

COMMITTEE ON GENERAL WELFARE JOINTLY WITH
COMMITTEE ON MENTAL HEALTH, DISABILITIES
AND ADDICTION JOINTLY WITH COMMITTEE ON VETERANS
JOINTLY WITH COMMITTEE ON HOUSING AND BUILDINGS 1
CITY COUNCIL
CITY OF NEW YORK

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TRANSCRIPT OF THE MINUTES

Of the

COMMITTEE ON GENERAL WELFARE JOINTLY
WITH COMMITTEE ON MENTAL HEALTH,
DISABILITIES AND ADDICTION JOINTLY
WITH COMMITTEE ON VETERANS JOINTLY
WITH COMMITTEE ON HOUSING AND
BUILDINGS

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December 7, 2023
Start: 1:15 p.m.
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HELD AT: COUNCIL CHAMBERS - CITY HALL

B E F O R E: Diana Ayala, Chairperson of
Committee on General Welfare

Linda Lee, Chairperson of
Committee on Mental Health,
Disabilities and Addiction

Robert Holden, Chairperson of
Committee on Veterans

Pierina Ana Sanchez, Chairperson
of Committee on Housing and
Buildings

COMMITTEE ON GENERAL WELFARE COUNCIL MEMBERS:

Tiffany Cabán
Crystal Hudson
Linda Lee

COMMITTEE ON GENERAL WELFARE JOINTLY WITH
COMMITTEE ON MENTAL HEALTH, DISABILITIES
AND ADDICTION JOINTLY WITH COMMITTEE ON VETERANS
JOINTLY WITH COMMITTEE ON HOUSING AND BUILDINGS 2

COMMITTEE ON GENERAL WELFARE COUNCIL MEMBERS: (cont.)

Chi A. Ossé
Lincoln Restler
Kevin C. Riley
Althea V. Stevens
Sandra Ung
Nantasha M. Williams

COMMITTEE ON MENTAL HEALTH, DISABILITIES AND
ADDICTION COUNCIL MEMBERS:

Shaun Abreu
Diana Ayala
Erik D. Bottcher
Tiffany Cabán
Shahana Hanif
Nantasha M. Williams

COMMITTEE ON VETERANS COUNCIL MEMBERS:

Joann Ariola
Sandy Nurse
Vickie Paladino

COMMITTEE ON HOUSING AND BUILDINGS COUNCIL MEMBERS:

Shaun Abreu
Alexa Avilés
Tiffany Cabán
David M. Carr
Eric Dinowitz
Oswald Feliz
Crystal Hudson

COMMITTEE ON GENERAL WELFARE JOINTLY WITH
COMMITTEE ON MENTAL HEALTH, DISABILITIES
AND ADDICTION JOINTLY WITH COMMITTEE ON VETERANS
JOINTLY WITH COMMITTEE ON HOUSING AND BUILDINGS 3

A P P E A R A N C E S

Corey O'Connor, supportive housing tenant and member of Supportive Housing Organized and United Tenants of New York City

Cheryl Burnett

Katrina Corbell

Sean Murray

James Doukas

Emily Lehman, Assistant Commissioner for Division of Special Needs Housing at the Department of Housing Preservation and Development

Mike Bosket, Executive Deputy Commissioner of the Employment and Support Services Administration at the Department of Social Services Human Resources Administration

Jamie Neckles, Assistant Commissioner, Bureau of Mental Health at the Department of Health and Mental Hygiene

Jason Loughran, Director of External Affairs at the Department of Veteran Services

Lamarr Wheeler, Director of Housing and Support Services at the Department of Veteran Services

Karim Walker, Outreach and Organizing Specialist with Safety Net Project at Urban Justice Center

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AND ADDICTION JOINTLY WITH COMMITTEE ON VETERANS
JOINTLY WITH COMMITTEE ON HOUSING AND BUILDINGS 4

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

Roxanna Henry, Safety Net Project at Urban
Justice Center

Jennifer Akchin, Staff Attorney at TakeRoot
Justice

Michael Andersson, Supportive Housing Organized
and United Tenants

Sandra Gresl, (on behalf of Antoinette Lane)

Ramon Leclerc

Nicole McVinua, Director of Policy at Urban
Pathways

James Dill, Executive Director of Housing and
Services, Inc

Trish Taylor, member of SHOUT

Tamar Levy, dual board-certified psychiatrist and
member of SHOUT

Rowan Shumin, social work intern with
Mobilization for Justice, reading the testimony
of Theodora Ranelli

Olivia Lazan, Project Coordinator of the Veterans
Assistance Project at the City Bar Justice Center

Terry Holt

COMMITTEE ON GENERAL WELFARE JOINTLY WITH
COMMITTEE ON MENTAL HEALTH, DISABILITIES
AND ADDICTION JOINTLY WITH COMMITTEE ON VETERANS
JOINTLY WITH COMMITTEE ON HOUSING AND BUILDINGS 5

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

Herbert Sweat, Vietnam War veteran, Veteran Service Officer, and Coordinator in Manhattan Veterans Court

Unknown for Elizabeth Malkey

Siya Hegde, Human Rights lawyer at the National Homelessness Law Center

Laureena Novotnak, Senior Attorney with Mental Hygiene Legal Service in the Appellate Division First Department

Sean Ramdhanie, Program Director of Borden Avenue Veterans Residence

Joelle Ballan-Schwan, Supportive Housing Network of New York

Aaron Horth, attorney with Legal Services NYC

Will Watts, Legal Aid Society and Deputy Executive Director for Advocacy at Coalition for the Homeless

Richard Degen

Andrew

Dinah Luck, Senior Staff Attorney at Mobilization for Justice and a SHOUT ally

COMMITTEE ON GENERAL WELFARE JOINTLY WITH COMMITTEE
ON MENTAL HEALTH, DISABILITIES AND ADDICTION JOINTLY
WITH COMMITTEE ON VETERANS JOINTLY WITH COMMITTEE ON
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1
2 SERGEANT-AT-ARMS: This is a prerecorded
3 test for the Committees on Veterans jointly with the
4 Committee on Mental Health and Addiction together
5 with General Welfare and Housing and Buildings, being
6 recorded by Dane Hope in the Chambers of City Hall.

7 SERGEANT-AT-ARMS: Good afternoon and
8 welcome to the New York City hybrid hearing of the
9 Committees on General Welfare together with Housing
10 and Buildings jointly with Mental Health,
11 Disabilities and Addiction and Veterans.

12 Please silence all electronic devices.

13 If you have any questions, please raise
14 your hand and one of us, the Sergeant-at-Arms, will
15 kindly assist you.

16 At no time during this hearing are you
17 allowed to approach the dais.

18 Thank you for your kind cooperation.

19 Chairs, we are ready to begin.

20 CO-CHAIRPERSON AYALA: [GAVEL] Good
21 afternoon, everyone, and welcome to today's hearing.
22 My name is Diana Ayala, and the I am the Deputy
23 Speaker of the New York City Council and the Chair of
24 the General Welfare Committee.

25

1
2 Today we are holding an oversight hearing
3 on the supportive housing in New York City together
4 with the Committee on Mental Health, Disabilities and
5 Addition Chaired by Council Member Linda Lee, the
6 Committee on Housing and Buildings Chaired by Council
7 Member Pierina Ana Sanchez, and the Committee on
8 Veterans Chaired by Council Member Robert Holden.

9 We will also be hearing Intro. 1153
10 sponsored by Council Member Sandy Nurse. Intro. 1153
11 relates to reporting on sweeps of individuals
12 experiencing homelessness on our streets. Council
13 Member Nurse will hopefully be able to join us. She's
14 actually next door finalizing her own hearing, but we
15 hope to hear from her soon.

16 Supportive housing is a form of
17 affordable housing that offers residents access to
18 on-site support in order to help low-income people
19 and those experiencing homelessness and/or disability
20 live independently in the community. Services in
21 supportive housing vary depending on the needs of the
22 population but may include mental and medical
23 healthcare, vocational and employment services,
24 childcare, independent living skills training, and
25 substance abuse counseling. We know that supportive

1 housing is the important model that we have for
2 ending homelessness among vulnerable populations. In
3 November 2015, Mayor de Blasio announced that the
4 City would provide 2.6 billion in capital funding to
5 develop 15,000 units of supportive housing over the
6 next 15 years. Since 2014 through June 2023, the City
7 has financed over 11,000 congregate supportive
8 housing units funded under previous programs
9 including NYC 15/15 and New York/New York III as well
10 as other state and federal resources. These are
11 desperately needed units and, unfortunately, the need
12 remains significantly higher than what has been
13 produced since the launch of 15/15. We know that
14 supportive housing is one of the most effective
15 methods that the City has to curb homelessness and
16 yet, while the demand for supportive housing
17 continues to increase, we understand that there are
18 thousands of units sitting vacant. We also know that
19 there are many barriers to entering supportive
20 housing, particularly for the most specifically
21 marginalized populations. A recent report submitted
22 to the Council pursuant to Local Law 3 of 2022 showed
23 extremely low placements for transgender applicants,
24 street homeless residents, and non-English language
25

1 speakers. Today, we want to evaluate the City's
2 progress in developing supportive housing units and
3 discuss what strategies are in place to ensure those
4 who are the most vulnerable have access to supportive
5 housing. I look forward to hearing from the
6 Administration and advocates today and gathering
7 feedback on this oversight topic as well as on Intro.
8 1153.
9

10 At this time, I'd like to acknowledge my
11 Colleagues who are here, Council Member Lee, Council
12 Member Holden, Sanchez, Brewer, Riley, Carr, Hudson,
13 and Restler.

14 I'd also like to thank the Committee
15 Staff who worked hard to prepare this hearing, Aminta
16 Kilawan, Senior Legislative Counsel; David Romero,
17 Legislative Counsel; Penina Rosenberg, Policy
18 Analyst; Julia Haramis, Unit Head; and finally my
19 Staff, Elsie Encarnacion, Chief-of-Staff.

20 I would now like to call on my fellow Co-
21 Chairs, Council Members Sanchez followed by Lee and
22 then Holden to deliver their opening remarks.

23 CO-CHAIRPERSON SANCHEZ: Thank you so
24 much, Madam Deputy, and good afternoon, everyone. I
25 am Council Member Pierina Sanchez, Chair of the New

1
2 York City Council's Committee on Housing and
3 Buildings. Thank you to the Co-Chairs for holding
4 this joint hearing on supportive housing.

