situation relative to the system
22 that was being operated before the asylum-seeker
23 crisis, and so that's one of the driving factors why
24 those per-diems look quite different.

DEPUTY SPEAKER AYALA: Okay. Last month, it was announced that the City extended its contract with the Hotel Association of New York City for an additional three years at a cost of 1 billion. DSS indicated at the Fiscal Year 2024 preliminary budget hearing that this arrangement would make contracting easier for shelter providers. How exactly does the approach of contracting with the Hotel Association directly rather than with a CBO provider impact and/or benefit CBO providers?

COMMISSIONER PARK: Thank you. Just to start, for clarification, we are looking at the contract period for the HANYC contract, I think at this point I expect it to be a one-year extension and then we will do some RFPs for the services.

To answer the question, we are contracting directly with CBOs for social service provision and for ancillary support services like food and security and things like that so we are still very much using our traditional not-for-profit provider contract model, but, by pulling the real estate out of that and funneling the real estate cost, the hotel cost, through this contract that we have now with the Hotel Association, it takes the

1
2 burden of managing that hotel relationship and the
3 hotel payments off of the not-for-profit, and it
4 takes it off of frankly the agency as well. We have
5 added 150 new sites and only a handful of new staff
6 so we're always looking at ways that we can be more
7 efficient with how we are operating here. We are
8 managing HANYC and then HANYC is managing all of the
9 day-to-day payments to the individual hotels. It also
10 means that if there is any hiccup in contracting,
11 anything like that with a not-for-profit, we
12 certainly strive not to have that be the case, but it
13 does mean that they're not on the hook for any hotel
14 bills, which is a major piece of the cost so it
15 provides some level of protection for them as well.

16 DEPUTY SPEAKER AYALA: Do you know if the
17 City was able to negotiate lower nightly rates with
18 hotels because of this agreement?

19 COMMISSIONER PARK: We are still
20 negotiating the hotel rates with the individual
21 hotels. I do think the fact that we can promise this
22 relatively streamlined payment mechanism does help
23 our interaction with the hotels. It's a little bit
24 difficult to quantify that. That's a qualitative
25 discussion point rather than quantitative. I would

1 say there are a number of driving factors in the
2 hotel rates. It's the location of the hotel. They
3 vary by season, right. They're more expensive if
4 we're contracting with them in the summer and then as
5 we get into the holiday season. It's the extent to
6 which we are as a City driving the hotel market as a
7 whole. We are in a lot of hotels so it is an
8 iterative process to negotiate rates with the hotels.

9
10 DEPUTY SPEAKER AYALA: Do we know what the
11 range in hotel room rates paid under the Hotel
12 Association contract is in comparison to rates under
13 other asylum-seeker contracts?

14 COMMISSIONER PARK: There's a range both
15 under the HANYC contract and with the hotels that
16 have been procured in other ways, but they are
17 relatively comparable, and we've been working very
18 hard to make sure that we aren't having one agency
19 compete with another agency by having different rate
20 schedules. We were talking earlier about the role
21 that Molly's team plays, and I think having that big
22 picture view to make sure that we are paying
23 consistent rates across the board is something that
24 they've been taking very, very seriously.

1
2 DEPUTY SPEAKER AYALA: Okay. Finally, this
3 is a question for OMB. In regards to State
4 reimbursement, how much of what we have spent to date
5 has been reimbursable by the State and the Federal
6 Government?

7 DEPUTY DIRECTOR GREENBERG: Thank you for
8 that question. As you know, we are appropriated 1
9 billion dollars in the last State enacted budget. We
10 have received an advance of 250 million dollars
11 against that grant, and, through the State Office of
12 Temporary Disability Assistance, we have a claiming
13 process set up so as we liquidate expenses on a two-
14 month lag, we submit those expenses to the State, and
15 they reimbursement rate is 29 percent so against that
16 claim, they'll reimburse 29 percent. In addition to
17 that, we have received from a separate pool of money
18 30 million dollars from the State, 10 million for
19 legal services and 20 for case management.

20 DEPUTY SPEAKER AYALA: Can you tell me a
21 little bit about what type of expenses we've been
22 able to submit for State reimbursement?

23 DEPUTY DIRECTOR GREENBERG: Sure. It's
24 pretty broad. They allow for expenditures across DHS
25 and the non-DHS sites including costs for the

1 navigation center and arrival center so it's pretty
2 much everything that we're spending on is eligible
3 for reimbursement. Not everything, but almost
4 everything.
5

6 DEPUTY SPEAKER AYALA: What would be an
7 example of something that wouldn't be covered?

8 DEPUTY DIRECTOR GREENBERG: Medical.

9 DEPUTY SPEAKER AYALA: Medical wouldn't be
10 covered?

11 DEPUTY DIRECTOR GREENBERG: No.

12 DEPUTY SPEAKER AYALA: Okay. That's a big
13 deal.

14 DEPUTY DIRECTOR GREENBERG: We're working
15 with them separately with them on that to figure out
16 a reimbursement stream for that.

17 DEPUTY SPEAKER AYALA: Okay, perfect.

18 Lastly, I'll ask a question for Molly, has the State
19 approved the 60-day policy for families with
20 children?

21 COMMISSIONER PARK: We are not currently
22 pursuing the 60-day policy for families with children
23 in the DHS system. If it is something that we are
24 going to follow up with, we will work with our State
25 partners.

DEPUTY SPEAKER AYALA: Do the families that are in Health and Hospitals, does that require State approval as well?

COMMISSIONER PARK: The (INAUDIBLE) oversight is specific to the DHS.

DEPUTY SPEAKER AYALA: I'll ask a followup question to that because when we spoke about singles, singles within the DHS, the DSS umbrella, were not subject to the 60-day, but then I believe that there was a transferring of DSS singles to HERRCs. Is that correct?

COMMISSIONER PARK: Correct. DHS has been moving asylum-seeker single adults out of commercial hotels and into a variety of HERRCs and sometimes respite settings so that we can prioritize the hotel rooms for families with children.

DEPUTY SPEAKER AYALA: Should we expect that families with children that are under the DSS umbrella will be transferring over?

COMMISSIONER PARK: No, that's not something that is currently under consideration. DHS remains very committed to being a part of this whole-of-government effort to shelter the asylum-seekers. We had more hotel capacity in our inventory, and so

1
2 in the goal of keeping families with children in
3 private spaces, doors that locked, we wanted to make
4 sure that we were using the hotel space in that
5 strategic way so that's why we did those transfers.

6 DEPUTY SPEAKER AYALA: The State approved
7 the singles, the 60-day...

8 COMMISSIONER PARK: We've been in very
9 close collaboration with the State. They understood
10 both those transfers and that we anticipate rolling
11 out a notice, there's a relatively small number of
12 single asylum-seekers remaining within the DHS
13 system, and they are certainly aware that we intend
14 to roll out a notice there. We will work with any
15 client in the DHS system who receives a notice who
16 does not have a place to go at the end of that time
17 period to make sure that they have an option.

18 DEPUTY SPEAKER AYALA: Okay. Thank you.

19 I'm done.

20 CO-CHAIRPERSON BRANNAN: Chair Brewer.

21 CO-CHAIRPERSON BREWER: Thanks. We've been
22 joined by Council Member Salamanca.

23 I guess before I get some specifically
24 broad questions, so if I am a family, picking up on
25 Council Member Ayala, in the H and H system and I hit

1 the 60 days, then I would prefer to go to the DHS
2 system because then I won't get kicked out. Is that
3 correct? If I know how to be resourceful.

4
5 COMMISSIONER PARK: We are collaborating
6 very closely across all the agencies here to ensure
7 that everybody's needs are being met without creating
8 incentives to shop across the different systems.

9 CO-CHAIRPERSON BREWER: Okay, but if we're
10 helping families to shop, we might suggest that.

11 A couple of questions before I ask, first
12 of all, on the West Side we have an amazing family
13 who is living on the West Side, they have formed a
14 501(c)(3) and at this point their in contact with all
15 the schools and I think 100 percent of the families,
16 and they could really run the whole world, these
17 particular parents, so one of the issues is, because
18 I know you say that everything is being provided and
19 we appreciate that, but clothing is still an issue
20 according to the parent coordinators. Is that
21 something that is supposed to be paid for or is it
22 supposed to be given voluntarily which a lot of
23 communities are doing, but they still don't have
24 coats, they still don't have shoes, etc., etc. Who's
25

1 supposed to be in charge of that? This is H and H and
2
3 DHS but go ahead.

4 DR. LONG: I'm happy to start and that's a
5 very important question. We had been providing
6 Salvation Army certificates so that you can go and
7 purchase whatever that you needed. I would welcome if
8 this organization wanted to partner with us, and you
9 can connect me directly to them, if they're able to
10 provide clothing to families in need. We have a lot
11 of experience...

12 CO-CHAIRPERSON BREWER: So Salvation Army
13 no longer exists, that particular program, is that
14 what you're saying?

15 DR. LONG: I have to doublecheck whether
16 we're going to be renewing them this winter. I don't
17 know if any of my colleagues who happen to know, but
18 we had them last year and it was successful. This
19 year, going into it too, I think if there are
20 organizations that want to partner with us including
21 NYC Cares, organizations that have a lot of..

22 CO-CHAIRPERSON BREWER: I'm just trying to
23 figure out what's going on. Right now, it sounds
24 like, and DHS, is that an issue?

1
2 COMMISSIONER PARK: Traditionally when
3 clients within our system need assistance with
4 clothing with a variety of philanthropic
5 organizations. We have continued to do that. We have
6 expanded it quite significantly. We do not have a
7 budget for clothing.

8 CO-CHAIRPERSON BREWER: Okay, so it sounds
9 like neither agency at this moment has budget for
10 clothing unless I'm wrong.

11 Metro Cards, my understanding is that if
12 you don't have a bus for a variety of reason, you can
13 get a Metro Card. Who's paying for that? Is that the
14 MTA, is that you? One parent coordinator had a
15 request for 80 Metro Cards, and she asked and she got
16 17 so, of course, that makes it challenging to get to
17 school so who's in charge of Metro Cards, how much is
18 it costing, etc., etc.?

19 COMMISSIONER PARK: Thank you, Council
20 Member. It's standard practice within the DHS shelter
21 system that if a family needs assistance with
22 transportation to school that we do provide Metro
23 Cards. Traditionally, the DOE actually, as you know,
24 provides student Metro Cards as well, and we can

1
2 assist with cards for parents if they need to take
3 their child to a (INAUDIBLE) school.

4 CO-CHAIRPERSON BREWER: Yeah, these are
5 parents.

6 COMMISSIONER PARK: Right, so that is
7 something that is fairly common across the DHS
8 system, not specific to asylum-seekers. That is a
9 cost that is borne by the City.

10 CO-CHAIRPERSON BREWER: By the City? Okay.
11 Just so you know, they didn't get their Metro Cards.

12 COMMISSIONER PARK: Okay, so if we could
13 follow up offline on the specifics..

14 CO-CHAIRPERSON BREWER: I don't know if it
15 was DHS or H and H, but they didn't get their Metro
16 Cards.

17 COMMISSIONER PARK: Yeah, happy to follow
18 up on that.

19 CO-CHAIRPERSON BREWER: Okay. The other
20 question I have is do we have cost-savings for the
21 30-day or 60-day, is there like a cost-savings that
22 you can, or is it too early to analyze up to this
23 point?

24 ASSOCIATE DIRECTOR CHIMOWITZ: It's too
25 early to analyze, but we're continuously monitoring

1 the data, and, if we see a systematic deviation from
2 our most recent forecast in August, we would update
3 to reflect the impact of those policies, but when we
4 do update the forecast at any given, we're taking a
5 comprehensive look at all dynamics that are happening
6 so we would also be taking into account, for
7 instance, the acceleration in inflow that we've seen
8 recently, so we have to balance in any forecast
9 update what we're seeing, potentially impact of new
10 policies as well as any accelerations or
11 decelerations that we would see at the front door.

12
13 CO-CHAIRPERSON BREWER: So you'll know by
14 August, you'll say whether or not, when are you going
15 to know whether there are any cost-savings for the
16 60- or 30-day?

17 ASSOCIATE DIRECTOR CHIMOWITZ: When I was
18 referring to August, that's the most recent
19 projection..

20 CO-CHAIRPERSON BREWER: Right.

21 ASSOCIATE DIRECTOR CHIMOWITZ: Numbers.
22 We're monitoring to see if there is a deviation in
23 trend because such a policy, there's really no
24 historical precedence for us to easily estimate the
25 impact. We will see, and, if there is a divergence in

1 the data, then the model will pick that up and imbed
2 it in the next iteration of the forecast.

3
4 CO-CHAIRPERSON BREWER: Okay, I don't
5 really understand what you're saying, but I'll let it
6 go for now.

7 The other question I have though about
8 buses. There's a lot of buses. There's buses between
9 Port Authority, which I think Ruth Messinger takes
10 credit for, but somebody got those buses, then
11 there's the buses upstate so that George has
12 something to talk about, and then there's buses to
13 get to school. Who's paying for all these buses, who
14 was doing the RFP, etc? A lot of buses, and how can
15 you save money on buses?