5 As we continue to identify solutions to
6 the city's affordable housing crisis, I must start by
7 saying that I am proud of the work and emphasis that
8 our legislative body has placed on the form of
9 housing that houses New Yorkers with the most acute
10 needs, our supportive housing system. Across the
11 city, 32,000 supportive housing units are not quite
12 enough. We do need to build more, and we must also
13 ensure that we are adequately and swiftly placing
14 individuals in available units. As Deputy Speaker has
15 just mentioned, as of June 2023, more than 2,600
16 supportive housing units were vacant citywide while
17 more than 7,000 individuals have sought placement in
18 supportive housing units throughout this
19 administration.

20 Supportive housing plays a vital role in
21 the housing landscape in New York City. We can
22 discuss the need for affordable housing and what we
23 can do to house more New Yorkers, but we have to
24 ensure that we are providing enough housing for those
25 who, as I mentioned, need it the most. We can see the

2 interplay of various City agencies and State agencies
3 in supportive housing landscape just through the
4 Committees that are Co-Chairing this hearing.

5 Supportive housing spans the wide spectrum of City
6 services and congregate settings and Scattered-Site
7 settings, and agencies from production and rental
8 assistance administered by HPD as well as DOHMH
9 contracting with providers to offer relevant
10 services. In the ideal world, these agencies are all
11 working together seamlessly to provide wraparound
12 services and housing to vulnerable populations in a
13 timely and efficient manner. Supportive housing units
14 would not be seating vacant, and residents would
15 receive the services and supports that they need to
16 remain in their homes.

17 We know that supportive housing is an
18 effective solution. It can provide stabilization for
19 individuals who are able to stay in their homes for
20 longer, those who had struggled with chronic
21 homelessness, and by saving in City services we know
22 from the provider community that 10,000 dollars on
23 average is saved per individual that is housed in a
24 supportive housing setting.

1
2 In recognition of the importance of
3 supportive housing, the City and State have worked
4 together through the years to produce more of it
5 through the New York/New York agreements and the New
6 York City 15/15 agreement. In fact, just like year
7 HPD reported the highest homeless and supportive
8 housing production numbers on record. This is notable
9 in the year where affordable housing production
10 starts and completions were trending downward, and we
11 look forward to hearing more from the Administration
12 about how you have been able to advance supportive
13 housing production and how we are going to improve on
14 lease-ups.

15 I would like to thank my team, my Chief-
16 of-Staff, Sam Cardenas; Kadeem Robinson, our
17 Legislative and Communications Director as well as
18 the Housing and Buildings Committee Staff, Taylor
19 Zelony, Claire MacLachlan, Jose Conde, Andrew Bourne,
20 Dan Kroop, and Brooke Frye.

21 I will turn it back to the Speaker to
22 call on the next Chair. Thank you.

23 CO-CHAIRPERSON AYALA: Thank you. I want
24 to recognize that we've also been joined by Council
25 Members Ung, Ariola, and Cabán.

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We will now hear from Council Member Lee.

CO-CHAIRPERSON LEE: Thank you, Chair.

Good afternoon. My name is Council Member Linda Lee,
and I am the Chair on the Committee of Mental Health,
Disabilities and Addictions.

I want to thank my Colleagues, Deputy
Speaker Ayala, Chair of the General Welfare
Committee, Council Member Sanchez, Chair of the
Housing and Buildings, and also Council Member
Holden, Chair of Veterans, for being here today for
this joint oversight hearing.

As we know, housing is a priority concern
for all New Yorkers but for those diagnosed with
serious mental illness, having access to safe and
affordable housing is the cornerstone of recovery
and, as we know, housing is one of the most
important, if not one of the most important, social
determinants of health, especially when we're talking
about mental health recovery. In New York City,
nearly 1 in every 25 adults lives with a diagnosed
serious mental illness. According to the U.S.
Department of Housing and Urban Development, in
January 2020 about 17 percent of all unhoused New
Yorkers had a serious mental illness, 17 percent, a 4

1 percent increase from 2015, and this number has
2 likely increased since the onset of the pandemic.
3 Supportive housing has shown to improve mental health
4 outcomes and substance abuse issues, but it can also
5 yield significant taxpayer savings by reducing the
6 demand for high-cost shelters, hospitals, and other
7 emergency resources. As we all know, preventative
8 services and the more preventative services we have,
9 the more funds can be saved.
10

11 I look forward to hearing more from the
12 Administration about their current efforts in this
13 area as well as the dedicated advocates and community
14 members here today to testify with us.

15 I also want to thank my Colleagues and my
16 Staff as well as the Committee Staff, Community
17 Counsel Sara Sucher sitting to my left and Senior
18 Legislative Policy Analyst Cristy Dwyer for their
19 work on this hearing.

20 Thank you so much, Deputy Speaker.

21 CO-CHAIRPERSON AYALA: Thank you. Council
22 Member Holden.

23 CO-CHAIRPERSON HOLDEN: Thank you. Good
24 afternoon and welcome to today's hearing. I am
25

1
2 Council Member Robert Holden, Chair of the Veterans
3 Committee of the City Council.

4 I would like to start by thanking my
5 Colleagues, Deputy Speaker Ayala, Chair Lee, and
6 Chair Sanchez for helping to put together this
7 important hearing on supportive housing.

8 According to HUD, over 33,000 veterans
9 nationwide experienced homelessness in 2022.
10 Nationally, 20 out of 10,000 veterans experienced
11 homelessness in 2022, higher than the overall
12 homeless rate which is 18 out of every 10,000 people.
13 Supportive housing, as was mentioned, is considered
14 the most successful existing model for ending
15 homelessness among vulnerable populations and is a
16 primary permanent housing option for homeless single
17 adults. Despite this, there is very little publicly
18 available data on the currently available supply and
19 utilization of supportive housing units for veterans
20 in New York City so I look forward to today's
21 discussion on supportive housing in New York City and
22 hope we can identify ways to connect more New Yorkers
23 to the support and care they need, especially our
24 veterans who've earned it by the way. I mean, come
25

1 on, they've earned everything. They should have their
2 own place.

3
4 Our commitment to aiding homeless
5 veterans is a testament to our gratitude for their
6 service, as I mentioned, and it is our collective
7 responsibility to honor their sacrifices by providing
8 a pathway to stability and fulfillment as they
9 navigate their journey at home.

10 Also, I extend my thanks to the Committee
11 Staff who have prepared for this hearing, David
12 Romero on my left, an eight-year veteran of the Armed
13 Service; Anastassia Zimina, Policy Analyst, my Staff,
14 Daniel Kurzyna.

15 I will now turn it back to Deputy
16 Speaker.

17 CO-CHAIRPERSON AYALA: Thank you. We will
18 now hear from Council Member Nurse who will speak on
19 her bill, 1153.

20 COUNCIL MEMBER NURSE: Good afternoon.
21 Thank you so much, Chair Ayala. Thank you for your
22 time and your advocacy in bringing Intro. 1153 to a
23 hearing today. I very much appreciate it.

24 Nobody chooses to sleep on the street.
25 Street homelessness is not due to someone's choices,

1 habits, or moral shortcomings. More than anything, it
2 is a failure of government policy. For decades, New
3 York City has been regularly removing homeless people
4 from the public eye with little transparency or
5 accountability. Contrary to what we may hear today,
6 we do not need to conduct sweeps to connect people
7 with housing or other life-saving services. Sweeps,
8 clean-ups, and other forms of removal in fact
9 undermine the City's effort to connect people with
10 housing. They result in the destruction of people's
11 private property, civil and human rights abuses, and
12 separate people from their care and support networks.
13 Above all, they do nothing to actually solve
14 homelessness.

16 This bill is a first step to bring basic
17 transparency to this harmful counterproductive
18 practice. Intro. 1153 is very simple. It will require
19 regular reporting on homeless removals. These reports
20 will show how removals were initiated, the number of
21 people affected by a removal, how many agency staff
22 were involved, and how much each sweep or clean-up
23 could cost. We do not know exactly how much the City
24 spends on sweeps per year and, as the Mayor pushes
25 for more and more cuts, we should keep in mind that

1 every single dollar we spend on sweeps is one less
2 dollar for housing and one less dollar for outreach
3 to homeless individuals. The public deserves to know
4 how our money is being used to displace rather than
5 house homeless people.
6

7 The bill also requires reporting on how
8 many people were involuntarily detained through each
9 action, whether or not anyone was arrested, and if
10 people were offered housing vouchers or direct
11 housing placements. Since coming into office, the
12 Mayor has falsely argued that sweeps and clean-ups
13 are effective, indeed necessary, to connect people to
14 permanent housing. However, in a recent audit,
15 Comptroller Brad Lander found that of the 2,300
16 people affected by sweeps conducted between March 21,
17 2022, and November 30th of the same year, only three
18 people were eventually placed in permanent housing,
19 but these people were placed into housing after being
20 placed in temporary shelter, not directly from the
21 sweep, and by any measure, sweeps and clean-ups
22 continue to be a failure.

23 I want to thank Council Member Shahana
24 Hanif for partnering with us on this bill as well as
25 the organizations who worked with us to craft this

1 language over many, many months, almost a year,
2 Safety Net Project, Vocal New York, Legal Aid
3 Society, Coalition for the Homeless, Mobilization for
4 Justice, and more. You and those you represent have
5 to suffer the daily reality of sweeps, and I thank
6 those who are testifying today. Thank you.
7

8 CO-CHAIRPERSON AYALA: Thank you. I want
9 to recognize that we've also been joined by Council
10 Members Dinowitz, Hanif, Feliz, Williams, Stevens,
11 and Bottcher.

12 With that, I'm going to turn it over to
13 Committee Counsel who will call up our first panel.

14 COMMITTEE COUNSEL KILAWAN: Good
15 afternoon, everyone. My name is Aminta Kilawan,
16 Senior Counsel to the Committee on General Welfare at
17 the City Council. I am going to be moderating today's
18 hearing and calling on panelists to testify.

19 We are going to begin with a public panel
20 comprising of Corey O'Connor, Cheryl Burnett, Katrina
21 Corbell, and Sean Murray. You all can come up, and we
22 will be allowing members of the public two minutes to
23 testify, but you can, of course, submit your full
24 written testimony as well at
25 testimony@council.nyc.gov.

Is James Doukas here? Thank you.

All right, you may begin when ready.

CO-CHAIRPERSON AYALA: Make sure that the
light is on on your mic.

COREY O'CONNOR: Good afternoon, Chairs
Ayala, Lee, Sanchez, and Members of the joint
Committee. My name is Corey O'Connor. I am currently
a supportive housing tenant and a member of
Supportive Housing Organized and United Tenants of
New York City, also known as SHOUT NYC. SHOUT has
been around for over two years and is the first and
only supportive housing applicant and tenant-led
group organizing for the dignity and rights of those
living and applying for supportive housing in New
York City. Since its inception, SHOUT has advocated
for and passed Local Laws 3 and 15 of 2022 to
increase transparency regarding discriminatory
rejections from supportive housing and to require a
supportive housing tenant notice of rights.

Our coalition is glad to see City
agencies begin to modify their approach towards the
problematic behavior exhibited by some providers in
response to our efforts. We will continue to amplify
our members' grievances until we have a more

1
2 accountable and truly supportive supportive housing
3 system. That is why I am here today.

4 According to anecdotes from SHOUT
5 members, many providers have failed to uphold basic
6 protections of tenants under the ADA, the Fair
7 Housing Act, and federal HUD guidelines. Providers
8 have subjected many SHOUT members to uninhabitable
9 living conditions including failed requests to check
10 for and remediate mold, fix leaks, or relocate
11 roommates after safety concerns. Many SHOUT members
12 have gone months without support from caseworkers.
13 Furthermore, members face issues with providers
14 violating members' rights to tenancy such as the
15 right to possess keys to our own buildings and
16 wrongfully entering into our premises without prior
17 notice.

18 In high-need congregate settings, many
19 tenants do not even have lease agreements to protect
20 them. Instead, they have occupancy agreements that do
21 not afford our members the same rights to lease
22 renewals, due process, or protections for good cause
23 eviction proceedings.

24 That is why SHOUT members came together
25 and launched our S.A.F.E. campaign this year.

1
2 S.A.F.E. stands for Safe, Accountable, and Fair for
3 Everyone. Our campaign demands fundamental reforms to
4 New York City's supportive housing system and
5 accountability to tenants and applicants. For the
6 sake of time, I encourage Council to review the
7 detailed list of demands that we will submit with our
8 written testimony.

9 In short, DOHMH must stop building as
10 usual if their true goal is to hold the entities they
11 contract with and oversee accountable. Yet, for far
12 too long, these agencies gave too much deference to
13 industry lobbyists and providers on the rules and
14 procedures of the supportive housing systems. These
15 powerful government options must stop contracting
16 with bad actors who repeatedly violate housing and
17 human rights laws. Instead, agencies must require
18 that providers follow transparent and fair procedures
19 when making demands from tenants. They must also
20 create a meaningful grievance process and hire
21 adequate staff to investigate and act upon said
22 findings. These government agencies cannot even state
23 that they were unaware of these issues because, since
24 announcing and laying out the demands for our
25 S.A.F.E. campaign, SHOUT members have met with dozens

1 of City and State officials and legislators,
2 including representatives from the Mayor's Office.

3 Some of these meetings even occur at a regularly
4 monthly cadence. On the provider side, we have also
5 met with representatives from SHNNY and HASA so there
6 is no excuse for the lack of reform.
7

8 In addition to accepting and implementing
9 our S.A.F.E. campaign demands, the City needs to
10 ensure that the Local Laws we passed are being well
11 implemented. This means that tenants should have
12 adequate opportunities to access their supportive
13 housing notice of rights. It means that reported
14 numbers of acceptances, referrals, rejections, and
15 any discriminatory findings will be addressed and
16 will inform future processes.

17 Our testimonies today represent the
18 perspectives of supportive housing applicants and
19 tenants who have been universally sidelined in
20 policies and procedures but who face the consequences
21 of disinvestment, neglect, discrimination, and
22 harassment more intensely than any other stakeholder.
23 SHOUT knows that applicants and tenants deserve more
24 from the systems that are supposed to support us
25 through our journeys. We hope Council sees this today

1 and takes measures to ensure that all supportive
2 housing tenants across the city have access to stable
3 and safe housing that meets their physical and mental
4 health needs. However, we assert that such is only
5 possible through the effective adoption and
6 implementation of SHOUT's S.A.F.E. campaign demands
7 and through Council's enforcement of Local Law 3 and
8 15 of 2022. Thank you.

10 SEAN MURRAY: Hi, my name is Sean Murray.
11 I have been living in supportive housing for 10
12 years. I just changed my testimony so we could talk
13 about Local Law 3 and discrimination.

14 My housing provider explicitly refused to
15 provide me a bed in supportive housing because I was
16 gay in my interview. I emailed CUCS and SHNNY about
17 the discrimination when I got discharged from the
18 psych ward. Neither responded so I went to the Human
19 Rights Commission who nailed the provider and forced
20 them to give me a Scattered-Site apartment. CUCS,
21 what they did was they forwarded the email to my
22 provider. There was no response to anything that I
23 said from anybody except the Human Rights Commission.
24 The provider then was preparing for the lawsuit. This
25 is exactly how DOHMH, OMH, and CUCS manage their

1 complaints. We make a complaint. They send it to the
2 precise person that we are complaining about for a
3 just resolution. This is both their policies. Anyway,
4 my supportive housing voucher has a max monthly rent
5 of 1,300 dollars. New vouchers are tied to HUD.
6 Section 8 and CityFHEPS are tied to HUD. They also
7 require inspections before moving in. Supportive
8 housing does not. I was placed in an apartment that
9 would not have passed those inspections. I was made
10 to spend 500 dollars on a top lock and a fire escape
11 gate. The window was screwed shut when I moved in,
12 and they said oh, I could live there with the window
13 screwed shut, but if I wanted a gate, I had to pay
14 for it. They tacked it onto my rent for like six
15 months. Anyway, this is illegal, and then they made
16 me sign a paper saying that any repairs that required
17 my apartment going forward would be paid for by me,
18 not the landlord, not the provider, me. I started
19 calling 3-1-1. My apartment was like kind of
20 completely renovated. They gut renovated my bathroom
21 because I'm old. The electrical system was like not
22 up to code with glass fuses. My provider is saying
23 he's anxious, this is his mental illness. HPD came in
24 and the work got done. Nothing happens from my
25

1 provider. Anyway, basically all you all got in a
2 backroom and agreed that you would throw thousands of
3 supportive housing tenants under the bus by not tying
4 our vouchers to HUD. You have providers that are
5 making tenants sign documents that if our rent goes
6 over 1,300 dollars with our rent stabilization that
7 we are responsible for the excess. This is illegal.
8 They're doing it. They basically do this because we
9 are the most stigmatized group in the city and you
10 can literally dump us in apartments that you would
11 consider unsafe for Section 8 or for CityFHEPS and
12 we're all living there. There are 17,000 units in the
13 city. You need to actually inspect them.

14
15 Anyway, on to Local Law 3. A group of us
16 last spring went to the Healthy New York Conference,
17 and Moira Tashjian, the Deputy Executive Commissioner
18 of OMH, very bravely sat down at the table with SHOUT
19 and said lets said, which was great. I got in the
20 lunch line next to her because it was moving slowly,
21 and I started grilling her about the results of Local
22 Law 3. I told her that HUD considers language to be a
23 proxy for race and the recent CAPS data reveals that
24 the admissions process for supportive housing is
25 structurally racist because the SH population is not

1 at all representative of New York's population
2 because basically if you don't speak English, you
3 don't Spanish, you do not get in supportive housing.
4 The OMH official tells me what does it really matter
5 that we're not placing people without English
6 proficiency in supportive housing when there's a long
7 line of English speakers for every available
8 supportive housing bed, and I said you did not just
9 say that. She backpedaled. Anyway, I contacted the
10 Human Rights Commission last week, and they're like
11 you have a lawsuit. All we have to do is find people
12 who don't speak English who should be in supportive
13 housing and we can sue the City and the State, and
14 mostly you don't do anything for supportive housing
15 residents until you get sued. I am quite sure my
16 voucher came from a lawsuit. I mean you can wait for
17 people to get organized or you can actually like try
18 to fix it. Anyway, thank you.

19
20 CHERYL BURNETT: My name is Cheryl. I've
21 been involved with SHOUT for the past two months. I'm
22 a published author. I enrolled in (INAUDIBLE) College
23 for my bachelor's. I moved in supportive housing nine
24 years ago. I was homeless for 22 years. I was in a
25 place of disparity. It was not explained to me prior

1 to signing a lease that DOHMH was attached to this
2 apartment. I was later told by staff that I was
3 supposed to be placed in an apartment that was
4 attached to a Section 8 voucher. Everyone always says
5 oh I wasn't there when this happened to you, oh I'm
6 sorry that happened to you, oh I heard this story
7 before, but then they're gone, promoted, or fired and
8 replaced so I find myself giving account of these
9 events over and over again. I initially lived on the
10 seventh floor and people who lived over banged
11 constantly on their floor, which is my ceiling. I
12 filed many grievances. Nothing was done by staff
13 about the disturbances of my quiet time. I went to
14 court. I got the judge's order to relocate my
15 apartment to a vacant on the ninth floor with a hole
16 in the ceiling. Every time it rained, the ceiling
17 would leak. There have been several fires that left
18 the elevator out of order and the basement flooded.
19 There have been 14 resident deaths in nine years.
20 They have flies swarming that will follow you from
21 the lobby to the elevator and into your apartment
22 too. This went on for months before they got it under
23 control. In 2019, I wrote a book. The Director at
24 that time told me they would support this. I then
25

1 asked to speak to the CEO of this program. I brought
2 to his attention I wrote this book. I asked him would
3 he sponsor me. He stated if I agree to do 20 sessions
4 of therapy so I agreed. He gave me a check with his
5 authorized signature paid to the order of the
6 publishing company of my choice. In 2021, I received
7 a phone call from the CEO of this program. He asked
8 me if I would like to make some more money. I stated
9 doing what. He said the same thing you did before so
10 I made an appointment to visit him at his office once
11 again. On that day, I walked in his office, sat
12 across from him at his long table. I stated that if I
13 agree to your deal to do 20 more sessions for you,
14 would you do something for me. He said do what. I
15 said would you help me move into a mixed community
16 housing. That will be payment for me. You can keep
17 your money. He promised to help me, but I never moved
18 or got the second check. He lied. By this time, they
19 changed the director so I walked straight into her
20 office, sat down, told her out of confidentiality
21 what I had to live with and endure and how do I move
22 on. She stated it was against protocol to help me and
23 I would have to go to a shelter and start all over
24 again so I contacted the Program Specialist Office
25