16 DEPUTY COMMISSIONER SARKISSIAN: Buses,
17 yes, there's buses. As a part of the contract we have
18 with DocGo...

19 CO-CHAIRPERSON BREWER: I love that
20 organization.

21 DEPUTY COMMISSIONER SARKISSIAN: I know
22 you do, I know you do, Gale, but as part of their
23 contract, they actually do recruit folks in the
24 arrival center and, when we have capacity upstate,
25

1 they charter the bus to go upstate and take folks to
2 their destination.
3

4 CO-CHAIRPERSON BREWER: That was an RFP to
5 get DocGo to do the bussing, because I didn't know
6 that medical organizations do buses?

7 DEPUTY COMMISSIONER SARKISSIAN: They
8 subcontract, right? That's what a lot of
9 organizations do. They subcontract to find the folks
10 that have the experience and capacity to lend us a
11 hand in an emergency situation.

12 CO-CHAIRPERSON BREWER: So how do we know
13 they get a good price for their subcontract on all
14 these buses?

15 DEPUTY COMMISSIONER SARKISSIAN: We're
16 just now receiving the invoices. There's a max amount
17 they can charge us for transportation, and all that
18 was negotiated at the time of the contract back and
19 forth..

20 CO-CHAIRPERSON BREWER: But how would
21 that, for instance, if I rent a bus, which I often do
22 to go to a demonstration in Washington, D.C., that's
23 when I've rented buses? Do you like compare those..

24 DEPUTY COMMISSIONER SARKISSIAN: Yes,
25 great point, Gale. Every time we add something to a

1 contract, we try to get comps to make sure what we're
2 adding to the contract is reasonable.

3
4 CO-CHAIRPERSON BREWER: Who's in charge of
5 the bus going from the bus station to the Roosevelt
6 Hotel? Who's in charge of that bus? Who's making the
7 good contract on that?

8 COMMISSIONER ISCOL: We use a lot of
9 different buses as you assessed. There is no regular
10 bus now from the Port Authority to the Roosevelt.
11 However, we also every day, as we open up new sites
12 or as we're moving people from different sites,
13 there's a number of ways that we do that. We tap into
14 MTA buses, we tap into DOE buses, we tap into
15 Correction buses.

16 CO-CHAIRPERSON BREWER: So they're City
17 buses is what you're saying.

18 ASSOCIATE DIRECTOR CHIMOWITZ: DCAS buses,
19 we get buses from a lot of different places, and
20 every day there is a team that is coordinating the
21 transportation and looking at what agencies might be
22 able to provide that service whether it's the State
23 or another City agency that day to provide that
24 service as needed.

1
2 COMMISSIONER PARK: DHS has fairly
3 extensive contracts for busing already. We do a lot
4 of moving people around the city, and we've been able
5 to tap into those.

6 CO-CHAIRPERSON BREWER: Okay. The other
7 question I have when you say intensive case
8 management, my cynical friends tell me that means how
9 to leave the city so what exactly does intensive case
10 management involve?

11 DR. LONG: Going forward, the first thing
12 that we've done now which we're finishing which will
13 power our case management program which we hope to
14 formally launch in the next couple of weeks, we call
15 it the Red, Yellow, Green program, is getting the
16 data through doing assessments on everybody in every
17 part of our system from DHS to HPD to H and H
18 humanitarian centers and asking the same set of
19 questions. For example, we would ask you are you
20 interested in being resettled, reticketed, do you
21 have friends and family in New York City, a variety
22 of other things, do you have any questions about work
23 authorization, do you need help there, asylum status,
24 things like that so we take all of that together and
25 then we formulate that into how many barriers you

1 have to be able to take the next step forward in your
2 journey, and the case manager that's going to be
3 assigned to you will work with you, having two
4 touchpoints each month, check in about where you are
5 surmounting your barriers with our help so it's a
6 comprehensive overall assessment that we've now done
7 for approximately 90 percent, 90 percent, of all
8 asylum-seekers in any part of our...

10 CO-CHAIRPERSON BREWER: In the H and H
11 system, okay.

12 DR. LONG: No, no. Across the entire
13 system including DHS.

14 CO-CHAIRPERSON BREWER: All right. So 90
15 percent have had this kind of case management. Do
16 they also get asked about English as a second
17 language, do they get asked about OSHA? That's what
18 they're interested in. Is that also part of the
19 discussion?

20 DR. LONG: Let me clarify. The 90 percent
21 is those that have completed the assessment survey,
22 which has all of these questions, and then based on
23 the survey results for each individual, we're going
24 to say you have Red, multiple barriers to you being
25 able to take the next step forward, Yellow, medium

1 number of barriers, Green, lower number of barriers
2 so that we could help you more quickly for yourself
3 as an individual or household with children to be
4 able to take your next step forward which would
5 involve leaving our system, but each asylum-seeking
6 family, household, individual, needs something
7 different. That is incredibly true at this point in
8 this crisis so case management will be using the data
9 which we have for currently 90 percent to then have
10 those two touchpoints per month going forward.

11
12 CO-CHAIRPERSON BREWER: That's done by
13 DocGo at your facilities?

14 DR. LONG: Right now, we're drawing case
15 managers from DocGo and MedRite, but going forward we
16 have an RFP that's live today. It's available for
17 people to apply to that's seeking to find hopefully..

18 CO-CHAIRPERSON BREWER: Another agency
19 that's not for-profit and looking for more money.

20 DR. LONG: An organization that has a
21 tremendous amount of immigration experience that can
22 help us...

23 CO-CHAIRPERSON BREWER: Yeah, we'll find
24 somebody else.

25 DR. LONG: We'd love your help with that.

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CO-CHAIRPERSON BREWER: Just going back to these buses again, just quickly, so the buses that take children to school we have great respect for, but how in the world are you going to get somebody, picking up on Council Member Ayala's question, who is no longer at location X but gets moved to another borough or how in the world are those kids going to get to school? To me, that's the most important issue.

DIRECTOR SCHAEFFER: As the Mayor repeatedly said...

CO-CHAIRPERSON BREWER: I know, but I don't believe him.

DIRECTOR SCHAEFFER: Well, we're working every day with the Department of Education to make sure and, again, we'll know closer to the end of the 60 days which families are not leaving and which ones are and be able to make the best operational choices...

CO-CHAIRPERSON BREWER: I'm just saying, I'll let you go, but I'm just letting you know the worst thing you could do is take those kids out of school, the worst thing you can do, and I don't think that it would make any sense to do it. Those buses

1 aren't arriving on time for kids who live in New York
2 City.
3

4 The other question I have is the
5 Administration has allocated lots of dollars, as we
6 know, so how does the Administration decide which
7 contracts are awarded to which agencies? I mean I
8 think we've talked about this a little bit, but there
9 are, as we heard earlier, 16 agencies that are
10 involved, or 13 agencies Council Member mentioned
11 earlier, so how do you decide which contracts are
12 awarded to which agency? Is that up to you, Molly, or
13 how do you decide that?

14 DIRECTOR SCHAEFFER: This ecosystem is
15 incredibly complex and keeps pivoting as this crisis
16 pivots. As we've said, we've sheltered more than
17 130,000 people, and so that has meant that certain
18 agencies have had more or less capacity. As
19 Commissioner Iscol mentioned before, that also means
20 that we really are leaning on core competencies at
21 different agencies at different times to make sure
22 that we're focusing contracts to the agency that is
23 best equipped to hold it, and so our office does have
24 a lot of say over the contracts that are given as
25

1 well as just each of these agencies as well as MOCS
2 and some of our other oversight entities.

3
4 COMMISSIONER ISCOL: The only thing I'd
5 add to that is we are more often than not leveraging
6 existing contracts so it's not about what agency is
7 going to hold a new contract but what agency might
8 hold an existing contract that we can leverage for
9 these services.

10 CO-CHAIRPERSON BREWER: How do you make
11 sure there's no overlap and how do you do the audit
12 to see whether it's an efficient way of spending
13 across agencies? How do you make sure there isn't an
14 overlap and how do you make sure that it's efficient
15 across agencies? Is that Molly's job? I don't know.

16 DEPUTY DIRECTOR GREENBERG: I'll speak
17 from OMB's perspective. There's a regular process
18 with our agency looking at expenditures that are
19 coming up, things that are changing on the RFP issue
20 that's come up, we are very much involved in that so
21 we can have a voice about looking at more
22 efficiencies so it's really across the board. I'd say
23 also that the auditing functions are embedded in each
24 agency. They have their own. Also, DOI was awarded
25 some funding in the previous budget so they can do

1
2 their own. What we're trying to do is audit, you
3 know, happens on the back end a lot of time, and so
4 what we're looking at, especially in OASO, is to
5 build out the function so that's happening more
6 proactively at the beginning, and we're going to see
7 more of that as that Office is built out.

8 CO-CHAIRPERSON BREWER: Okay. As you know,
9 this came up somewhat earlier, there are contracts
10 for similar services with pricing that varies
11 significantly. For instance, an H and H contract with
12 Mulligan, the fire guard position, and those fire
13 guards just sit there. I met them. I guess if you
14 don't have a sprinkler then you need a fire guard. I
15 got it. I don't know why you don't put the sprinklers
16 in in my opinion, but, okay, so you got the fire
17 guard position, costs \$46.20 an hour, more than
18 double the \$21.04 cents per hour rate for the same
19 position at DHS' contract with FJC. Why is there such
20 a large cost difference? Why is the fire guard
21 position hourly rate even higher, \$117.25 in HPD's
22 contract with Garner? It's very hard to understand
23 this from the public's perspective. Who wants to
24 start?

1
2 DR. LONG: I'm happy to start. With fire
3 guards and security, just to talk about from the H
4 and H point-of-view, the first thing that we did was
5 we looked across the H and H system and saw if we had
6 any relevant contracts for providing the services
7 that we needed at our humanitarian centers. We had
8 Arrow, which is, again, the vendor that..

9 CO-CHAIRPERSON BREWER: My favorite
10 vendor.

11 DR. LONG: Was competitively chosen
12 through an RFP process, that is the current security
13 vendor as you well know at our H and H hospital and
14 clinic sites. We built off of that existing procured
15 contract to start with security and things like fire
16 guards. Then going forward, Arrow did not have the
17 capacity to keep up with the emergency speed alone
18 that we needed given the speed we are opening new
19 sites at. That's why we brought on Mulligan with an
20 emergency contract so that we could keep up with the
21 speed that we needed to ensure that no families were
22 sleeping outside. Going forward though, and this is
23 again going back to Speaker Adams', one of her
24 central points, is that the way that we're ensuring
25 that we have competitive pricing and the way that

1
2 we're transitioning from emergency spending to long-
3 term planning is through the RFP process that we've
4 already initiated, and actually the security RFP that
5 we put out is closed and we're making selections that
6 will be brought to the Health and Hospitals board
7 shortly.

8 CO-CHAIRPERSON BREWER: Okay. HPD is 117
9 dollars an hour.

10 DEPUTY COMMISSIONER SARKISSIAN: For HPD,
11 we went back to Garner a couple months ago, as Molly
12 Schaeffer said, the instructions are really clear to
13 all the agencies to see where we can save costs so we
14 went back to Garner a couple months ago to see if we
15 could save costs on security guards and fire guards,
16 and so what we've done is we've brought down the cost
17 of security guards and fire guards down from 117 to
18 78 dollars per hour for the vast majority of folks
19 doing that work at the Jefferson. What we've done is
20 we've combined the roles as much as possible. We are
21 finding security guards who actually credited and
22 trained to be fire guards as well so we're combining
23 and consolidating those roles too.

24

25

1
2 CO-CHAIRPERSON BREWER: Okay, but
3 meanwhile for a year or something, it was 117. Was
4 that an RFP contract for Garner?

5 DEPUTY COMMISSIONER SARKISSIAN: That was
6 the original contract that we executed with Garner.

7 CO-CHAIRPERSON BREWER: That was based on
8 an RFP or that was an emergency?

9 DEPUTY COMMISSIONER SARKISSIAN: That was
10 an emergency procurement.

11 CO-CHAIRPERSON BREWER: I would guess.

12 DEPUTY COMMISSIONER SARKISSIAN: What we
13 did for that one too is we brought in four or five
14 other entities and we did a kind of quick here's the
15 scope of services, come back with your best and
16 final, we have to get this done in a week because we
17 had to stand it up very quickly, so as much
18 competition as we can practically add, we add to the
19 process.

20 CO-CHAIRPERSON BREWER: Okay, but now we
21 have 46, 21, and 78, so there's still a difference in
22 the numbers. Everything will go to RFP as time goes
23 on. Obviously, the Arrow contract at H and H is now,
24 but is that something that u pay attention to, Molly
25 Schaeffer, to try to get these numbers down?

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DEPUTY COMMISSIONER SARKISSIAN: Can I

just add one thing before Molly answers that
question?