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1 and Assembly Office. In this office, I was introduced
2 to SHOUT. I also reached out to (INAUDIBLE) and one
3 of the supervisors there stated go back to the
4 program where you live because they are the ones who
5 are supposed to help you so I made another attempt to
6 be mocked and ridiculed. I marched into the
7 Director's office. At this time, she was with the
8 Assistant Director, and I gave them the facts. The
9 Director stated to me are you sure you want to leave
10 supportive housing, you won't get any more benefits,
11 but I say today it's not a benefit to live in an
12 environment that's unrealistic. It's not a benefit to
13 be treated like a number or a statistic. It's not a
14 benefit to be limited when you're optimistic. Thank
15 you.
16

17 KATRINA CORBELL: Hello. My name is
18 Katrina or Kat as some of you know, last name is
19 Corbell. I have lived in supportive housing four
20 years next week. I've been in New York City for 12
21 years last month. Two minutes, based on our SHOUT
22 meetings being two hours, will barely lift the corner
23 of the pandora's box to glimpse at some of the issues
24 we in supportive housing face, have faced, continue
25 to face, let alone difficulties in applying to or

1 moving out of these units. Things I am betting the
2 lobbyists of supportive housing providers are going
3 to insist aren't problems, weren't problems, or
4 insignificant or they're working on it and need more
5 money to fix. Routine things we've been hearing for
6 years. One thing that I was thinking about is that
7 when there is a problem, one example for me was a
8 housing flood caused by an upstairs neighbor so it's
9 a building issue, a building issue like a lot of New
10 York City apartments. It took months to figure out. I
11 called 3-1-1. I was told to call 3-1-1. It's a New
12 York City feature. 3-1-1 couldn't figure out who my
13 housing provider was, like we knew who my housing
14 provider was but was it a DOHMH situation, was it an
15 OMH situation, who was supposed to enforce the fact
16 that my house was flooded and we needed to get it
17 addressed. 3-1-1 decided to transfer me to NAMI. NAMI
18 and I laughed about that, saying why does NAMI have
19 any responsibility to oversee why my housing provider
20 was not fixing a flood so yeah, NAMI and I chuckled
21 about that. Finally, we found out the unofficial
22 answer, at least for 2020, was to have DOHMH start
23 the process and DOHMH would take the responsibility
24 to then figure out if it was their problem or OMH's
25

1 problem. HPD would finally call and say is an issue
2 resolved. If I said no, they would say okay, let us
3 talk to your landlord and, in my case, I'm a
4 congregate setting so the landlord is the supportive
5 housing alleged provider, and they would say oh, of
6 course it's resolved. It would never get fixed
7 because HPD had an answer they were satisfied with,
8 and this situation in 2021, because I've had five
9 floods in a two-year period, the drip kept happening.
10 A year later, the pipe burst. The pipe burst lasted
11 for approximately, I'm not going to do the math
12 because I have less than two minutes left, from 9
13 p.m. until 7 a.m. By 7 a.m., the water out of the
14 pipe was scalding hot. My feet ended up becoming
15 burning. My cat and I had to evacuate the apartment,
16 and all we could find was like space in the basement.
17 I was promised to have stuff replaced. The only thing
18 I got replaced was a set of sheets to take with me to
19 the temporary housing that lasted for two weeks. I
20 never had anything else replaced. Stuff was thrown
21 away that should not have been thrown away, like my
22 dishes and my mugs in a kitchen cupboard that were
23 not affected by the flood. Other building issues I
24 wanted to bring are like they got grants to build an
25

1
2 ADA-accessible building. There's a ramp which is
3 great, but the door is so heavy I can barely open it.
4 Let alone the fact that I have arthritis, I have
5 fibromyalgia, I have torn ligaments in my hip and my
6 ankles, and the door is so heavy it takes oomph to
7 like open the door and keep it open to try and open
8 it, let alone if you have a knee scooter like I used
9 to have or a tenant across from me has an electric
10 scooter. Like how do they not just put in an ADA-
11 accessible, I should laugh about the fact that it
12 took a lot of energy to get into this room today, but
13 they have the grants, they were funded to build an
14 accessible building, ironically for veterans, and at
15 least four, if not six, of us in the building are not
16 veterans, but that's another issue for when I have
17 more than two minutes to talk about. A very recent
18 example is a keyring I bought ended up breaking so my
19 keys fell off my purse, and I accidentally left my
20 keys in my apartment so I needed the security guard
21 to let me in my apartment. He didn't know how to do
22 it so he said wait for his supervisor. It took over
23 three and a half hours before I gave up and went on a
24 Metro North train to sleep because that would be
25 padded, away from the elements where the trains were

1 nice and heated because it was freezing cold that
2 night because, after three and a half hours, I was
3 listening to a security guard threaten his girlfriend
4 on the phone, slamming his phone on the desk, totally
5 retriggering me, like traumatizing me, and I decided
6 that either standing outside or being luckily the
7 last train of the night took me as far north as it
8 went and I had to wait half an hour in the cold until
9 the first train took me back and, luckily then, a
10 program director was there and she let me know the
11 security guard had disappeared. She got there at 6:07
12 a.m. and the security guard was not there. This is
13 supposed to be supportive housing. For the first
14 seven months I lived there, I was told you are not in
15 supportive housing, you are in independent housing,
16 and I said no, I'm not, I am in supportive housing.
17 It took approximately seven or eight months until
18 finally I had to renew forms and the renewed forms
19 said supportive housing. I was able to win a point.
20 Silly, like child games, but I had to prove to the
21 case director and the program manager, who's now the
22 program director, that it was supportive housing.
23 They are paid for supportive housing. Where is the
24 support? That's what some of us just want. Some of us
25

1 that are trying to stay in supportive housing want
2 support. Some of us that want to leave want to move
3 on which more testimony is going to be about, but
4 where is the support in supportive housing? That is
5 what they are paid for, and that is not what the
6 tenants are receiving. We had to fight to be
7 recognized as tenants and some of the lobbyists that
8 you might hear from today were trying to fight to
9 deny us the right to be recognized as tenants. Like I
10 said, four years, I can beyond four days for the
11 problems I've had to go through in supportive
12 housing. Supportive housing was supposed to stabilize
13 my health. It has not, it has not stabilized my
14 health. I am grateful I do not have to live in the
15 shelter. I should not have had to live in the
16 shelter, but that's what I was told to do in order to
17 get into supportive housing because my supportive
18 housing application process started in 2012, and it
19 took until another provider suggested I apply and go
20 through the shelter system as the guaranteed way to
21 get into supportive housing because all of these
22 other agencies that say we'll help you, you don't
23 have to go into the shelter, we'll help you, we'll
24 help you never followed through. By then, my health
25

1 had worsened, domestic violence had increased, and I
2 needed to be safe from my ex, and the only way to be
3 safe from my ex was to enter a women's shelter
4 because I was denied access to domestic violence
5 shelter because I did not have children so the only
6 way to keep my emotional support animal safe was to
7 go into the City shelter, and I know that that's a
8 whole other plethora of City Council hearings for all
9 of the issues we have in the City shelters.
10

11 CO-CHAIRPERSON AYALA: Thank you.

12 KATRINA CORBELL: So we need to find ways
13 to get more support in supportive housing and like
14 listen to the tenants before taking however many
15 years it took to get this hearing because, as you
16 know from my past testimonies, every time I would try
17 to offer a testimony it would be well, that's more
18 supportive housing. It took years to get to this so
19 thank you for offering this hearing today, and let's
20 see what we can do moving forward to hold the
21 supportive housing providers and the supportive
22 housing application process more accountable to make
23 it more accessible for those who need it. Thank you.

24 CO-CHAIRPERSON AYALA: Thank you.

25

COMMITTEE COUNSEL KILAWAN: Our final
panelist for this panel will be James Doukas.

JAMES DOUKAS: Hi, how are you? Thank you,
ladies and gentlemen, for taking the time to hear me.
I have to give you a little bit of history so you
understand the situation. Both my fiancée and I were
employed gainfully, and COVID hit and we were
therefore were unable to maintain our jobs. I worked
as a waiter at a place, and we were living separate
at the time. We moved in together and we were
subleasing from someone that we had no idea was in
eviction court. After giving him a couple months'
rent in advance and all that, we were evicted and all
our stuff and our belongings were lost. We ended up
homeless. We were living in a tent for a while. Me, I
guess because of pride, I was too proudful to think
that I needed help, and people reached out to us, the
Wall Street Journal did an interview, and they placed
us into the homeless shelter system. While we were
there, we were there for nine months, we never had an
incident, we never had a problem. The staff that was
there was very abrasive towards us, and we, I don't
want to say it was a racial issue, but the people
there didn't take kindly upon the fact that two white

1 people were in a place that was predominantly black
2 and we were there for special favored reasons because
3 somebody made a phone call so they thought we were
4 getting special favoritism. They said that we had a
5 domestic incident and discharged us. There was never
6 a police report. There has never been a domestic
7 incident. There is nothing in their logbooks or
8 anything stating that there was a domestic incident,
9 and we were put on the street again. Up until three
10 days ago, I was living in a tent on the Manhattan
11 Bridge for almost three months. They came and did a
12 sweep. They placed us back into a shelter again
13 finally. They wouldn't let us go because I didn't
14 have a copy of her divorce decree, and they wouldn't
15 place us into a domestic partnership. She's been
16 through some terrible experiences and traumatized and
17 has PTSD, and I pretty much take care of her. They
18 finally placed us in some place, and I had left the
19 tent and all of our belongings in little bins and
20 stuff like that with people to watch, and Sanitation
21 came and they did a sweep and a clean-up and threw
22 away all of our belongings so now I have nothing
23 other than pretty much the clothes on my back and a
24 few other things and so does she, and they placed us
25

1 all the way in Brooklyn and we're there for a special
2 favored reason again, and we're already receiving a
3 lot of animosity and aggravation. What I want to be
4 here and try to bring to light is that people that
5 are homeless, I was never a homeless person, I worked
6 my whole life. I ended up in a terrible situation and
7 people don't understand the momentum and the gravity
8 of that once you get to a certain point, you can't
9 get out of it, and it's a bunch of red tape and hoops
10 that they want you to jump through and I have no
11 problem doing what I'm supposed to do, but justice
12 moves too slow and they're making it criminal to be
13 homeless. Every three days, they would come and they
14 would make me move everything that I own, which to
15 break down a tent and do everything, would take me
16 over three and a half hours to move it across the
17 street and, when they leave, I would go put it back
18 up and they'd come three days later, they wouldn't
19 even post to let me know that they were coming and
20 they'd be mad at me that I was taking so long. It's
21 not criminal to be homeless. I'm not trying to do
22 something illegal. I'm trying to just keep shelter
23 over my head and make sure that we're okay. We're
24 placed in Brooklyn, yet all our doctors, I'm

1 disabled, she has mental issues, and they placed us
2 far away from our program, from our doctors. We're
3 all the way out in Brooklyn, and we're trying to move
4 back to Manhattan and that process is taking forever
5 as well, and they said that they don't think that
6 placement might happen. What's going to happen in
7 three weeks from now when the month is up and we end
8 up back on the street again? I really think it needs
9 to be brought to light that just because someone is
10 deemed homeless, you can't just abandon them. I've
11 paid taxes my whole life. That's the reason why these
12 things are in place. This is why the City Council
13 meeting is here, for the people, right, so why are
14 the people being neglected? That's what I want to
15 know. I know I'm only supposed to take two minutes.
16 Thank you for your time and attention. Have a great
17 day.