CO-CHAIRPERSON BREWER: Those are big
numbers. Have you ever met some of these people? Go
ahead.

DEPUTY COMMISSIONER SARKISSIAN: Just on
the security contract, we actually have moved to a
requirements contract that Garner already has
citywide, and that was competitively procured.

CO-CHAIRPERSON BREWER: They need more
management. It's not the individual. They need
management. If you ask the Parks Department, they'll
tell you the same thing. Just FYI.

Do you want to answer that, Molly
Schaeffer, about who's paying attention to these
contracts? These folks need a lot of management. It's
hard, I know, but ask the Parks Department. They're
complaining to me about the security.

DIRECTOR SCHAEFFER: I think I mentioned
before we're really at an inflection point. We're 18
months in. We really have an opportunity now to
relook at our costs, relook at what we're paying in
different parts of the system and really try to

1 standardize what's happening, and that's exactly what
2 we're doing and that's why, as David Greenberg
3 mentioned, we're also hiring folks in my office to be
4 able to do some of that audit function as well as
5 working with DOI and other entities within the city
6 that are looking pretty closely at our contracts.
7

8 CO-CHAIRPERSON BREWER: Okay. In the
9 hourly rates for registered nurses between two H and
10 H contracts, 80 dollars with MedRite and 150 with
11 DocGo, how did I guess, so why is there a difference
12 there?

13 DR. LONG: Again, the difference between
14 these different costs will be rectified when we go
15 through the RFP process, which, again, is the gold
16 standard and best way to ensure we're having
17 standardized and most competitive prices. The way
18 that we set up the cost so far was, again, based on
19 our prior experience so DocGo had had experience
20 through an RFP-selected street health outreach and
21 wellness program, MedRite had had experience through
22 an infectious disease RFP, which is something we used
23 during COVID times, so when we had to move at
24 emergency speed, we utilized the experience that we
25 had with prior things that were selected through the

1 RFP process for similar services, but, going forward,
2 again, the most important thing ultimately, as you
3 know, is that we've already put out four RFPs and we
4 plan to put out RFPs for every service to ensure that
5 everything is standardized and priced competitive.
6

7 CO-CHAIRPERSON BREWER: Does MedRite also
8 going to also be out for an RFP? Is that the whole
9 idea?

10 DR. LONG: Every service we have will be
11 put out for RFP?

12 CO-CHAIRPERSON BREWER: At the same time?
13 In other words, they're all up now?

14 DR. LONG: We're sequencing it service by
15 service so if you imagine the humanitarian center,
16 there's security, food, laundry, frontline staff,
17 hotel management, everything like that, and we've put
18 out four RFPs so far, and there will be more to come.

19 CO-CHAIRPERSON BREWER: Physicians
20 Assistants, two H and H contracts, no surprise, 150
21 an hour with MedRite and, guess what, 225 an hour
22 with DocGo.

23 The same thing with SLSCO and Garner,
24 SLSCO is 100 dollars and 117 respectively for
25 security guards when other companies are paying 20

1 and 40 dollars an hour. Now, I assume that's
2 something that, Molly, you're looking at in addition
3 because this would be across the agencies.
4

5 COMMISSIONER ISCOL: SLS has already
6 sunsetted that contract...

7 CO-CHAIRPERSON BREWER: Okay, so it's
8 gone.

9 COMMISSIONER ISCOL: (INAUDIBLE) out to
10 RFP. I also just think it's important, I think some
11 of the contracts that you're talking about, I think
12 it is important to note many of them were put out for
13 RFP but for different purposes that were then
14 repurposed for this emergency, and so now we are
15 going back and looking at where we can be more
16 efficient or cost-effective through new RFPs that are
17 specific to the asylum-seeker crisis, but almost all
18 of the contracts that you have mentioned were put out
19 to RFP but for different purposes, for example, some
20 of the examples that Dr. Long gave earlier in the
21 hearing.

22 CO-CHAIRPERSON BREWER: Okay. I'm just
23 going to keep mentioning though because I think the
24 public is concerned about the fact that this is
25 costing, and they want to understand it so they can

1
2 now understand that it was an emergency situation and
3 now we're doing RFPs, but we did spend a lot of money
4 during this emergency. I don't know if we got our
5 money's worth. Go ahead.

6 COMMISSIONER ISCOL: What I'm just trying
7 to make sure we understand is that these are not, the
8 contracts you're talking about are not emergency
9 contracts. Many of them were competitively bid..

10 CO-CHAIRPERSON BREWER: Left over from
11 COVID.

12 COMMISSIONER ISCOL: Not even left over
13 from COVID. A lot of them were citywide requirement
14 contracts that were competitively bid that went
15 through an RFP process previously, but now we're
16 looking at, at this stage of the game where we can
17 find greater cost savings because we share your
18 concern and the public's concern.

19 CO-CHAIRPERSON BREWER: Okay. Keep going
20 on this topic though in terms of food. Why does H and
21 H contract with LIC COM charge significantly more for
22 meals compared to other contracts. Specifically, why
23 is breakfast 5 dollars with LIC COM contracted with H
24 and H when the average for other DHS contracts is
25 \$3.06. Additionally, why is lunch \$7.50 compared to

1 an average of \$4.11 and dinner \$12.50 compared to an
2 average of \$4.37. On the food generally, can you
3 explain what you're doing to make it both nutritious
4 and appropriate, I know that's a challenge, and at
5 the same time cost-effective?
6

7 COMMISSIONER PARK: On the DHS side, food
8 is provided in a variety of different ways. The
9 agency itself holds some centralized contracts for
10 food. Those are used at our DHS-run non-asylum sites.
11 We have also been tapping into them for asylum sites
12 that have a provider attached to them but where the
13 provider isn't yet ready to stand up a contract. For
14 the sites where food is provided by the provider, in
15 some cases that is they subcontract for a food vendor
16 and in other cases they have an internal
17 infrastructure where they can prepare their own food.
18 Because many of our providers are operating both non-
19 asylum and asylum contract sites, they will have a
20 single subcontract for food and cost-allocate
21 appropriately so there's a variety of different
22 methodologies. The numbers that you cited are very
23 aggregate. We are always looking to make sure that we
24 are both maintaining the City's food standards but
25 also providing cost-effective services. All of our

1 subcontracting is going through the City's 65-A
2 process where we are looking to make sure that they
3 have done bids and that they are picking an
4 appropriate subcontract vendor.
5

6 DR. LONG: I'll just add a couple of
7 points. The numbers you gave, I believe are the
8 current numbers we're spending on food at our
9 humanitarian centers are lower because we've had a
10 concerted effort to provide nutritious food, all of
11 which adheres to the New York City guidance and all
12 of which is halal and we make food available for
13 anybody that's diabetic, has other dietary
14 requirements, everything like that, but we've made a
15 concerted effort to also focus on food waste to make
16 sure that we're wasting the minimum amount of food.
17 When Speaker Adams joined me at a tour of our hotel
18 site at the Crown next to JFK, my staff excitedly
19 told her that they'd reduced food waste by 87 percent
20 at that site according to my staff, and so just
21 making the point that it's been at the forefront of
22 our minds and that we've been trying to symmetrically
23 drive down any food wastage that contributes to
24 lowering cost while also maintaining nutritious and I
25 would say culturally appropriate options for all

1
2 guests coming from every part of the world to New
3 York City.

4 CO-CHAIRPERSON BREWER: Can you explain,
5 HPD, the DocGo budget is 11 dollars for each meal
6 which is a higher rate than the vendor's contract
7 with both Health and Hospitals and DHS so can you
8 explain that?

9 DEPUTY COMMISSIONER SARKISSIAN: The 33
10 dollars is a max. We've actually worked with DocGo
11 and, as Molly Schaeffer said, we're getting better as
12 we're moving forward and kind of learning the ropes
13 here. We've worked with DocGo to bring that down to
14 under 17 for all of our downstate facilities per
15 person per day.

16 CO-CHAIRPERSON BREWER: Okay. It was more
17 before? I have 11 dollars for each meal so that
18 would've been 33 dollars.

19 DEPUTY COMMISSIONER SARKISSIAN: Yeah, it
20 was 33 before. That was the max.

21 CO-CHAIRPERSON BREWER: Now down to 17?

22 DEPUTY COMMISSIONER SARKISSIAN: Yeah, now
23 it's 17.

24 CO-CHAIRPERSON BREWER: When you say that
25 H and H is re-upping their contracts, DocGo might get

1 it, DocGo might not get it, but are you doing the
2 same thing? I'm trying to figure out with all these
3 contracts, one agency might be doing an RFP, are the
4 other ones doing RFPs also?

5
6 DEPUTY COMMISSIONER SARKISSIAN: For the
7 contracts we have that are coming up to term that
8 we're going to extend, we are thinking a couple steps
9 ahead, like the Speaker said, trying to plan and
10 issue competitive RFPs to secure additional services.

11 CO-CHAIRPERSON BREWER: So you are doing
12 that for everything?

13 DEPUTY COMMISSIONER SARKISSIAN: We'll
14 still need to make a decision on the future of the
15 upstate program.

16 CO-CHAIRPERSON BREWER: Okay. Laundry. Why
17 does HPD's contract with Garner pay 3 dollars a pound
18 for laundry while the contract with DocGo, in this
19 case lower surprisingly, \$1.50 per pound?

20 DEPUTY COMMISSIONER SARKISSIAN: It's a
21 very similar answer. Three dollars is the max.
22 Actually, laundry in the Garner contract is a pass-
23 through cost so we've actually seen invoices and so
24 on average right now we're at 2 dollars a pound that
25 Garner is billing the City for.

1
2 CO-CHAIRPERSON BREWER: Okay, but it was 3
3 dollars?

4 DEPUTY COMMISSIONER SARKISSIAN: Three
5 dollars is the max in the contract.

6 CO-CHAIRPERSON BREWER: All right. Why are
7 there at H and H different contracts for laundry?
8 Sodexo is at 91 cents a pound and Happy Nest is \$1.59
9 a pound?

10 DR. LONG: When we first started providing
11 laundry services, similar to what we did with
12 security, is we looked across the H and H system and,
13 of course, we do laundry in our hospitals, and we had
14 a contract that was competitively procured through an
15 RFP, Sodexo. We leveraged the terms from the Sodexo
16 arrangement to set up laundry services at our sites,
17 but, as our sites began to expand, Sodexo ran up
18 against their own capacity so we had to bring on
19 another vendor, Happy Nest, to provide services so
20 that we could extend those services to all guests,
21 but laundry is one of the four RFPs that we're going
22 through the process for right now.

23 CO-CHAIRPERSON BREWER: Okay. Just in
24 general, the SROs don't have laundry and hotels I
25 assume do, I don't know, but I'm just letting you

1 know the laundry is often in the bathtub with
2 sometimes problems with the drainage because there
3 isn't good laundry service. I'm not saying in the
4 hotels there is an issue, but the SROs, it is an
5 issue, and I won't even get into the schools. We're
6 doing a survey of all Manhattan schools, do you have
7 laundry, do you not have laundry, every single school
8 needs a laundry in the City of New York. I know this
9 is not your, but it might be Molly's job. We need
10 laundries in the schools.
11

12 Finally, OMB Department of
13 Investigations, the adopted plan includes, as you
14 know, 4.6 million in 2024 and 2.5 million in 2025 for
15 expenses related to the asylum crisis in the
16 Department of Investigations' budget. We understand
17 that this funding is for procurement for an
18 independent monitor to provide oversight of the
19 spending related to this crisis. Why has the
20 Administration decided to work with an independent
21 monitor and what's the goal?

22 DEPUTY DIRECTOR GREENBERG: Thank you for
23 that question. Actually, DOI reached out to us and
24 requested this, and we agreed with them and funded it
25 in the budget.

1
2 CO-CHAIRPERSON BREWER: Okay, and what's
3 the scope of the monitorship, for how long and has
4 somebody been selected, can you be more specific?

5 DEPUTY DIRECTOR GREENBERG: I don't have
6 all the details, but I am going to circle back to you
7 with the scope and all of the updates from DOI.

8 CO-CHAIRPERSON BREWER: Okay. Will the
9 review include all (INAUDIBLE) We obviously have
10 what, 13, 16 agencies, will all of those agencies be
11 under this monitorship and, if not, why? Do you know
12 that or that just DOI's purview?

13 DEPUTY DIRECTOR GREENBERG: Yeah, it's
14 going to be from DOI..

15 CO-CHAIRPERSON BREWER: Sometimes you tell
16 DOI what to do.

17 DEPUTY DIRECTOR GREENBERG: They have a
18 plan and they've submitted it to us, and I will get
19 all those details to you.

20 CO-CHAIRPERSON BREWER: Okay, and will the
21 review include site visits? I guess what you're going
22 to tell me that's also up to DOI.

23 DEPUTY DIRECTOR GREENBERG: Yes.
24
25

1
2 CO-CHAIRPERSON BREWER: How'd I guess? All
3 right. Thank you very much. Now, we want to hear from
4 I think the Committee, but it's up to you, sir.

5 CO-CHAIRPERSON BRANNAN: Thank you, Chair
6 Brewer.

7 I just have one other question before we
8 turn over to my Colleagues. I remember the Biden
9 administration saying they were going to lend us some
10 folks to help with paperwork? How did that go, how
11 long did it last, is it still going, how much got
12 done?

13 DIRECTOR SCHAEFFER: Thanks for that
14 question. We had the Federal Work Authorization
15 Clinic, which was a really amazing model between the
16 State, City, and non-profits, and the Federal
17 Government. They came in and they helped with
18 paperwork for two weeks. We were able to deal with
19 1,700 work authorization applications, which was
20 really important for us. They are going to be coming
21 back in the coming weeks for a little while so we're
22 constantly in communication about the best kind of
23 support they can give us related to TPS and work
24 authorization.

1
2 CO-CHAIRPERSON BRANNAN: Set up in advance
3 how long they were going to stay, two weeks doesn't
4 sound like a lot of time?

5 DIRECTOR SCHAEFFER: Yes. They originally
6 gave us two weeks, and it was set up in advance..

7 CO-CHAIRPERSON BRANNAN: How many people
8 did they send?

9 DIRECTOR SCHAEFFER: I'll have to get back
10 to you on those exact numbers. They did send a lot of
11 folks to focus on the biometrics portion so taking
12 people's fingerprints and to adjudicate fee waivers
13 right there on site which is sometimes an extra step
14 when you're doing your work authorization paperwork.

15 CO-CHAIRPERSON BRANNAN: Okay. Chair
16 Brewer.

17 CO-CHAIRPERSON BREWER: Houses of worship,
18 50 contracted, two exist. Can you describe to me what
19 we're doing about the houses of worship? Are you in
20 charge of those too?

21 DEPUTY COMMISSIONER SARKISSIAN: I am in
22 charge of those too, Gale.

23 CO-CHAIRPERSON BREWER: Okay (INAUDIBLE)

24 DEPUTY COMMISSIONER SARKISSIAN: Yeah, we
25 have all the fun ones.

1
2 We're actually working with a couple more
3 that we have on deck. As I know you know, there are
4 difficulties getting them safe and prepared, but what
5 we can do is maybe we could schedule a briefing for
6 you because I know you're very interested.

7 CO-CHAIRPERSON BREWER: I'm very
8 interested. I can tell you, you have to have either
9 exits or sprinklers, you don't need both, and you
10 can't have whatever, 90, 30, I don't know crazy
11 number, 10 people here, 30, you can't do those big
12 numbers. You have to change your...

13 DEPUTY COMMISSIONER SARKISSIAN: No, I
14 think we're targeting 19 people per facility.

15 CO-CHAIRPERSON BREWER: Too many. Some of
16 them can't do that. They can do 10.

17 DEPUTY COMMISSIONER SARKISSIAN: Okay, I
18 mean...

19 CO-CHAIRPERSON BREWER: You have to change
20 your model in order to get people in them.

21 DEPUTY COMMISSIONER SARKISSIAN: Yeah, I
22 mean we're working with FDNY and DOB to do it safely
23 so I think that's maybe something you and I can talk
24 about.

1
2 CO-CHAIRPERSON BREWER: All right, thank
3 you, but two so far out of the 50, correct?

4 DEPUTY COMMISSIONER SARKISSIAN: Two so
5 far out of the 50.

6 CO-CHAIRPERSON BREWER: Not a good number.

7 DEPUTY COMMISSIONER SARKISSIAN: Not a
8 good number.

9 CO-CHAIRPERSON BREWER: Thank you.

10 DEPUTY COMMISSIONER SARKISSIAN: We're
11 working to make them safe, Gale.

12 CO-CHAIRPERSON BRANNAN: Speaker Adams.

13 SPEAKER ADAMS: I don't know if I missed
14 this in former hearings or not. Along the same lines
15 of what Chair Brewer just asked with the houses of
16 worship, how many houses of worship are right now
17 online working with us with asylum-seekers?

18 DEPUTY COMMISSIONER SARKISSIAN: Our
19 program is just to provide shelter, right, so we have
20 50 that we're working with right now. We have a
21 couple that are online. We have a couple on deck.
22 Houses of worship have worked with, you know, us in
23 all sorts of manners in terms of like partnering up
24 with shelters, providing support, working with

25

1 asylum-seekers. Pastor Monroe is probably the best
2 person to talk to about our efforts there.
3

4 SPEAKER ADAMS: As far as the fees and
5 all-inclusive as far as the policies for the City and
6 funding, what does that look like per person, is
7 there a per-diem involved? What does that look like
8 compared to the overall picture of sheltering?

9 DEPUTY COMMISSIONER SARKISSIAN: They're
10 just one tool we have. We have many different tools
11 so it's not just houses of worship, it's not just
12 hotels, it's not just HERRCs, it's not just DHS
13 facilities. They're part of the entire suite of tools
14 so we don't necessarily think it's helpful to talk
15 about what apples and oranges, costs, because they're
16 apples and oranges, and I think at certain times
17 we're trying to bring different parts of the city
18 into kind of like our ecosystem of capacity to help
19 our asylum-seekers out.

20 SPEAKER ADAMS: Yeah, I understood that
21 there are many pieces of the pie as far as sheltering
22 is concerned for the City, always has been, but she
23 opened a can of worms that my mind wasn't really
24 going to so I just became very curious about the
25 numbers involved. Given the fact that houses of

1
2 worship are part of the whole ecosystem that we're
3 talking about so their numbers and all of their
4 aggregate filters would be a part of that ecosystem
5 and not necessarily have a breakout?

6 DEPUTY COMMISSIONER SARKISSIAN: Yeah,
7 it's part of that ecosystem so it's a very specific
8 service they're providing. What they're doing is
9 they're making some of their space available. We set
10 up cots, they go there for the in, and then they go
11 somewhere else during the day to get services so it's
12 a very different part of the ecosystem, but, whoever
13 has capacity, we're trying to bring that capacity
14 into the ecosystem in a way that makes sense for
15 them, for houses of worship in particular.

16 SPEAKER ADAMS: Okay, thank you.

17 CO-CHAIRPERSON BRANNAN: Okay, we have
18 questions from Council Member Brooks-Powers followed
19 by Williams.

20 COUNCIL MEMBER BROOKS-POWERS: Thank you,
21 Chairs, and thank you for today's testimony.

22 A few questions. I think I'm going to ask
23 them all because I want the answers to them and then
24 if you need me to repeat, I can.

1
2 Is the Administration keeping track of
3 spending of resources on the crisis broken down by
4 District? For example, can you provide a breakdown of
5 how much the Administration has spent in District 31
6 in Fiscal 2024?

7 When a new shelter is constructed or its
8 population changes or is increased, how does the
9 Administration ensure that the services surrounding
10 the shelter are supporting this? For example, when a
11 shelter changes over from a single adult shelter to
12 one for families, does the Administration commit
13 additional funding to nearby schools?

14 How is the Administration ensuring
15 resources are available across languages and properly
16 reflecting the diversity of asylum-seekers coming to
17 New York City?

18 Could the Administration provide an
19 update on its recent efforts to obtain additional
20 funding from the federal government to support the
21 City as it deals with this crisis?

22 Lastly, last week, the Mayor announced a
23 new 60-day limit on how long a family can stay at one
24 shelter. How does the Administration expect this to
25 impact the overall cost projections in the coming

1
2 Fiscal Year and does the Administration have any
3 concerns that this could lead to families staying in
4 the shelter system for longer by not providing enough
5 time to find permanent housing?

6 DEPUTY DIRECTOR GREENBERG: Thank you,
7 Council Member. I'll start addressing the funding
8 from the feds. So far, the City has been awarded
9 145.4 million through what's called the Emergency
10 Food and Shelter program. Of that funding, we have
11 received 38.5 million, but we anticipate to receive
12 an additional 107. We are continuing to strongly
13 advocate to Congress and the Biden Administration for
14 additional funding, and we appreciate the Council's
15 advocacy and partnership as we do that.

16 The other question you had was on
17 spending and how do we categorize that, so we break
18 it out by agency and by service type, and so, just to
19 give you an example of service types, we capture the
20 rent cost, the housing cost separately from the
21 services separately from the food separately from the
22 medical. This is very much aligned with how the State
23 wants us to submit our expenses in order to draw down
24 the billion-dollar appropriation that was in the last
25 enacted budget from the State. As it relates to

1 language services, I'll hand it over to one of my
2 colleagues to elaborate on what we're doing.

3
4 COUNCIL MEMBER BROOKS-POWERS: Before you
5 pass on that part, in terms of the different
6 categories, within those categories, are they broken
7 down by District?

8 DEPUTY DIRECTOR GREENBERG: We aren't able
9 to break down spending at the District level. What we
10 do is sum it all up by those service categories in
11 order to inform the universal per-diem for what we're
12 spending on the entirety of the asylum operation.

13 COUNCIL MEMBER BROOKS-POWERS: Why are you
14 unable to break it down by District?

15 DEPUTY DIRECTOR GREENBERG: The thing is
16 when you look at spending, spending happens in
17 multiple ways. You spend directly on staff, you spend
18 directly on contracts, you also spend directly on
19 contracts within subcontracts to somebody else, and
20 so what we at OMB especially, when we're looking at
21 spending, we're looking at really the scope of the
22 services and for a more macro view of how that money
23 is going to go generally. That level of detail of
24 exactly what site is going to get the dollar is
25 something that we don't really have very much

1
2 visibility into because of all those layers of
3 subcontracting that happens that make the whole
4 picture very diffuse.

5 COUNCIL MEMBER BROOKS-POWERS: I think
6 it's necessary because in Districts like mine that's
7 saturated with shelters historically, if you have a
8 shelter there that's not really getting as much money
9 as a community that may have one or two shelters and
10 thinking about the global impact on that District is
11 important, but we can't be able to truly understand
12 what that looks like without a more granular take on
13 how the agency is spending.

14 DEPUTY DIRECTOR GREENBERG: Always happy
15 to take a look at how we can break this down in
16 another way to address your question, definitely.

17 DR. LONG: I could take the next question
18 about language. For language, we use the same at our
19 humanitarian centers the same Language Line that we
20 use in my primary care practice in the South Bronx
21 and at the New York City Health and Hospitals system.
22 I believe it's over 250 languages and dialects are
23 interpreted, and the way it works is you can do it by
24 phone or even iPad where you select the language of
25 choice and then an interpreter will come on and be

1 able to interpret for you. We have a substantial
2 number of languages and dialects that we can
3 interpret for.
4

5 Any more questions on language before I
6 turn to Molly about the services around shelters?

7 COUNCIL MEMBER BROOKS-POWERS: No.

8 COMMISSIONER PARK: I can add on as well
9 on language while we also use Language Line, we have
10 invested in additional interpretation contracts so
11 that we do have on-site interpretation in some sites.
12 It's not something we are doing 24/7 on every site
13 just given the scope and scale, but it is something
14 that we have invested in significantly.

15 As you note, we have moved some shelters
16 from single adults to families with children. We
17 coordinate very closely with the Department of
18 Education on making sure that we are connecting
19 students who are placed there with schools. DOE has
20 been a really valuable thought partner in thinking
21 about how they are supporting the schools that have
22 asylum-seekers but happy to follow up offline with
23 particular challenges there if there are any.

24 COUNCIL MEMBER BROOKS-POWERS: To that
25 point, Commissioner, because recently I've been

1 getting a lot of communication from your office in
2 particular in terms of my shelters turning from all-
3 men shelter into families with children, which is
4 fine. The challenge that I'm having is understanding
5 what resources become associated with it because you
6 may have a shelter that has 59 units so that's 59
7 individual men I'm assuming, but then now it becomes
8 families with children so in each one of those units,
9 it's no less than two people in that unit so is the
10 agency then upping the amount for that provider in
11 terms of the resources that they are seeing and then
12 in terms of the surrounding community. Now, you have
13 kids going into the schools. They may need tutoring
14 or other activities. What do those resources look
15 like?
16

17 COMMISSIONER PARK: Thank you for the
18 clarification on the question. I understand it better
19 now. The occupancy is typically actually going to be
20 relatively similar so when the site was being used
21 for single adults, and I'm speaking generally, I'm
22 sure there are specific exceptions, and we can follow
23 up, but in general our single adults, the hotels that
24 were used for single adults were double occupancy,
25 and so when we're putting in a family, we'd generally

1
2 go with the smaller families in those hotel rooms
3 because that's who can fit so maybe you'd get a baby
4 in addition to the parents, something like that, but
5 it's not going to be significantly increasing the
6 actual number of people on the site, but we do make
7 adjustments to budgets. We're going to be adding
8 resources for formula, for diapers, for milk, things
9 like that that obviously wouldn't be provided in a
10 single adult shelter to the extent that we need to
11 make adjustments on the staffing, both in absolute
12 number of people and the specific titles. We will
13 work with the provider on budget adjustments. In
14 coordination with the schools, as I say, we're doing
15 that via the DOE. They have been a terrific partner.
16 It is very much site-by-site and case-by-case because
17 some schools have capacity and some schools are going
18 to need resources added in order to be able to do
19 that, but happy to follow up offline with any
20 particular issues.