18
19 CO-CHAIRPERSON AYALA: Thank you. Thank
20 you all for coming in and sharing your experiences
21 with us because you're speaking on behalf of a whole
22 population of folks that probably don't have the same
23 connections, that are not organized in the same way
24 that you are so I really appreciate your advocacy,
25 not only on your behalf but on behalf of your co-

1 residents, and it's really wonderful to meet some of
2 you in person. I know I've had the opportunity to
3 meet with you via Zoom so I'm really proud of your
4 testimony here today and happy that we were able to
5 finally get this hearing on the calendar.
6

7 I have a question regarding Local Law 15,
8 which was passed in 2022, that requires that DSS
9 create a supportive housing tenants' bill of rights.
10 Are any of you familiar with the tenants' bills of
11 rights? Does it exist?

12 SEAN MURRAY: Yes, it's something we're
13 very familiar with.

14 CO-CHAIRPERSON AYALA: So it is up, yes?

15 SEAN MURRAY: Can I illustrate a problem?
16 The agencies and the housing providers do not want us
17 to know who funds our program because you can only
18 complain if you know who funds your program. They are
19 absolutely controlling, so you can only get the
20 tenants' bill of rights, like I thought my provider
21 was DOHMH but they were OMH, and I emailed the
22 director of my program and I said we haven't received
23 the tenants' bill of rights like you're supposed to
24 give to us. It goes back and forth and back and
25 forth. She said no, I gave it to you, and I had been

1 traveling. I got home, and I'm like no, I never got
2 this, and then she said oh, I don't have to give this
3 to you because I'm an OMH provider, and SHNNY is
4 telling the providers oh, you should follow, you
5 should give them the tenants' bill of rights. Oh, no
6 they don't, and OMH is absolutely resisting something
7 comparable because they also don't want to give us
8 basic rights of tenancy.
9

10 CO-CHAIRPERSON AYALA: So the bill of
11 rights is handed to you via document but it's not
12 posted in the building?

13 SEAN MURRAY: I'm not sure. I think it's
14 supposed to be both, and you're supposed to get it
15 like quarterly.

16 COREY O'CONNOR: It's supposed to be the
17 lease signing, at move-in, and upon request, and it
18 lists specifically whether your particular apartment
19 is DOHMH-funded or OMH-funded. It's also giving you
20 other information like whether the apartment is rent-
21 regulated, rent-stabilized, basic information about
22 how to file a grievance and the particular process,
23 and often tenants are not being given this
24 information.
25

1
2 SEAN MURRAY: And the only way to actually
3 get it is you have to know you have to call 3-1-1 and
4 you have to get transferred to DOHMH and then you'll
5 get a person who will then get back to you telling
6 you how you can complain.

7 KATRINA CORBELL: Some of us, in my case
8 for instance, I think there's a five-month period to
9 allow it to become enforceable, the law, and I
10 started asking my landlord immediately, and they
11 started to say oh, I don't know, I haven't heard
12 about it, and I just started chuckling because SHOUT
13 is part of the law becoming law, and so I said well,
14 you should get to know about it, and then literally
15 the day after it became enforceable I said can I have
16 a copy of tenants' bill of rights or supportive
17 housing tenants' bill of rights. They still hadn't
18 heard about it, and then they tried to say it wasn't
19 applicable to me and blah, blah, blah. There is no
20 way to enforce the law apparently which has been more
21 conversations we've had. It took until May of 2023
22 before I was finally handed my not completely or
23 accurately filled out tenants' bill of rights but I
24 laughed because my lawyer was with me. Like look at
25 the work we've done even though it's still far from

1
2 being complete or accurate, but it was still nice to
3 see the people who said it wasn't applied to them
4 finally starting to take baby steps to comply with
5 the law.

6 CO-CHAIRPERSON AYALA: Okay. I appreciate
7 that.

8 Yes?

9 CHERYL BURNETT: Actually, I found out
10 because I had a two-hour meeting with the program
11 specialist. He actually came to visit me, and the
12 director sat in with us of the program, and so he
13 informed me, I've now lived there for nine years, and
14 finally now this year, that I was supposed to be
15 placed in the apartment (INAUDIBLE) Section 8 voucher
16 into independent housing, but they put me under
17 DOHMH, and he said that they had laws that's now
18 that's different then. Actually, before I signed the
19 lease, if they would've told me this was permanent
20 housing for the severe mental and stuff like that, I
21 would not have signed it because what I did for nine
22 years, that person (INAUDIBLE) I would love to do
23 better for myself. I'm always looking to excel in my
24 life. I'm looking to prosper. I'm not looking to be
25 stagnated or to be somewhere to watch people that

1 (INAUDIBLE) themselves, and that's the conditions I
2 had to live under for nine years. When I had that
3 visit by him, he said well, laws changed from the
4 time, they couldn't do that to someone what they done
5 to you nine years ago today because the law has
6 changed today, you would actually know. They gave me
7 an example like if you were to go to a doctor's
8 office and you was to have surgery and knew there was
9 a chance that you were going to die they would have
10 to tell you that, and so I'm like wow, this just
11 (INAUDIBLE)
12 (INAUDIBLE)

13 CO-CHAIRPERSON AYALA: Thank you. Thank
14 you so much.

15 We have to move on because we have quite
16 a number of people that still have to testify and a
17 number of Council Members that would love to ask
18 questions as we get to understand a little bit better
19 what the gaps in services are. Thank you, guys, so
20 much. I'm so proud of you.

21 I want to acknowledge that we've also
22 been joined by Council Members Avilés, Paladino, and
23 Abreu.

24 COMMITTEE COUNSEL KILAWAN: We're now
25 going to call up members of the Administration, Emily

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Lehman, Mike Bosket, Jamie Neckles, Jason Loughran,
and Lamarr Wheeler.

Can you all please raise your right hand?

Do you affirm to tell the truth, the
whole truth, and nothing but the truth before these
Committees and to respond honestly to Council Member
questions?

ADMINISTRATION: I do.

COMMITTEE COUNSEL KILAWAN: You may begin
when ready.

DIRECTOR BOSKET: Good afternoon. My name
is Mike Bosket, and I serve as Executive Deputy
Commissioner of the Employment and Support Services
Administration at the Department of Social Services
Human Resources Administration. I would like to thank
Chairs Ayala, Holden, Lee, and Sanchez, and the
Members of the Committees of General Welfare,
Veterans, Mental Health, Disabilities and Addiction,
and Housing and Buildings for holding today's
hearings on supportive housing in New York City.

I would also like to acknowledge my
fellow panelists, Jamie Neckles, Assistant
Commissioner for the Bureau of Mental Health
Department of Health and Mental Hygiene; Emily

1
2 Lehman, Assistant Commissioner from the Division of
3 Special Needs Department of Housing Preservation and
4 Development; Lamarr Wheeler, Senior Director of
5 Housing and Support Services at the Department of
6 Veteran Services, and would also like to acknowledge
7 and thank the members of the prior panel.

8 Supportive housing provides permanent
9 affordable housing for individuals and families who
10 experience long-term homelessness and who have varied
11 needs, including complex behavioral and health needs.
12 We know that supportive housing works. Positive
13 outcomes are evident in the lives of the individuals
14 and families that reside in these settings. Within
15 these high-quality living environments, tenants
16 receive the tools and supports necessary to achieve
17 their greatest level of independence. Supportive
18 housing staff, including case workers and clinicians,
19 and community partners collaborate to address the
20 immediate and long-term needs of supportive housing
21 tenants, including health, behavioral health,
22 substance misuse, economic, emotional, and any
23 combination of these needs. By offering a continuum
24 of integrated services to assist vulnerable
25 individuals and families transitioning from

1 homelessness, supportive housing fosters greater
2 stability, independence, improved health and mental
3 health and dignity. Our supportive housing efforts
4 continue to be effective. From Fiscal Year 2022 to
5 Fiscal Year 2023, referrals have gone up by 38
6 percent, viewings by 51 percent, and, most
7 importantly, 46 percent more New Yorkers were
8 connected to permanent supportive housing.
9
10 Approximately 94 percent of all supportive housing
11 units are occupied by long-term tenants, comparable
12 to pre-pandemic occupancy levels.

13 There are two types of supportive
14 housing, single site and scattered site. In single
15 site supportive housing, also often referred to as
16 congregate supportive housing, each individual or
17 family has private living and sleeping quarters and
18 may share kitchens or common rooms, recreation rooms,
19 or other facilities. These sites usually have
20 supportive services provided in the same building and
21 may be a blend of supportive housing and affordable
22 housing.

23 In scattered site supportive housing, the
24 units are in building that are spread throughout New
25 York's neighborhoods and communities. The tenants

usually live at a higher level of independence with most support services provided in their home as needed. The object of both single and scattered site housing is to integrate these tenants into their local communities.

In supportive housing, a family or individual pays no more than 30 percent of their income towards rent, making it truly stable and affordable housing. Participation in services is voluntary and not required to maintain tenancy. However, tenants are encouraged to take advantage of the transformative services offered.

Support services may include case management, educational, vocational, or recovery-oriented services, support and developing skills for self-sufficiency, individualized service planning, supportive counseling, assistance to access community services and government benefits, referrals to medical and behavioral healthcare and treatment, medication management, and support obtaining other needed services such as legal supports.