21 COUNCIL MEMBER BROOKS-POWERS: Have you
22 found that there's been a need for additional
23 resources in the schools when you add more families
24 there and, if so, has an agency been able to provide
25

1
2 additional funds or is that solely resting on DOE to
3 provide extra resources?

4 COMMISSIONER PARK: DHS, DSS doesn't
5 directly fund the schools so all of that would go
6 through the Department of Education so I will defer
7 to them on details. In general, this has certainly
8 been a few years with a lot of change in school
9 demographics so there are some schools that have the
10 capacity to absorb more families without a
11 significant change to their budget. In other cases,
12 that's not the case, but I would say DOE has been a
13 really thoughtful partner in working with us and I
14 believe making sure that schools are getting access
15 to additional resources, but I would defer to my
16 colleagues at DOE to talk about the specifics.

17 COUNCIL MEMBER BROOKS-POWERS: Is anyone
18 here from City Hall today?

19 DIRECTOR SCHAEFFER: Yes, Molly Schaeffer,
20 Interim Director of Office of Asylum-Seeker
21 Operations.

22 COUNCIL MEMBER BROOKS-POWERS: Are you
23 able to answer the question or can you commit to
24 getting us the answer?

1
2 DIRECTOR SCHAEFFER: We'll circle back
3 with the answer. As Molly Park mentioned, we defer to
4 our colleagues at the Department of Education, but we
5 do work in close coordination to make sure they have
6 the resources to meet this population where they are.

7 COUNCIL MEMBER BROOKS-POWERS: Yeah, I'd
8 like to have that followup because I recently had a
9 meeting with the principals in my District in terms
10 of what they're seeing. Some of it is more specific
11 to DOE, but, again, just wanting to understand, yes,
12 a school may have more capacity in terms of
13 individual students but they may not have capacity in
14 their budget for language translation and other
15 services that are needed like immunizations that they
16 have to get and navigating the system in that way.
17 Those are some of the things that have been shared
18 with me through the principals at my school.

19 DIRECTOR SCHAEFFER: We're happy to circle
20 back and, if you give us specific schools, we're also
21 happy to circle with those schools.

22 COUNCIL MEMBER BROOKS-POWERS: Last
23 question was about the 60-day limit.

24 DIRECTOR SCHAEFFER: Thank you for that.
25 As mentioned before, we're pairing 60 days with

1
2 intensive case management to really meet families
3 where they are and try to help them make their exit
4 strategy and their plan with them. I don't know if,
5 Dr. Long, you have anything else to say about that?

6 DR. LONG: No. I think from the point-of-
7 view of case management, that is something that is
8 going to be our focus, both for when we do any
9 notices but also moving forward with the assessment
10 survey that I was referencing. Our case management
11 program is going to officially launch, if you will,
12 in the coming weeks, and that's going to be, again,
13 our glue to connect people with whatever they need to
14 complete their journeys, whether that's reticketing,
15 resettlements, authorized for work, different
16 trainings as Council Member Brewer was mentioned,
17 OSHA training, learning to speak English, whatever
18 your needs are, our goal is to help you meet those
19 needs, and case management is the mechanism to
20 connect you with the services that you need.

21 COUNCIL MEMBER BROOKS-POWERS: That's
22 interesting to hear in terms of the case work that's
23 being done around this. I'm curious, I know this is
24 focused on asylum-seekers, but the traditional
25 shelter occupants, I have constituents who have been

1
2 in shelters for two years with CityFHEPS vouchers and
3 have not been placed, and so there is a need also for
4 that case support for those who are trying to get
5 permanent housing as well.

6 COMMISSIONER PARK: Thank you, Council
7 Member. CityFHEPS and connecting people to permanent
8 housing is something that I think about all day long.
9 CityFHEPS is an incredibly valuable tool, but we're
10 also trying to use those vouchers in a really supply-
11 constrained environment so it's really challenging.
12 We move about 200, 215 households a week out of
13 shelter into subsidized housing. CityFHEPS is the
14 biggest piece of it, although not the only piece of
15 it, but there are more households behind them with
16 vouchers struggling to use them. One of things that
17 I'm trying to push is thinking about ways that we can
18 use social service dollars to actually develop some
19 additional housing because as much as I love and
20 value the work that my colleagues at HPD do to
21 develop more affordable housing, the need is so
22 great, so we're looking at ways that we can expand
23 options for use for CityFHEPS. One of the things
24 actually that we did just a couple of weeks that I
25 think is potentially really exciting is change

1 CityFHEPS so that you can now use that voucher
2 anywhere in the state of New York. We think that has
3 the potential to create more housing opportunities
4 for people, but, yes, absolutely, people need
5 assistance to be able to navigate the process so
6 we're also doing a lot more training of our shelter
7 staff people, making sure that they have clear
8 opportunities for getting assistance if they don't
9 know how to adequately navigate the process
10 themselves, the shelter staff, so that they can do a
11 better job assisting clients.
12

13 COUNCIL MEMBER BROOKS-POWERS: Thank you.

14 CO-CHAIRPERSON BRANNAN: Now, we have
15 Council Member Williams followed by Restler.

16 COUNCIL MEMBER WILLIAMS: Hello. Actually,
17 just following up on that question, can you provide
18 more details to what the City is currently doing to
19 expedite the processing of rental assistance and what
20 additional resources has the City allocated to that
21 since the onset of the asylum-seeker influx?

22 COMMISSIONER PARK: Thank you for that
23 question, Council Member. It's one of my favorite
24 topics, and I can talk about it all day long.

25

1
2 It is incredibly important to us that we
3 are connecting people to permanent housing. Many of
4 the asylum-seekers are not eligible for our
5 traditional housing resources so the answer that I'm
6 going to give you here is for our general DHS
7 population. We've made a lot of changes to CityFHEPS
8 over the last year or so, the most recent and
9 noticeable of which is that it is now something that
10 you can use statewide. We have worked with the Office
11 of Management and Budget to add staff to the teams
12 that do the processing. We're doing a lot of training
13 and engagement with our shelter staff so that, by our
14 shelter staff I actually really mean provider shelter
15 staff, so that they understand the process better and
16 that they are more actively engaged in assisting
17 clients and that when they do run into trouble with a
18 package that they have a clear pathway for getting
19 assistance. We're always looking for ways that we can
20 streamline the CityFHEPS voucher process, but, at the
21 end of the day, we are providing a public assistance
22 benefit that is fairly extensive so we do require
23 paperwork on behalf of clients and also a fair amount
24 of paperwork on behalf of landlords too. We want to
25 make sure that units are safe and habitable so, if a

1 shelter staff person is having trouble navigating
2 that, we've set up office hours, we've set up better
3 ways to give people feedback in real time on those
4 packages. Thinking on the supply side of things, HPD
5 has been a really terrific partner adding more units
6 to the housing supply. I'm very excited by ways that
7 we are looking at ways that we can, I'm going to get
8 a little wonky, where we can project-base the
9 CityFHEPS vouchers so that not-for-profits can
10 actually use those to acquire buildings and not just
11 rent units. We have a slew of different things that
12 we have underway, all with the goal of getting more
13 people out of shelter. It's the right thing to do for
14 individual households. While I believe in the value
15 of a strong shelter system to help people in a moment
16 of emergency, the end goal for everybody is permanent
17 housing so it's the right thing to do for the
18 households and it's the right thing to do for the
19 system as a whole so that we create some more
20 capacity.
21

22 COUNCIL MEMBER WILLIAMS: Thank you. I'm
23 sure as you know the Council really views the rental
24 assistance program as a way to alleviate this shelter
25 system. I think we hear it loud and clear that the

1 City is at capacity so one of the issues with the
2 vouchers is source of income discrimination, and I
3 know there's been money put in to CCHR around this
4 issue, but is there anything proactively that the
5 City is doing to mitigate any negative impacts of
6 source of income discrimination?
7

8 COMMISSIONER PARK: I think as you
9 mentioned the investment in CCHR and making sure that
10 we are able to tackle that is something that's really
11 important. The legislation that the Council passed to
12 make it very clear that source of income
13 discrimination is not acceptable is really important,
14 but we have to be actively enforcing it so we're
15 working our colleagues to make sure that's in place.
16 It's not easy, but it's really important work.

17 COUNCIL MEMBER WILLIAMS: Okay. NYPD spent
18 a million dollars in Fiscal 2023 and has already
19 spent 4 million dollars in Fiscal 2024. It is our
20 understanding that these expenditures were for
21 overtime at the (INAUDIBLE) assessment center and for
22 bus security. Can you clarify what the NYPD expenses
23 were for both Fiscal 2023 and Fiscal 2024?

24 DEPUTY DIRECTOR GREENBERG: Sure. It is
25 overtime. Let me get you the Fiscal Year breakout.

1 Last year, FY-23, it was a million dollars, and, thus
2 far in the current Fiscal Year, it has been 4
3 million, so 5 between the two Fiscal Years.

4
5 COUNCIL MEMBER WILLIAMS: Can you share
6 why it has increased so significantly in the current
7 year?

8 DEPUTY DIRECTOR GREENBERG: I'm going to
9 defer to others on the operational needs that require
10 NYPD.

11 DIRECTOR SCHAEFFER: The amount of asylum-
12 seekers who have come into the city has dramatically
13 increased over the past year, and we went from even a
14 couple of weeks ago where we were getting 2,000 new
15 asylum-seekers a week to 4,000, and we've
16 consistently had to open new sites and we've had
17 consistently had security issues in terms of keeping
18 our asylum-seekers safe and the surrounding community
19 safe. A good example of this is at Saint John Villa
20 where we had constant protesting day-in and day-out
21 that we needed to keep the asylum-seekers we were
22 housing there safe.

23 COUNCIL MEMBER WILLIAMS: Okay, I just
24 actually have a few more questions for you. How would
25 the responsibilities of the new Office of Asylum-

1
2 Seeker Operations differ from MOIA and do we
3 anticipate any duplicated efforts?

4 DIRECTOR SCHAEFFER: Thank you for that
5 question. We work in close coordination with MOIA. We
6 are not duplicating efforts. We figured out pretty
7 early on that the scale of this crisis, this
8 unprecedented humanitarian crisis required a new type
9 of response. We're really focused on the day-to-day
10 operations and making sure that we are coordinating
11 across these four agencies and the 16 agencies that
12 were written in the report, and we're really working
13 with MOIA on the policy and long-term planning.

14 COUNCIL MEMBER WILLIAMS: Okay. I heard
15 Dr. Long mention reticketing. Does your Office cover
16 the cost of reticketing or is that still an outside
17 cost of nice people who are donating and paying for
18 it?

19 DIRECTOR SCHAEFFER: The City pays for the
20 cost of reticketing. It's built into the budgets of
21 Dr. Long's and Dr. Iscol's budgets.

22 COUNCIL MEMBER WILLIAMS: Okay. Is your
23 Office a part of the intensified case management that
24 you mentioned? Your office, is it a part of the case
25 management, the intensified case management being

1 offered to residents that have received a notice to
2 vacate?

3
4 DIRECTOR SCHAEFFER: Yes, our Office is
5 part of the intensive case management. We're working
6 pretty closely with H and H which is really leading
7 that effort to make sure that we're getting
8 everything that we want out of that and that it's
9 happening across the system.

10 COUNCIL MEMBER WILLIAMS: Okay. Just one
11 more question from Council Member Stevens who had to
12 leave early. She is very interested and has been
13 working on efforts for black asylum-seekers, and so
14 language access has been the number one complaint so
15 we just wanted to know what services specifically
16 have been provided to black asylum-seekers, many who
17 are Muslim which is another whole issue.

18 DR. LONG: I can start. Two things I think
19 to note, one is, and forgive me if I've given this
20 example in the past, but the way we use Language
21 Line, it's a very inclusive service so, for example,
22 I have one patient in my primary care practice in the
23 South Bronx where, she's from Africa, and whenever
24 she sees me she smiles because I am, not an
25 exaggeration, one of the only people in the world she

1 can talk to. She speaks a rare dialect. Only her
2 husband and me are the two people she can talk to in
3 New York City so just making the point that our
4 Language Line does enable us to communicate
5 effectively with people across 250 different
6 languages and dialects. Specifically with respect to
7 our asylum-seekers that are Muslim, the first day I
8 remember we had, Zach and I had, about 80 people if
9 memory serves, I believe it was from Senegal, when we
10 had the first version of Randalls Island, and they
11 were joining us, they had nowhere else to go, and
12 they needed to eat, but we didn't have any halal food
13 at that point. On day one, we had a food truck that
14 came and provided halal food. Just to simplify,
15 because when you're, especially after you've traveled
16 this far, you don't have to worry about is this food
17 halal, is this food halal, 100 percent of our food at
18 our humanitarian centers is halal now so it was a
19 good lesson learned. We fixed it on day two, but just
20 to show how we're trying to be culturally sensitive
21 for people wherever you're coming from.

22
23 COUNCIL MEMBER WILLIAMS: Thank you.

24 CO-CHAIRPERSON BRANNAN: Council Member
25 Restler followed by Lee.

1
2 COUNCIL MEMBER RESTLER: Thank you very
3 much, Speaker Adams and Chair Brannan and Chair Ayala
4 and Chair Brewer, who always gives me a hard time for
5 not staying for the whole hearing so I'll call her
6 out while she's not here. No, only love for Gale.
7 Thank you to all the Central Staff and for the whole
8 Council for really prioritizing this issue and thank
9 you to all the folks on the dais for being here
10 today. I've had the privilege of working with many of
11 you, and I know that addressing the asylum-seeker
12 crisis was in none of your job descriptions 18 months
13 ago and you've all had to work intensely hard over
14 this period to provide care for 130,000 people that
15 have come to New York City. It's no small feat and
16 appreciate the hard work that's gone into it.

17 I do have to say though my general
18 critique is that we've really been lacking to plan
19 and just trying our best to keep our heads above
20 water as an Administration, as a City in this crisis,
21 and not doing as thoughtful a job as we should be
22 doing in planning ahead in ways that can both save us
23 money and deliver better outcomes for the people that
24 are coming through our proverbial doors. The purpose
25 of this hearing was about providing oversight on the

1 per-diem costs and how we're spending money, and I
2 feel like you all showed up with a lack of
3 information or an unwillingness to answer questions
4 in breaking down costs agency by agency,
5 understanding the length of stay in the different
6 facilities that you each are operating so that we can
7 provide more meaningful oversight and input into what
8 models are working better and what models are not. I
9 feel like the Administration is touting that there
10 have been 5,600 people that you've successfully
11 helped file federal asylum applications. That means
12 96 out of a 100 people that you've served over this
13 last year and half, you have not provided help
14 submitting an asylum application. 96 out of 100. That
15 is not a success, and I'm glad that things are
16 finally working a little bit, but we have so much
17 further to go, and the area that I'm most concerned
18 about frankly is our lack of prioritization of
19 permanent housing. I appreciate that asylum-seekers
20 do not have access to public housing, do not have
21 access to supportive housing, but by our best
22 accounts, there are 4,580 vacant NYCHA apartments, a
23 ninefold increase since the Mayor came into office,
24 this is housing that is squarely within our control,
25

1 and we have 2,500 vacant supportive housing units so
2 we're talking about 7,000 vacant units of housing
3 that are fully within the control of the City of New
4 York that could be housing 15,000-plus people in our
5 shelter system if we invested the resources to fix
6 those units up today. It looks like Commissioner Park
7 is generously jumping in. Commissioner, I know you're
8 trying here, but this is a serious problem, and we
9 could move close to a third, certainly 25 percent of
10 our DHS shelter population out of the system if we
11 were to invest resources in permanent housing and why
12 are we not doing it?

14 COMMISSIONER PARK: Thank you, Council
15 Member. I think you know me well enough to know that
16 permanent housing is an enormous priority for me.
17 With all due respect, I think you're significantly
18 oversimplifying the reality on the ground. NYCHA has
19 been a great partner for us. They are also doing an
20 enormous amount of very substantial rehab of their
21 own portfolio, which is incredibly important. If we
22 lost our 180,000 units of NYCHA housing, we would be
23 in even more dire circumstances. Very glad that they
24 are doing that long-term investment. They need
25 vacancies to be able to do checkerboarding because a

1 lot of the work that they're doing is not work that
2 they can do with tenants in place so this is not a
3 question of NYCHA sitting on their hands. This is a
4 question of NYCHA is managing competing priorities.
5 We continue to move households out of the shelter
6 system into NYCHA housing. We have a very close and
7 collaborative relationship with them, but simply
8 looking at the vacancy numbers doesn't tell the
9 entire story.
10

11 COUNCIL MEMBER RESTLER: Sorry. I have to
12 jump in here. In 20 months under Mayor Adams, we've
13 seen a ninefold increase, almost 10 times as many
14 vacant NYCHA apartments as the day he came into
15 office. In the most recent budget, he proposed
16 slashing the funding that goes to repairing vacant
17 NYCHA apartments by 30 million dollars, and Speaker
18 Adams had to fight to restore that money which we
19 did, but still the cost for housing 4,000 families in
20 DHS shelter for a year is 370 million. For 180
21 million, we could fix up the 4,000 vacant NYCHA
22 apartments, save ourselves money, not be spending
23 stupidly on these hotel costs that are what are
24 driving our increased per-diems and make a huge
25 difference. I don't understand why we're not

1
2 prioritizing those investments and are instead just
3 opening HERRC after HERRC when we could be driving
4 down the population.

5 COMMISSIONER PARK: Let me try again to
6 explain that.

7 COUNCIL MEMBER RESTLER: Please.

8 COMMISSIONER PARK: With the caveat that I
9 am not NYCHA and I'm sure I will be happy to follow
10 up with our NYCHA colleagues.

11 COUNCIL MEMBER RESTLER: And the
12 supportive housing piece too, 2,500 vacant supportive
13 housing units is in your portfolio.

14 COMMISSIONER PARK: Happy to get there.

15 COUNCIL MEMBER RESTLER: I will not
16 interrupt again for another 30 seconds.

17 COMMISSIONER PARK: With respect to the
18 NYCHA units, when they are going to do a significant
19 rehab, one of these gut rehab, major projects that
20 they have, they cannot do those with tenants in place
21 so they need to have vacancies that they have
22 available so that they can checkerboard people around
23 their, because in the distant past, when there was
24 rehab of NYCHA units, people were expected to self-
25 relocate. This Administration is not taking that

1 perspective. It is incredibly important that we are
2 doing this long-term investment in NYCHA housing. It
3 does affect the short-term ability to move people
4 from DHS to NYCHA, but that is towards a long-term
5 goal of having a more stable NYCHA portfolio.
6

7 With respect to the supportive housing,
8 we have done a ton of work to reduce the vacancy rate
9 in supportive housing. It's half what it was a year
10 ago. What you see now is driven by a couple of
11 things. First of all, in that number that you're
12 looking at are certain units that are controlled,
13 although they show up on our dashboard, are not
14 necessarily controlled by us. There are State players
15 and other partnerships. We are working very closely
16 with them. There are various lags in reporting, but
17 also this is not a static universe of units that is
18 available. We are working and then, because HPD is a
19 very effective production arm, we have buildings
20 coming online all the time so we have sped up the
21 process, we've done a lot of work to speed up the
22 process, we are matching people as quickly as
23 possible, we are revisiting eligibility requirements
24 to make sure that we don't have people who are
25 blocked out of accessing supportive housing because

1 the units have requirements that are too specific so
2 all of that is going on. Collaboration with the State
3 agencies and other partners that are involved in
4 that, but we don't have 2,500 units of supportive
5 housing sitting vacant over the long-term. This is a
6 rotating number, and we are at what is a typical
7 vacancy rate given the fact that this is a stock with
8 some turn.
9

10 DEPUTY COMMISSIONER SARKISSIAN: Sorry,
11 Lincoln, let me just jump in to. Just in terms of
12 adding to the stock and supply of affordable housing,
13 last year we had one of the best years we've had in
14 years. We closed on about 26,000 units between NYCHA,
15 HPD, and HDC. Previous year, we were just over 16,000
16 so we went from 16,000 to 26,000 so I think...

17 COUNCIL MEMBER RESTLER: Most recent
18 numbers were down, relative to de Blasio, your
19 numbers are down. We can look at the different
20 populations that are being prioritized and the
21 affordable housing numbers, but I don't think saying
22 that production is up is accurate, certainly on the
23 affordable housing side.

24 That being said, I just want to come
25 back. The length of vacancy upon turnover of the

1
2 NYCHA units has doubled, and so what that means is
3 it's taking twice as long, nearly 300 days, for
4 people to get, homeless families that have no place
5 to go, into that NYCHA apartment, and I raise this
6 hear because when it's happening at such a phenomenal
7 scale where the Administration is failing to invest
8 in necessary ways to fix up those units, it fills up
9 our homeless shelters which makes it impossible for
10 us to house the migrants that are now costing us
11 close to 400 dollars a day to house, and so we
12 should, instead of prioritizing just opening HERRC
13 after HERRC after HERRC, prioritize what are the
14 long-term permanent housing solutions that we have
15 within our control that will save us significant
16 money, and so I would ask why is this Administration,
17 I'll shift this one to City Hall, not prioritizing a
18 NYCHA repair squad and investing proactively bringing
19 agency resources together to fix up these 4,500
20 vacant NYCHA apartments and expediting the move-ins
21 into the 2,500 vacant supportive housing units that
22 would make such a difference in declining this
23 overall census.

24 COMMISSIONER PARK: I'm going to jump in
25 here because poor Molly Schaeffer gets to be

1 responsible for all the asylum-seekers, she doesn't
2 also have to be responsibility for permanent housing.
3 First of all, NYCHA's not here so we'd be happy to
4 circle back...

5
6 COUNCIL MEMBER RESTLER: (INAUDIBLE) my
7 question was how do we do more together.

8 COMMISSIONER PARK: Right. That being
9 said, they have been a terrific partner. In Fiscal
10 Year 2023 relative to Fiscal Year 2022, DSS moved 20
11 percent more households into subsidized housing
12 across the board, so this is using all of our
13 subsidized housing tools, CityFHEPS...

14 COUNCIL MEMBER RESTLER: What percentage
15 did you get for DHS families of total NYCHA
16 availability? Do you have that number?

17 COMMISSIONER PARK: NYCHA availability in
18 terms of what is truly available is much lower...

19 COUNCIL MEMBER RESTLER: (INAUDIBLE) the
20 de Blasio Administration, you were at 50 percent.

21 COMMISSIONER PARK: When you and I were
22 collaborating on this in the de Blasio
23 Administration...

24 COUNCIL MEMBER RESTLER: Yes.
25

1
2 COMMISSIONER PARK: There was less
3 investment in long-term substantial NYCHA repairs
4 oversight they had less of a need for these
5 checkerboard units. The circumstances on the ground
6 have changed since you and I were collaborating on
7 this in the de Blasio Administration, but we have
8 worked across the board. This is another place where
9 we are looking at the ecosystem as a whole. HPD has
10 stepped up in tremendous ways so we are doing three
11 or four times the number of placements into HPD
12 housing than we were doing when you and I were
13 collaborating in the de Blasio Administration so it
14 is incumbent on us to be looking for all the ways
15 that we can move people into permanent subsidized
16 housing, and we are doing that and the number is 20
17 percent higher than it was the previous years.

18 DEPUTY COMMISSIONER SARKISSIAN: Molly,
19 just to add, just last year, we closed on more
20 homeless units and more supportive housing units than
21 we've ever closed before. This is including the de
22 Blasio Administration.

23 COUNCIL MEMBER RESTLER: The point that
24 I'm making on the DHS move-outs into NYCHA was my
25 recollection is at the peak of the de Blasio

1 Administration, we were getting about 50 percent of
2 the vacant units in NYCHA for DHS families exiting
3 shelter, and if we're hitting those numbers again,
4 that'd be great. I'd love to know what those numbers
5 actually are, but my concern is is that we're not
6 doing the work to fix up the apartments to provide
7 the housing that people need, and I don't understand,
8 there's a whole Administration focus on let's house
9 migrants, not a whole Administration focus on how do
10 we generate the permanent affordable housing that we
11 need, and, if that was prioritized in the same kind
12 of way, we could save money and move literally 15,000
13 people off of your shelter roles in a period of
14 months.

16 COMMISSIONER PARK: I very much wish it
17 was that easy. I can assure you that I am incredibly
18 focused every day on permanent housing exits. My team
19 has heard me say it. There are three things that keep
20 me up at night. Asylum is one of them, exits from
21 shelter into permanent housing is one of the others.
22 We are...

23 COUNCIL MEMBER RESTLER: I have every
24 confidence you are focused on it. My question is why
25 is City Hall not focused on it.

1
2 COMMISSIONER PARK: I get incredible
3 collaboration and support from the City Hall team.
4 NYCHA has an overall plan that is very different from
5 what the overall NYCHA plan was five years ago.
6 NYCHA's overall plan involves significant investment
7 in long-term rehab, which we need. If we don't make
8 that long-term investment in the NYCHA stock, that's
9 180,000 units of deeply, deeply affordable housing
10 that are going to slowly crumble, but that effects
11 the day-to-day vacancies but we, as an
12 Administration, have worked to find alternatives to
13 that and we are continuing to grow the supply of
14 housing that is available for our clients and finding
15 improved ways. I'm certainly not saying that there is
16 not more work to be done, there is always more work
17 to be done..