HRA's Office of Supportive and Affordable Housing Services, OSAHS, is focused on permanent housing solutions for individuals and families who

1 have experienced homelessness. Working closely with
2 other HRA divisions, partner agencies like the
3 Department of Health and Mental Hygiene and the
4 Department of Housing Preservation and Development,
5 and with not-for-profit housing providers, OSAHS
6 helps to vet proposed supportive housing projects and
7 manage the placement process for units that are
8 already built. This unit serves as a centralized
9 source for referral for more than half of the
10 supportive housing units available citywide and is
11 focused on filling vacant units as quickly as is
12 possible.
13

14 So far in Calendar Year 2023, we have
15 helped rent up more than 800 new high-quality
16 supportive housing units and have placed close to
17 1,000 clients in existing re-rental units. We
18 continue to aggressively expand supportive housing
19 capacities and efficiencies through the coordinated
20 assessment and placement system, improvements which
21 include enhanced coordination with our partners and
22 reduction of bureaucratic barriers.

23 As previously stated, 94 percent of our
24 supportive housing units are occupied, many by long-
25 term tenants. We are proud of this number which means

1 that more than 30,000 individuals and families who
2 previously experienced long-term homelessness are now
3 in stable supportive housing. These individuals and
4 families are connected to the resources they need to
5 participate in their lives more fully.

6
7 OSAHS uses the Coordinated Assessment and
8 Placement System to make these process as efficient
9 as is possible. CAPS was established in October of
10 2020 as a result of the U.S. Department of Housing
11 and Urban Development, HUD, mandate for those
12 receiving federal funding for homeless services to
13 streamline the way people from homeless services into
14 permanent housing. It is a web-based platform that
15 allows users which includes those completing
16 applications for supportive housing, housing
17 providers, shelters, OSHAS, and other placement
18 entities to centrally access the coordinated
19 assessment system, New York City's supportive housing
20 application, and our vacancy control system. Having
21 the entire process from application to determination,
22 referral, placement, occupancy, vacancy, and other
23 unit status has greatly improved the process and
24 timelines from application to move-in. When reviewing
25 vacancy data from CAPS, it's important to note that

vacancies represent only a small share of the
supportive housing units. Many of these vacancies
also have an individual or family identified to move
into or linked to that unit but have not yet moved in
while they complete the steps to move in. There are
additional units that are not ready for tenants due
to repairs needed after another tenant moves out or
the unit is sealed. However, working with our
partners and providers, the average time to make a
unit placement ready is only 19 days.

Introduction 1153 would require the
Commissioner of the Department of Social Services to
produce two monthly reports in consultation with the
NYPD Commissioner, the Commissioner of the Department
of Sanitation, and the Commissioner of the Department
of Parks and Recreation. Report one would track
instances when a City agency worked to remove a
person experiencing homelessness from a public space.
Report two would track the number of individuals
affected by the removal, the services offered, and if
they were involuntary removals or arrests. As it is
currently written, this bill presents concerns around
the frequency of reporting as well as privacy
concerns for those potentially affected by this

1
2 legislation. Transparency and assisting people
3 experiencing homelessness and delivering the
4 resources they need are important priorities. We
5 would like to work in partnership to further refine
6 this legislation, addressing operational and privacy
7 considerations. Although we cannot offer support of
8 this bill in its current state, we look forward to
9 working with the Council and the bill sponsor to
10 address the agency's concerns.

11 In conclusion, I would like to thank the
12 OSAHS team, many of them are here with me today, for
13 the dedication and hard work they demonstrate every
14 day and to get client-focused work done by supportive
15 housing providers. They know and understand their
16 work has on the lives of clients in need of
17 supportive housing. They are keenly focused on the
18 life-changing work they do, and it is my honor to
19 work with them.

20 Thank you for your attention. I am happy
21 to take your questions.

22 ASSISTANT COMMISSIONER NECKLES: Good
23 afternoon, Chairs Lee, Ayala, Sanchez, Holden, and
24 Members of the Committees. I am Jamie Neckles,
25 Assistant Commissioner for the Bureau of Mental

1 Health at the New York City Department of Health and
2 Mental Hygiene. To save time, I'm going to call it
3 the Health Department moving forward. Thank you for
4 the opportunity to testify today. I am pleased to be
5 here with my colleagues to explain the Health
6 Department's role in supportive housing in New York
7 City.
8

9 The Health Department's mandate is to
10 protect and promote the health and well-being of all
11 New Yorkers. Supporting those with serious mental
12 illness and substance use disorders is a critical
13 part of this responsibility. We employ a public
14 health approach for this work, focused on prevention
15 and intervention to avoid crisis, and provide
16 responsive care with health and social supports that
17 are affordable, accessible, effective, and free of
18 stigma. This is why we play a key role in supportive
19 housing in New York City. Supportive housing is
20 affordable, permanent, and independent rental housing
21 that is integrated within a neighborhood and
22 community and meets the needs of tenants by providing
23 supportive services. Supportive housing offers people
24 who are unhoused and have a mental illness or
25 substance abuse disorder, a safe, dignified space for

health and recovery. Research also indicates that it promotes housing stability, improves health outcomes, and decreases preventable hospitalizations.

We recognize that supportive housing is the ultimate solution to chronic homelessness, and we are committed to providing it to those with mental health needs coming out of the City's shelter, foster care, and criminal justice systems. We currently contract for about 11,800 units of supportive housing and are working tirelessly to increase that number. This represents an investment of 282 million dollars in city and state funding for the prior fiscal year. We play a pivotal role in making New York a leader in supportive housing nationwide.

Today, I will speak briefly about the history of the Health Department's role in supportive housing development and then talk about what we are doing now with the units we have open and operating.

The Health Department has had supportive housing contracts since the mid-1980's. Beginning in the 1990s, more formal agreements and service models were developed in collaboration with the New York State Office of Mental Health. With each agreement, the City's supportive housing portfolio grew; at

1 first in older buildings that were converted into
2 supportive housing programs and more recently with
3 new construction and mixed-use buildings. The current
4 wave of expansion is known as NYC 15/15 and
5 represents a partnership between the city agencies
6 present today, the Health Department, DSS, and HPD.
7 HPD provides the development funding and ongoing
8 rental subsidies. DSS leads the procurement process
9 and manages the Coordinated Assessment and Placement
10 System known as CAPS, which determines housing
11 eligibility and manages referrals into units. The
12 Health Department initiates and manages the social
13 services contracts, which includes technical
14 assistance for providers to set up and maintaining
15 quality support services designed to help individuals
16 and families use housing as a platform for health and
17 recovery.
18

19 The Department's programs are available
20 for those who have been unhoused for extended periods
21 of time, including people coming from street outreach
22 and shelters, Department of Youth and Community
23 Development shelters, foster care, and the criminal-
24 legal system. The majority of units, about 84
25 percent, are allocated for single or two-adult

1 households who have serious mental illness or
2 substance use disorders and were unhoused preceding
3 their move into the unit. The remaining units are
4 designated for different household types such as
5 families and young adults and people with specific
6 histories that put them at heightened risk. This
7 includes sites catering to young adults aging out of
8 the foster care system and people with high numbers
9 of shelter and jail stays.
10

11 What really sets this apart from general
12 affordable housing are the support services. The
13 Department has led the movement over the past 30
14 years to focus on services that are person-centered
15 and recovery-oriented. Our supportive housing
16 programs offer a variety of services to tenants
17 through case management. This includes connection to
18 health and mental health services, help with
19 medication management, connection to employment and
20 benefits, social activities, accessing tools for
21 smoking cessation and smoking reduction, general harm
22 reduction related to substance use as well as
23 activities of daily living. These supportive services
24 are focused on positively impacting the tenants'
25 quality of life and assisting in their personal path

of rehabilitation. For those with children, our
supportive housing programs provide the necessary
supports for maintaining a safe home environment
conducive to healthy child development.

I am happy to share some measures of
success in supporting our tenants in living healthy
lives. 77 percent of residents are connected to a
primary care physician, which is pretty incredible.
Among current tenants, the average length of time
spent in supportive housing is around eight years,
ranging from 1 to 41 years for our longest tenant.
This tells us that our tenants are staying housed and
connected to services for prolonged amounts of time
following periods of homelessness.

The City is committed to expanding the
supportive housing supply. Since Fiscal Year 2021, we
have contracted an additional 1,000 units, bringing
our total portfolio up to 11,800. As we are all
aware, even with many new units, there is still more
demand than supply of supportive housing. The City's
Mental Health Plan centers people with serious mental
illness and substance use disorders and identifies
housing as a key strategy for improving their health.
The Plan, in alignment with the New York City Housing

1
2 Blueprint and the New York 15/15 initiative, calls
3 for continued expansion of permanent housing options
4 for New Yorkers with serious mental illness and
5 substance use disorders. The Health Department
6 anticipates opening an additional 684 units by the
7 end of Fiscal Year 2025. These units will be
8 essential in meeting growing demand for supportive
9 housing and ensuring that New Yorkers with or at risk
10 of serious mental illness or substance use disorders
11 have safe, stable, and affordable housing.

12 The City's investment in supportive
13 housing reflects the City's commitment to providing
14 this critical resource for addressing homelessness
15 among those with or at risk of serious mental illness
16 or substance use. Over the last decade, supportive
17 housing investment has doubled allowing for new units
18 as well as ensuring that older units are properly
19 preserved and maintained so that supportive housing
20 providers can continue to provide safe, dignified
21 housing with robust support services for a new
22 generation of tenants.

23 Additionally, the Health Department's
24 oversight and technical assistance is designed to
25 improve service quality and accessibility. For

example, last year we released, in collaboration with
DSS and HPD, guidance on the referral and placement
process as well as low barrier admission policies to
facility operators, service providers, and tenants.

We know safe, stable, and affordable
housing is a critical social determinant of health
and a powerful tool for supporting those with mental
health issues. The Health Department has demonstrated
our commitment to providing affordable, independent,
and permanent supportive housing to those who are
unhoused and have or are at risk of serious mental
illness or substance use disorders. I am pleased with
the progress we have made in this space, but we still
have so much more work to do. We are happy to discuss
with Council how we can best support these
populations and expand the supportive housing supply.

Thank you for the opportunity to testify
today, and I look forward to answering your
questions.

ASSISTANT COMMISSIONER LEHMAN: Good
afternoon, Chairs Sanchez, Lee, Holden, and Ayala,
and Members of the Committees. Thank you for the
opportunity to testify today on the Department's
efforts to create and preserve supportive housing in

1
2 our city. My name is Emily Lehman, and I am the
3 Assistant Commissioner for the Division of Special
4 Needs Housing at HPD. I am joined today by my
5 colleagues at the Human Resources Administration,
6 Department of Health and Mental Hygiene, and
7 Department of Veteran Services.

8 I first want to thank the Council for this
9 opportunity to discuss the critical need for
10 supportive housing as we face historic dual crises of
11 housing and homelessness in our city. Your leadership
12 is essential for expanding supportive housing which
13 in turn will reduce homelessness in the communities
14 you serve.