18 COUNCIL MEMBER RESTLER: Commissioner
19 Park, with all due respect, the numbers don't lie.
20 When we've seen a ninefold increase in the number of
21 vacant units, twice as long to turn over an apartment
22 and move a family into it upon vacancy, that tells a
23 story. It tells a story that this Administration is
24 not prioritizing the permanent housing that is
25 available to us and that is fully within your control

1
2 as an administration so I get that we need to invest
3 in NYCHA units, I get that we need to improve
4 conditions, I get that these buildings and apartments
5 have been crumbling for far too long, I get that that
6 takes more than a day and it takes more than a
7 dollar, but it does save us money to invest in
8 permanent housing instead of costly shelters and
9 costly hotels where we're spending now nearly 400
10 dollars a day on migrants. That is twice as much as
11 what you were spending in housing a homeless family
12 just two, three years ago so we can drive these costs
13 down if we invest in the permanent affordable housing
14 that we need, especially the stuff that's within our
15 control. This is the lowest of low-hanging fruit, and
16 I have seen zero prioritization of it from this
17 Administration.

18 COMMISSIONER PARK: I cannot speak to the
19 specifics of all of the NYCHA processes. I am not
20 NYCHA.

21 COUNCIL MEMBER RESTLER: No.

22 COMMISSIONER PARK: I can assure you that
23 we are as an Administration very focused on this from
24 the top down. NYCHA is a piece of the toolbox, they
25 are only a piece of the toolbox because there are

1
2 competing priorities for those NYCHA units including
3 the investment in NYCHA housing, but we are as an
4 Administration focused on building other tools so
5 that we can continue and grow the pipeline of people
6 who are moving out of our shelter system.

7 COUNCIL MEMBER RESTLER: I completely
8 agree and I'm sorry for going over, and I thank you,
9 Chair Brannan, for giving me a moment, but I just
10 mean to say if we're going to ask private landlords
11 to do more, if we're going to push to make sure that
12 every voucher holder is getting into an apartment, it
13 starts with our own house. It starts with the units
14 that we control. It starts with the NYCHA units and
15 it starts with the supportive housing units, and to
16 see those vacancy rates go up and up and up under
17 this Administration, it sends a very clear message,
18 and I believe that we have the ability to invest and
19 prioritize resources to fix up these apartments and
20 move, truly, 15,000 people conservatively into
21 housing, permanent housing and dramatically drive
22 down our costs on hotels if we were to prioritize it,
23 and I appreciate you saying that it is a priority. I
24 have seen zero demonstration of that on the ground,

1 zero demonstration of data points in the right
2 direction to show it.

3
4 COMMISSIONER PARK: The supportive housing
5 vacancy rate is 50 percent of what it was a year ago.

6 COUNCIL MEMBER RESTLER: Okay, thank you.

7 CO-CHAIRPERSON BRANNAN: Council Member
8 Lee.

9 COUNCIL MEMBER LEE: Thank you. I just
10 wanted to focus on actually a couple of my questions
11 more on the non-profit side which we sort of touched
12 upon a little bit, but that's my area that I knew
13 before.

14 Just around the meal contracts, just out
15 of curiosity, how many of these were contractors that
16 were used in the Get Food NYC which was during COVID
17 and have any of those food vendors been vetted or
18 looked at in terms of the costs and the contracting?
19 The only reason why I say that is because when I look
20 at the costs of what the City is spending on the
21 meals, I know that, for example, I ran, this is a
22 little different, DFTA programs like Meals on Wheels
23 programs, but we would get reimbursed by the City on
24 average anywhere from \$5.50 to like \$9 but the unit
25 cost is at least 10 or 11. I know the national

1 average is about \$11.25 or something around there,
2 and so I'm just wondering as a whole have those Get
3 Food NYC vendors been looked at, how can we save cost
4 there, and then also I know that there's been a lot
5 of conversation from looking at switching over from
6 emergency to more long-term solutions and so has the
7 City looked at contracting with some of the non-
8 profit providers that are already doing this work in
9 multiple languages, in a lot of culturally competent
10 settings? Have they done that? If not, moving
11 forward, is that a conversation that is being had
12 because even if you just go to UNH, for example, the
13 settlement houses which we were a part of, in that
14 network alone, there's a lot of providers that do the
15 casework, the meals, the language access, the mental
16 health services, connecting people in the community
17 and so how can we better utilize already existing
18 providers that we know are doing good work who
19 actually abide by a lot of the City contracts
20 already?
21

22 DR. LONG: Great questions. I'll start and
23 I'll see if any of my colleagues want to add on
24 anything further.
25

1
2 The first question is a great one. How
3 does what we did during COVID relate to the way that
4 we're using food vendors now? LIC Commissary is
5 actually one of the main food vendors that we used
6 during the Test and Trace effort to deliver I believe
7 it was, if memory serves, 2.2 million meals, we'll
8 have to doublecheck that, throughout the COVID
9 pandemic, and that's 2.2 million times people didn't
10 have to leave their homes and risk potentially
11 infecting others, going to the grocery store, things
12 like that, so that was a vendor that we had a good
13 experience and we brought them on to do this work
14 going forward. Another vendor we've used is Rethink
15 Food, which is a vendor that actually looks at a lot
16 of local businesses to help them see where they have
17 extra capacity and actually use that capacity to
18 bring food, healthy food, fresh food onto sites at
19 our sites so it's a way to support New York City
20 across multiple different restaurants. Going forward,
21 in addition to what we're currently doing with those
22 vendors, food is one of the RFPs that we are going to
23 be going through now that we've put out so look
24 forward to all of your good points about finding the
25 right organizations to provide the right food that's

1
2 culturally responsive, things like that. We'll have
3 the opportunity to do that through the food RFP.

4 Anyone want to add anything?

5 DIRECTOR SCHAEFFER: The only thing I'd
6 add is that we are actively looking at how to get
7 more local non-profits and local groups in this
8 effort. Obviously, Commissioner Molly Park, most of
9 her sites are run by local non-profits, but we
10 welcome any suggestions that you have.

11 COUNCIL MEMBER LEE: Yeah, especially when
12 it comes to wraparound or any of the casework
13 services, I think there's a lot of great partners
14 that could be had up there.

15 I'll yield because a lot of my questions
16 were already asked before, but I just wanted to give
17 a special shoutout to Dr. Long and I see Laura Atlas
18 in the back over there because you guys have been
19 extremely helpful in helping us navigate the HERRC in
20 our District so I just wanted to say thank you.

21 DR. LONG: Thank you for being a great
22 advocate for your community.

23 CO-CHAIRPERSON BRANNAN: Okay, we just
24 have like four or five more hours to go.

1
2 Two last things. One, I guess just
3 broadly whoever wants to answer it. Do you think what
4 we're doing is working? One of the things that I
5 think my Colleagues and I, obviously, we can do the
6 math, how many asylum-seekers have come in through
7 the system and now we got it, but I think it would be
8 helpful for us to understand how many folks we're
9 helping move through the system and get on their own
10 two feet so have you seen progress in the way we were
11 doing stuff sort of in the very beginning to what's
12 happening now?

13 COMMISSIONER ISCOL: I'll take the first
14 shot at this. I think what the City is doing is a
15 great model for what should be done across the
16 country. Immigration is a national crisis. I'd argue
17 it's an international crisis. If you look sort of at
18 the history of mass migration to this country going
19 back to World War 2 whether it was World War 2
20 refugees from World War 2, whether it was Soviet
21 Jews, Cubans, Haitians, Vietnamese boat people in the
22 '70s, in each case the federal government ran a
23 large-scale process to manage the influx of people,
24 get them work authorization, process their paperwork.
25 There's a lot of things that we need to be doing that

1 are way outside the capabilities or even the
2 authorities of a municipality to be able to do, and
3 so I think what we are doing is working, but this
4 really requires real effort from the federal
5 government to not just manage this crisis but to turn
6 it into an opportunity, and I think one of the things
7 that all of us fundamentally believe is that if you
8 make investments in immigrants, it pays huge
9 dividends for the country, culturally, economically.
10 People are worried about them taking jobs. We know
11 that they create jobs and that there's a lot of
12 opportunity here with the right federal leadership.

14 DR. LONG: I would just add on a couple of
15 points. Two points that I think about a lot when I
16 think about what's working now and then a third thing
17 sort of looking forward. I think we are at a state in
18 the crisis where, as Molly said, it's time to pivot
19 and shift and go in a direction that we believe will
20 work going forward.

21 Two things that I think have worked
22 especially well now. One is the arrival center. Other
23 cities have not created an arrival center anywhere
24 close to ours. I really do think it's an example, as
25 Zach said, of a national model, but just to show what

1
2 working means to me. Number one is that up to one out
3 of every four people that enter the front door of the
4 arrival center will leave that same door within 24
5 hours, either to resettle in New York City with
6 friends and family that we've helped to identify or
7 to be reticketed to somewhere else that meets their
8 needs better than New York City could. Before the
9 arrival center, that up to one out of every four
10 people was essentially zero out of every four so that
11 was huge progress that we made in terms of helping
12 people get what they wanted within the first 24
13 hours. The other thing that the arrival center did
14 that I believe is working, again as a primary care
15 doctor, is it still bothers me and keeps me up at
16 night is this picture of this child that had a
17 witnessed seizure where his life was threatened right
18 at our feet because Texas took his medication away at
19 the border. In the same way as the example that I
20 gave earlier too, a woman receiving her first
21 prenatal visit at nine months pregnant is a violation
22 of her human rights, and she could've had that
23 prenatal visit in multiple opportunities in Texas,
24 all of which were denied to her. That's denying her
25 human rights. Here in New York City, not only are we

1 effective in the arrival center but we're
2 compassionate in giving people what is their human
3 right that was taken away from them in Texas.
4

5 The other thing that convinces me that
6 what we're doing is effective now is, again, we throw
7 these numbers around a lot but just 130,000 people
8 have received help from us. Half of them, 65,000,
9 with our help were able to leave our city system and
10 complete their journeys. That's 65,000 people that
11 will celebrate their birthday in their new apartment
12 or with friends and family that they love that are
13 not fearing persecution in the country they came from
14 and are not stepping over dead bodies in the journey
15 up here and continuing to then be traumatized by that
16 journey. That's 65,000 people that are already in a
17 better place because of New York City. That's more
18 people than most other cities have received, maybe
19 all other cities have received, that we've been able
20 to successfully not only help but get them to
21 complete their journeys with our help.

22 Going forward for me, one of the really
23 important things is that at this stage in the crisis,
24 as we've talked about throughout this hearing, we've
25 learned a ton. How do we apply everything that we've

1
2 learned in a comprehensive and organized way going
3 forward, and that's what case management is. Within a
4 matter of weeks, we're going to have every asylum-
5 seeker in our whole system labeled Red, Yellow, or
6 Green, meaning we understand what their specific
7 challenges as an individual or family are and we're
8 going to have case managers that meet with them
9 regularly, twice a month, to help them in their
10 specific situation surmount those challenges. For
11 about half the people in our system so far, again,
12 we've succeeded. Imagine what we can do if we're
13 effectively solving resettlement, solving work
14 authorization based on your individual need, solving
15 reticketing, getting OSHA training, teaching English
16 as a second language. For me, that's something that
17 we've done a good job of so far, but doing great I
18 think will define the next stage of this crisis for
19 us as a city.

20 CO-CHAIRPERSON BRANNAN: One last thing, I
21 guess maybe for HPD. I know the Mayor announced back
22 in May I believe a program to move some of the
23 asylum-seekers to temporary shelters outside the
24 city. Could you tell us how that's going?

25

2 DEPUTY COMMISSIONER SARKISSIAN: Yeah. We
3 have about 18 hotels upstate in various different
4 communities from the Hudson Valley to Albany to
5 Rochester to the Buffalo area in Erie County so we
6 have a number of folks, just a little shy of 2,000
7 folks, I think about 1,800 folks upstate, so it's
8 going well. We've developed good relationships with
9 all those communities. We have productive
10 relationships with local CBOs that are supporting
11 these folks that are in our various shelters upstate.
12 We get a lot of feedback from those local mayors and
13 county executives and the DSS equivalents up there,
14 and the great thing is they care about our folks too.
15 They've really embraced our folks. Our kids are going
16 to school up there, right. Our folks here have
17 developed relationships with school districts in Erie
18 County, Rochester, etc., and those schools have
19 embraced our kids so while there definitely was some
20 pushback, I think the partners we've found have
21 really kind of adopted and are loving our kids that
22 way.

23 CO-CHAIRPERSON BRANNAN: All right. Thank
24 you, guys, so much. Appreciate your time today.

25 We're going to hear from the public now.

DEPUTY COMMISSIONER SARKISSIAN: Thank you
for your time.

Okay, our next panel is going to be Chris
Mann, Tamia Santana.

You can begin whenever you're ready.

CHRIS MANN: Sure, thank you. Good
afternoon, Chairs Brannan, Ayala, and Brewer, thank
you, and Members of the Finance, Oversight and
Investigations, and General Welfare Committees for
the opportunity to testify.