15 Supportive housing is one of our main
16 strategies for creating affordable housing. It
17 promotes the Administration's goals of moving people
18 out of shelter and into permanent housing and is a
19 key tenet of the Housing Our Neighbors Blueprint and
20 Where We Live strategic plans. It is the gold
21 standard for addressing homelessness in our city, and
22 HPD is proud of the work we've done thus far in
23 creating more housing opportunities for formerly
24 homeless households in need of supportive services.

2 This Administration believes that
3 supportive housing is a benefit, not a burden. It
4 makes our projects stronger, and that is why we
5 prioritize it throughout our work, including on
6 public sites. Over the past decade, HPD has financed
7 over 11,000 units of supportive housing. In Fiscal
8 Year 2023, we set records for financing supportive
9 housing and housing for formerly homeless households.

10 HPD's Supportive Housing Loan Program,
11 SHLP, has long been the primary financing tool for
12 the City's congregate supportive housing production.
13 In a typical SHLP project, at least 60 percent of the
14 building's units are set aside as supportive units,
15 and the remaining 40 percent are filled through the
16 City's affordable housing lottery system.

17 To meet the moment of need for more
18 supportive housing, we are continuing to expand our
19 toolbox. Aside from SHLP, supportive housing can be
20 included as a component in any of our new
21 construction rental programs. While these projects
22 are mandated to include a 15 percent homeless set-
23 aside, we are often exceeding that target in projects
24 that include supportive housing. In addition to HPD's
25 programs, we work with our agency partners at the

city and state level to ensure that we can produce as
much supportive housing as possible.

HPD's supportive housing projects provide
amenities such as community spaces and computer rooms
while incorporating innovative design elements that
make these buildings vibrant places to live.

Additionally, the supportive housing model includes
on-site wraparound social services for tenants. Most
importantly, supportive housing is permanent housing,
providing its tenants with rent-stabilized leases and
all the same rights and responsibilities as any other
tenant in a rental apartment in New York City.

Based on all available research and
evidence, supportive housing works. It is a proven
solution for individuals and families with long
histories of homelessness and other challenges. Some
of the population served by supportive housing
include those with mental illness, substance use
disorders, HIV/AIDS, survivors of domestic violence,
youth aging out of foster care, justice-involved
individuals, and veterans amongst others. Not only
does supportive housing work for New Yorkers and
their families, it is also a cost-effective use of
public resources. Peer reviewed research has found

1 that for every unit of supportive housing, taxpayers
2 save more than 10,000 dollars per year in public
3 resources such as shelters, emergency rooms, jails,
4 and psychiatric facilities. In fact, research shows
5 that supportive housing increases property values in
6 areas where it is located.
7

8 One of the best tools we have today to
9 create supportive housing is the NYC 15/15 program.
10 In 2015, the City set a goal of creating 15,000
11 units, 7,500 congregate and 7,500 scattered site
12 units, by 2030 and put forth 1 billion dollars in
13 City capital to fund the program. HPD focuses on
14 congregate supportive housing, which is permanent
15 housing with a mix of affordable and supportive
16 individual apartments. Just like most other
17 affordable housing that HPD finances, every tenant
18 has a rent-stabilized lease and is responsible for
19 paying rent. The 15/15 program serves a range of
20 populations including chronically homeless single
21 adults and families with mental illness or substance
22 disorders and young adults with high service
23 utilization. In the past eight years, HPD has
24 financed over 4,000 congregate supportive housing
25 units through the 15/15 program. We have a robust

1 pipeline of future 15/15 projects that we look
2 forward to moving forward with our agency,
3 development, and City Council partners.
4

5 As public servants, we have a duty to
6 serve each and every person in this city. So often,
7 our most vulnerable New Yorkers are left behind, and
8 we must endeavor to give them the care that they need
9 and the care that they deserve. Supportive housing
10 makes our neighborhoods stronger and more equitable.
11 We are asking the Council to continue standing with
12 us on the frontlines of these historic crises of
13 housing and homelessness and be a champion for
14 supportive housing in the city.

15 Thank you for the time and the opportunity
16 to speak today.

17 CO-CHAIRPERSON AYALA: Thank you. I think
18 that I agree that supportive housing can work, and in
19 some cases may, but I think that as was noted by the
20 previous panel there is still a lot of work that has
21 to be done to ensure that once an individual is
22 appropriately housed that they're receiving the
23 services that we promised in the way that they were
24 intended to be delivered, and I think that there are
25

1 some disparities in terms of by agency what that
2 process looks like.

3
4 I'm going to try to be as brief as
5 possible because we have quite a number of Council
6 Members who have questions. I think my first question
7 is in regards to the 15/15 congregate housing units,
8 can you tell us how many have closed on financing in
9 Fiscal Year '23?

10 ASSISTANT COMMISSIONER LEHMAN: Yes, give
11 me a minute. Overall since the start of the 15/15
12 program, HPD has financed over 4,000 units through
13 the 15/15 program. HPD is responsible for 7,500
14 congregate units through that program. We've done
15 4,000 of those to date. In FY-23 alone, we have
16 financed over 800 units through the 15/15 program,
17 and that is part of a total of over 1,900 units of
18 supportive housing that we funded total in that
19 Fiscal Year.

20 CO-CHAIRPERSON AYALA: Okay. Do you know
21 what the target number of units to close for Fiscal
22 Year 2024 and 2025 is?

23 ASSISTANT COMMISSIONER LEHMAN: Our
24 targets for each year, we don't have individual
25 targets for each year. Our pipeline is set based on

1 project readiness, and so it can be fluid, but our
2 target for 15/15 again is 7,500 units total, and
3 we've financed 4,000 of those. We have 3,500 units
4 left to go, and we are on track to achieve that by
5 the end of 2028 so that would be roughly around 650
6 units per year until the end of 2028.

7
8 CO-CHAIRPERSON AYALA: Okay. I'm not sure
9 if this question is for you. I think it's for DSS.
10 Would it be possible to get a chart that shows for
11 just NYC 15/15 the numbers of congregate units and
12 the number of scattered sites that have been funded,
13 actually it's for HPD, in the pipeline and sited, how
14 many units are actually built, how many units are in
15 the pipeline, and, for each, how that tracks to the
16 annual and semi-annual goals set by the
17 Administration? I'm sure you don't have this now. I'm
18 asking if it's possible to share this.

19 ASSISTANT COMMISSIONER LEHMAN: Yes, we
20 can provide that at a later date.

21 CO-CHAIRPERSON AYALA: I would appreciate
22 that.

23 Can you tell us how many people are
24 seeking placement in supportive housing units but
25 have not been placed and, mainly, how many have

submitted applications for supportive housing which
remain pending?

ADMINISTRATIVE DIRECTOR BOSKET: Thank you
for that question. I'd like to start by reiterating
from my testimony that 94 percent of all units are
actually occupied, and we receive approximately 800
applications for supportive housing each month. We
process those applications very quickly.
Determinations are made within three business days.
For each unit of supportive housing where we place an
individual or family, there are five other people
waiting for supportive housing. The number of people
who are pending or waiting for placement is a fluid
number that goes day-by-day depending on where they
are and how we can reach them to place them. I think
that answers the question.

CO-CHAIRPERSON AYALA: Is HRA making the
determination on who is suitable for the apartment
and who isn't or is that left up to the organization?

ADMINISTRATIVE DIRECTOR BOSKET: Let me
bring this back up a little bit. Before an individual
is even referred for supportive housing, an
application must be submitted for that client or that
family in the CAPS system that we mentioned earlier.

1 The first part of that is actually a very
2 comprehensive housing survey. The housing survey
3 allows us to work with that individual or family
4 seeking housing for all possible housing (INAUDIBLE)
5 including supportive housing. If the client or family
6 is eligible for supportive housing, within that
7 system they can also apply for the supportive
8 housing. You may have heard this referred to as the
9 2010-E, a common application for supportive housing.
10 Once that application has been made and eligibility
11 depending on criteria for each of the models of
12 supportive housing, which in Jamie's testimony she
13 discussed are based on clinical conditions or other
14 conditions. Once those determinations are made, we
15 can then refer clients to housing that they have been
16 determined eligible for. The time from determination
17 to referral, we've made great progress on that over
18 the last few years. In 2022, that took 100 days. In
19 Fiscal Year 2024 up to date, we have that down to 54
20 days. For clients from determination that they're
21 eligible for supportive housing to the time they move
22 in, again an area where we've made significant
23 process, in Fiscal Year 2022, that was 169 days. For
24
25

1 year-to-date Fiscal Year 2024, that's 132 days for a
2 20 percent decrease.

3
4 CO-CHAIRPERSON AYALA: Okay. Can you tell
5 us what would deem an individual not eligible for one
6 of these units?

7 ADMINISTRATIVE DIRECTOR BOSKET: An
8 individual, as stated before, each of the models have
9 certain criteria that include potentially serious
10 mental illness, substance use disorder, living with
11 HIV and AIDS, aging out of foster care so each
12 particular type of supportive housing has criteria.
13 An individual may not meet those criteria. Also, some
14 of our units, particularly the 15/15 units, require
15 what is called a HUD chronicity in terms of how long
16 an individual has been homeless. Individuals who
17 would be determined not eligible for supportive
18 housing would not have met one of those criteria.

19 CO-CHAIRPERSON AYALA: And they would be
20 informed in writing?

21 ADMINISTRATIVE DIRECTOR BOSKET: The
22 determination process includes all types of
23 supportive housing the client is eligible for as well
24 as if the client is ineligible for supportive
25 housing.

1
2 CO-CHAIRPERSON AYALA: I just want to make
3 sure that I understand. If they're found ineligible,
4 they're provided with something in writing that says
5 you were found ineligible for X apartment for the
6 following reason?

7 ADMINISTRATIVE DIRECTOR BOSKET: The
8 system now is the letter is generated to whomever put
9 the application in for the client and then that
10 housing specialist or whomever it is that helped the
11 client put the application in with supportive housing
12 would get the determination letter back and review
13 and discuss that with the client.