My name is Chris Mann. I'm the Assistant
Vice President of Policy and Advocacy at WIN, the
nation's largest provider of shelter and services to
families with children experiencing homelessness. We
operate 14 shelters and nearly 500 units of permanent
supportive housing throughout the five boroughs.
Currently, 6,500 people call WIN home every night
including 3,600 children. WIN has always welcomed
immigrants to our shelters, and we work to ensure a
safe place to rest, heal, and recover for all New
Yorkers in need, regardless of immigration status.
Amidst significant budget cuts, WIN has provided an
array of necessary services not covered by contracts
provided by the City. In response to the current

1
2 unsustainable path, the City must prioritize moving
3 people out of shelter and into permanent housing,
4 which costs far less. Additionally, the City must
5 invest the necessary upfront resources needed to
6 assist all eligible with asylum work and TPS
7 applications. The City must focus on long-term
8 solutions rather than short-sighted cuts and attacks
9 on essential rights which will end up costing the
10 City enormously in the long run.

11 First, the City must prioritize
12 implementing the expansion of the CityFHEPS voucher
13 that this City Council boldly passed, which would
14 significantly increase capacity for new arrivals and
15 save the City an enormous of money. According to
16 WIN's analysis, expanding CityFHEPS vouchers to New
17 Yorkers at risk of becoming homeless would result in
18 savings of approximately 730 million annually. New
19 York City should also expand access to housing
20 vouchers for all families in need regardless of their
21 immigration status, a move that could save the City
22 up to 3 billion annually.

23 New arrivals are always ready, willing,
24 and able to work but aren't legally allowed to do so.
25 For the new arrivals, the key to getting to work is

1
2 completing the asylum and TPS applications as quickly
3 as possible, and the City must increase funding for
4 legal assistance for new arrivals in the form of
5 asylum work authorization and TPS application
6 assistance.

7 Finally, there's absolutely no need or
8 justification for eliminating the right to shelter, a
9 right that exemplifies our values as New Yorkers. The
10 City just needs to prioritize this menu of solutions
11 that's already been identified. Thank you.

12 TAMIA BLACKMAN SANTANA: Hi. I'm Tamia
13 Blackman Santana. I'm the Chief Officer of
14 Engagements and Inclusion at Ballet Hispanico. I am
15 here just representing the joy and the genius of the
16 arts. I feel like I'm preaching to the choir. I don't
17 need to talk to anyone on our City Council about
18 social-emotional learning and how it affects the
19 children that are in our city but just really wanted
20 to take the time as more migrant children are
21 entering into the New York City public school, a
22 reminder of what our organization is doing. We've
23 been around for 53 years. We're the largest Latin
24 arts institution in America. We now partner with
25 Columbia University's Teachers College and have a

1 Latine African Diaspora curriculum that goes into 45
2 New York City public schools in all five boroughs.
3 Listening to the panel discussion before, listening
4 to my colleague, we're all facing something that we
5 never have before in our lifetime, and I just want to
6 take some time to please also remember the arts and
7 remember children that are entering into our public
8 schools and that we're all in it together. Thank you.

9
10 CO-CHAIRPERSON BRANNAN: Thank you both so
11 much. Thanks for all you do.

12 Now, we have Christopher Leon Johnson.

13 CHRISTOPHER LEON JOHNSON: Good afternoon,
14 everybody. My name is Christopher Leon Johnson.
15 Hello, Fester. The reason I'm here because I'm here
16 to make a big statement here, and the reason this
17 migrant crisis is going on with the spending is
18 because of the Council Member right here, Justin
19 Brannan. He's the reason this is going on, and he
20 knows it. He spending all this money on these non-
21 profits like Make the Road New York and the Worker
22 Justice Project and Individual Freedom Fund and all
23 these corrupt organizations, and all he's caring
24 about is staying re-elected, and he knows it. He
25 don't care about New York City. He doesn't care about

1
2 America. All he cares about is his own political
3 career. He knows his campaign is sinking, and now he
4 has to spend all this money into these non-profits to
5 keep himself re-elected. Now, recently he just gave 6
6 million dollars to a Muslim-based non-profit, I am
7 not xenophobic, I love my Muslims who need to really
8 condemn Hamas for bombing and condemn that
9 organization, Within Our Lifetime, for marching
10 around Bay Bridge and assaulting cops, and you know
11 what you're doing, Justin. You're allowing it to
12 happen because you're scared of Nerdeen Kiswani. You
13 know who she is. She runs Within Our Lifetime. She's
14 running on Bay Bridge, running all over New York City
15 saying death to the Jews, getting rid of all the
16 Jewish people, and all you care about is staying re-
17 elected, and everybody knows it. That's why I call
18 you Fester. I'm going to say this right now. November
19 7th, you're going to lose your job. Vote for Ari
20 Kagan, City Council, vote Republican because Justin,
21 yeah, you're smiling, you're smiling, but you know
22 your job is numbered. None of these elected officials
23 ain't coming for you. Marjorie's not coming out for
24 you. (INAUDIBLE) not coming out for you. Max Rose has
25 not come out for you, and you know it. So it's all

1 over, bro. It's game over. Yeah, you can nod all you
2 want, but I'm going to see you (INAUDIBLE) and
3 everybody's going to like it because you're a fraud.
4 You're fake, you're a fake person, and everybody
5 knows it. Vote your fat ass out. Vote the fat fuck
6 out. You're a piece of shit. Fuck you, man. Fuck you
7 (INAUDIBLE)

8
9 CO-CHAIRPERSON BRANNAN: We've got three
10 more on Zoom. I've got Ashley Chen followed by Juan
11 Diaz on Zoom.

12 SERGEANT-AT-ARMS: You may begin.

13 ASHLEY CHEN: Hello. Can everyone hear me?

14 SERGEANT-AT-ARMS: Yes.

15 ASHLEY CHEN: Okay. Thank you to Chair
16 Brannan and Members of the Finance, General Welfare,
17 and Oversight and Investigations Committees for the
18 opportunity to testify. My name is Ashley Chen, and
19 I'm the Policy Analyst at the Chinese American
20 Planning Council. CPC is the largest Asian American
21 social service organization in the U.S. that's
22 providing vital resources to more than 280,000 people
23 per year through more than 50 programs at over 30
24 sites across Manhattan, Brooklyn, and Queens. CPC
25 employs over 700 staff, speaking 25 languages, whose

1 comprehensive services are linguistically accessible,
2 culturally sensitive, and highly effective in
3 reaching low-income and immigrant individuals and
4 families.
5

6 I want to start off by sharing a story of
7 an asylum-seeker that we serve. One mother enrolled
8 in our Promise NYC program explaining that she and
9 her children came to the U.S. in order to escape
10 life-threatening shortages of medications that they
11 faced in Venezuela. Her oldest child would have died
12 without access to medications and the treatment.
13 There was no time to wait for the strenuous and long
14 immigration processes and therefore is now seeking
15 asylum. She is relying on Promise NYC so that she can
16 access childcare for her children and thus access
17 employment and income to support her family. This is
18 one of so many stories that we have heard that should
19 create a sense of urgency for our elected leaders,
20 especially the Adams' Administration. As an
21 immigrant-serving social service agency, CPC has a
22 moral obligation to provide the support and
23 assistance to these migrants, but the City is
24 proposing an impossible choice through budget cuts
25 when social service agencies are already filling the

1 gap in City funding. We must live up to our values as
2 a sanctuary city and provide the resources for our
3 migrants to find permanent housing, work, and
4 ultimately stability. It is unconscionable in one of
5 the wealthiest cities in the world that we are
6 pitting communities against each other for resources.
7 CPC is part of the People's Plan and endorses their
8 platform of creating a care-based system rather than
9 the proposed 15 percent budget cuts across agencies
10 that are providing direct services for our migrant
11 communities. In fact, the Administration is proposing
12 budget cuts that significantly states the fiscal
13 impacts of migrant arrivals according to the Fiscal
14 Policy Institute. The City has failed to handle the
15 influx of migrants with care and dignity, investing
16 in tactics that are meant to harm our vulnerable
17 communities rather than empower them. This is
18 unacceptable and fundamentally goes against the core
19 values of this city. We are a city of immigrants, and
20 it's about time we treat..

22 SERGEANT-AT-ARMS: Time is expired. Thank
23 you.

24 ASHLEY CHEN: Compassion that they
25 deserve. Thank you so much for your time.

CO-CHAIRPERSON BRANNAN: Thank you,
Ashley. Now, we have Juan Diaz.

SERGEANT-AT-ARMS: You may begin.

JUAN DIAZ: Thank you. Can you hear me?

CO-CHAIRPERSON BRANNAN: Yes.

JUAN DIAZ: Okay. Thank you, Chair Ayala,
Council Member Brannan, and all Members of the
Committees, for holding today's oversight hearing on
the City's asylum-seeker response efforts. My name is
Juan Diaz, and I'm a Policy and Advocacy Associate at
Citizens' Committee for Children (INAUDIBLE)
dedicated to ensuring that every young child is
healthy, housed, educated, and safe.

We acknowledge the City's efforts to
address the unprecedented migration of asylum-seeking
families and individuals looking for opportunities to
thrive and contribute to the city and nation.
However, CCC and advocates across the city are deeply
concerned about the proposed shelter policy of 60-day
limits for immigrant families with children and how
this change could have a negative impact on migrant
children's education and overall well-being. We are
pleased to note that the right to shelter (INAUDIBLE)
will now enter a negotiation process. As such, we

1
2 urge all parties involved to work on solutions to
3 secure the right to shelter and to set the path to
4 cost-saving solutions like expedite move-outs, to set
5 aside affordable housing units, by reducing steps and
6 streamlining application process, and ensuring that
7 vacant positions at housing assistance agencies are
8 filled. To safeguard the housing and economic
9 security of New York City's most vulnerable, the City
10 Administration should consider the Mayor's proposed
11 15 percent budget cuts to agencies like the
12 Department of Social Services and the Department of
13 Homeless Services, which would only exacerbate an
14 already problematic situation of individuals and
15 families not receiving benefits such as SNAP, cash
16 assistance, and housing vouchers on time. Families
17 and students in shelter regardless of immigration
18 status need the support to thrive while their
19 families are placed in stable housing. CCC urges the
20 City to support the effective implementation and
21 legislation that would expand CityFHEPS eligibility
22 so that we can open more shelter space and save the
23 City millions of dollars in administrative and
24 funding costs. Also..

2 SERGEANT-AT-ARMS: Your time has expired.

3 Thank you.

4 JUAN DIAZ: Thank you.

5 CO-CHAIRPERSON BRANNAN: Thank you, Juan.

6 Now, we have Rosanna Cruz.

7 SERGEANT-AT-ARMS: You may begin.

8 ROSANNA CRUZ: Good afternoon. Can you
9 hear me?

10 CO-CHAIRPERSON BRANNAN: Yes.

11 SERGEANT-AT-ARMS: Yes, we can hear you.

12 ROSANNA CRUZ: Thank you so much for
13 giving us the opportunity to testify today. My name
14 is Rosanna Cruz, and I work with Good Shepherd
15 Services. We have been hosting the Asylum-Seeker
16 Resource Fair since last year. The last one we hosted
17 in May in collaboration with the National Guard. Our
18 main goal as an agency has been to connect asylum-
19 seekers to essential resources such as health,
20 immigration, education, and mental health services.

21 Today, I want to highlight our
22 frustration with the current situation going on with
23 the asylum-seekers. Legal services is one of the
24 major concerns that we have. There is still a lack of
25 legal services availability for individuals to apply

1 for the asylum-seeker and TPS. Although TPS has been
2 recently approved for Venezuela, only about 2,000
3 immigrants have applied, and less than 400 have been
4 Venezuelan. New York City has not prioritized the
5 Venezuelan. They have not received the needed legal
6 services that they need, which is a shame in this
7 city. Asylum-seekers from other countries have
8 received expedited legal assistance when they come to
9 the U.S. Why not Venezuelans? Why don't we have a
10 plan to walk them through the process and provide the
11 legal support that they need? Asylum-seekers are
12 still struggling to find legal support. They are
13 relying on notarios and individuals that lack the
14 legal expertise to file the process for them, and
15 they are getting in debt when they don't have the
16 financial means to pay for the process. The City has
17 allocated so many fundings for legal immigration
18 assistance for asylum-seekers, but we have yet to see
19 many of our clients and community residents receive
20 such legal support. We need an immediate plan to
21 assist asylum-seekers. DSS should connect asylum-
22 seekers to legal assistance instead of assuming that
23 they should go out on the street looking for
24 assistance on their own. All asylum-seekers within
25

1 the shelter system should be scheduled for legal
2 immigration consultation...

3
4 SERGEANT-AT-ARMS: Your time has expired.

5 Thank you.

6 ROSANNA CRUZ: As soon as they arrive to
7 the shelter.

8 Thank you so much for giving us this
9 platform.

10 CO-CHAIRPERSON BRANNAN: Thank you,
11 Rosanna.

12 Okay, with that, this hearing is
13 adjourned. Thank you.

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C E R T I F I C A T E

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



Date October 30, 2023