14 CO-CHAIRPERSON AYALA: Is there a
15 guarantee that the person for whom the application is
16 being filled out for is getting a copy of that
17 denial? We get from people that they have been denied
18 and they have no idea why they've been denied and
19 that the initial interviewing process is very
20 arbitrary and subjective to whoever is doing the
21 interviewing, so if a person may have a serious
22 mental illness that they said something that set the
23 interviewer off or words may have been exchanged or
24 something happened that that person has the ability
25

1 to say you know what, you don't qualify. How are we
2 ensuring that that is not happening?
3

4 ADMINISTRATIVE DIRECTOR BOSKET: The
5 application process is actually very standardized
6 with a rote set of questions. In the application
7 process, it would be unusual for someone to say at
8 that time that the client is not eligible for housing
9 because it's a very standardized application we've
10 been using for a long period of time. During the
11 application process itself, a client should not be
12 informed that they're not eligible for supportive
13 housing. That's not the person who's putting in the
14 applications responsibility. It's the responsibility
15 of a unit under my supervision at HRA, and that is
16 staffed by all social workers. The clinical criteria
17 that needs to be met, they're all familiar with,
18 trained with, and there is even some decision support
19 behind the system that would not let that happen.

20 CO-CHAIRPERSON AYALA: I don't know about
21 that.

22 ADMINISTRATIVE DIRECTOR BOSKET: Okay.

23 CO-CHAIRPERSON AYALA: Maybe not on your
24 end, but somewhere in the system, somewhere in the
25 process, I've heard enough complaints that make me

1 think that there's some room for error in this
2 process so I think that today, which is why it was
3 important to have the first panel be of impacted
4 individuals because they have firsthand experience on
5 what is or is not happening to them, and so we want
6 to make sure that the folks that they're interfacing
7 with are behaving in a professional manner and
8 understanding of that specific individual's medical
9 or mental health needs when they're doing the
10 interviewing and that that is not a disqualifying
11 factor because obviously if it's an apartment for a
12 person who has a mental health diagnosis, there may
13 be an incident. That should not be a disqualifying
14 factor.
15

16 ADMINISTRATIVE DIRECTOR BOSKET: I would
17 also just like to point out that there's a difference
18 between the application process and a determination
19 being made on clinical eligibility and the referral
20 process or interview process where the client is
21 meeting with a housing provider reviewing the
22 determination and making determinations on the client
23 being accepted to that housing provider.

24 CO-CHAIRPERSON AYALA: That's maybe where
25 we may need to dig a little bit further.

2 ADMINISTRATIVE DIRECTOR BOSKET: Yes.

3 CO-CHAIRPERSON AYALA: Do we know how many
4 units of supportive housing there are in total in the
5 City of New York?

6 ADMINISTRATIVE DIRECTOR BOSKET: There are
7 approximately 34,000 units of supportive housing in
8 the City of New York.

9 CO-CHAIRPERSON AYALA: 34,000, okay. This
10 is something that we've been hearing for the last
11 couple of years that there are many eviction filings
12 against supportive housing tenants for nonpayment of
13 rent, and providers have stated that they are filing
14 these cases in order to expedite one-shot deals even
15 though this is not HRA policy. What is and what can
16 HRA be doing to ensure that benefits are not lapsing
17 where there is a social service provider contracted
18 with the agency?

19 ADMINISTRATIVE DIRECTOR BOSKET: HRA has a
20 commitment to processing one-shot deals as
21 expeditiously as we can. By its very nature, our core
22 mission is to keep people housed, and we process one-
23 shot deals as quickly as we can.

24 CO-CHAIRPERSON AYALA: Okay, but is there
25 an interagency system where you are working with a

1 provider that's contracted through DSS where you're
2 getting that information firsthand or would an
3 individual living in one of these facilities, in one
4 of the buildings, have to apply at a home base or at
5 an HRA office? Are we simplifying the application
6 process?
7

8 ADMINISTRATIVE DIRECTOR BOSKET: HRA has
9 made efforts to make access to all of our services
10 and benefits easier. That includes an online
11 application you may have heard of called Access HRA
12 where clients can apply online for benefits.
13 Additionally to make access to these services
14 earlier, we do telephone interviews now rather than
15 having to come into our centers to do interviews so
16 we've made great efforts to streamline our processes
17 and make them more client-friendly.

18 CO-CHAIRPERSON AYALA: Okay. Do we know
19 what the eviction rates in supportive housing is and
20 what are some of the reasons that individuals are
21 being evicted?

22 ADMINISTRATIVE DIRECTOR BOSKET: I'm going
23 to ask Jamie to take that question. Thank you.

24 ASSISTANT COMMISSIONER NECKLES: Of
25 course, the main goal of supportive housing is to

1 keep people housed so I want to make that crystal
2 clear that that's our aim and vision, for as long as
3 it makes sense for them to live there. The support
4 services help tenants get income through employment,
5 benefits, work with budgets and live within their
6 budgets. If a tenant gets behind in rent, case
7 managers will help them to get the one-shot deal from
8 DSS. If the landlord pursues eviction, supportive
9 housing tenants will have the same due process as any
10 other New Yorker through housing court so this is
11 progressive and there's a lot of preventative efforts
12 to keep people in housing. The case manager provides
13 support services for any tenants who are in housing
14 court. As that process unfolds, they'll continue to
15 get supportive housing services. Ultimately, the
16 tenants have the same rights and responsibilities as
17 all tenants in our city, and so a very small number
18 may be evicted for reasons ranging from illegal
19 behavior in the unit to nonpayment of rent. We have
20 11,800 units, right. Most people stay in those units.
21 If we look at Calendar Year 2022, 396 people left the
22 unit for any reason so a small number of people will
23 move on. Of that small subset of people who leave the
24

1 unit, only 2 percent were for eviction so that was
2
3 nine evictions of the whole portfolio in 2022.

4 CO-CHAIRPERSON AYALA: Okay. You said
5 something that struck me that individuals that live
6 in supportive housing have the responsibilities, but
7 do they have the same level of protections is
8 something that I'm really concerned about. For
9 instance, the fact that providers are allowed to go
10 into somebody's unit without permission even when
11 there isn't an emergency that warrants being able to
12 go in there is problematic for me. I have a friend
13 who shared with me that, he moved into his supportive
14 housing unit, he was provided with a furnished unit,
15 and he didn't want to sleep on the bed that was given
16 to him, he wanted to buy his own bed and make it his
17 own space and was told that he couldn't do that, and
18 so, if he has the same responsibilities that any
19 tenant has, why would he be prevented from being able
20 to enjoy the comfort of his home in the way that he
21 chose, and why is it so easy for providers to violate
22 a person's individual privacy in this way?

23 ASSISTANT COMMISSIONER NECKLES: There are
24 rules around when a provider can enter into a
25 tenant's unit like a landlord. Many of us, right, a

1
2 landlord will have a key to be able to get into the
3 unit in case of emergency or maintenance within all
4 attempts to communicate with a person to notify them
5 before gaining access. We can always make
6 improvements. We want to make sure that people's
7 apartments are safe. I am not familiar with the
8 example you're citing there. Obviously, we provide
9 basic levels of furniture and living needs for people
10 when they move in. If they want to change that
11 furniture, I don't know the circumstance that you're
12 talking about and if there were any...

13 CO-CHAIRPERSON AYALA: Are they able to?

14 ASSISTANT COMMISSIONER NECKLES: Safety
15 and size. Of course.

16 CO-CHAIRPERSON AYALA: There's nothing
17 that prevents that?

18 ASSISTANT COMMISSIONER NECKLES: There's
19 nothing to prevent them broadly. I'm not familiar
20 with this particular situation though.

21 CO-CHAIRPERSON AYALA: There's not a
22 policy, right?

23 ASSISTANT COMMISSIONER NECKLES: Correct.
24 It's not a policy.

25

CO-CHAIRPERSON AYALA: I mean I think it's
great (INAUDIBLE)

ASSISTANT COMMISSIONER NECKLES:
(INAUDIBLE)

CO-CHAIRPERSON AYALA: Furnished because
maybe not everybody has the means to be able to
purchase a bed, but, if somebody is able to or has
family that will support...

ASSISTANT COMMISSIONER NECKLES: That's
wonderful, yes.

CO-CHAIRPERSON AYALA: Then I think that's
a good thing, and I think that we should be
supporting and encouraging that, not making it an
issue and provoking conflict within the building.

Because we've heard, again, so many
complaints regarding instances like these, I'm really
interested in understanding what the grievance
procedure is. Particularly concerned about the idea
that if I'm filing a complaint against Joe Smith that
whoever I'm complaining to is now forwarding that
email to Joe Smith and now Joe Smith, and it's
happened to me, I have said some stinky stuff about
people and that person that I send it to emailed it
and forwarded it to somebody else because they didn't

1 read the entire thread so I know how violating it can
2 feel, but it seems like an inappropriate way of
3 handling these complaints.
4

5 ASSISTANT COMMISSIONER NECKLES: As Mike
6 mentioned, there are about 35,000 units of supportive
7 housing in New York City. I'm speaking about a third
8 of those units. For those that are in contract with
9 the Health Department, we expect all of our
10 contractors to have a grievance policy that they're
11 informing tenants about at move-in so they know where
12 to go to complain. Complaints will come to us as well
13 through a variety of means, from the person
14 themselves, anonymously or with contact information,
15 sometimes through third parties so as we receive
16 these, we make every effort to follow up and find the
17 person who made the complaint. That's not always easy
18 for us to communicate directly with them. When we are
19 able to speak directly with the person who made the
20 complaint, we will ask their permission to reach back
21 out to the provider to resolve it because we
22 recognize sometimes that might not be appropriate.
23 Sometimes it is, sometimes it isn't, depends on the
24 scenario. If we don't have identifying information,
25 we may be trying other pathways to figure out who the

1 complaint is pertaining to and so we will go to the
2 provider and ask some questions sometimes as
3 delicately as we can to follow up.

4
5 CO-CHAIRPERSON AYALA: So the grievance is
6 handled by either DOHMH or HRA?

7 ASSISTANT COMMISSIONER NECKLES: They'll
8 go first to the provider who has the relationship,
9 who knows the tenant, we don't know all of the
10 thousands of tenants, first within that structure,
11 within the organization where they have the most
12 information, the most direct ability to resolve it.
13 People can come to the government, we're civil
14 servants, and we will figure out which is the
15 contracting agency so that could be the Health
16 Department, that could be DSS, that could be the
17 State Office of Mental Health for example.

18 CO-CHAIRPERSON AYALA: Is there a policy
19 against retaliation?

20 ASSISTANT COMMISSIONER NECKLES: I want to
21 say yes, of course, but I'm not sure what exactly
22 that would mean. Yes, these are treatment providers
23 and care providers who are held to person-centered
24 planning.

1
2 CO-CHAIRPERSON AYALA: I want to be
3 respectful of time so I'll ask one more question
4 regarding the grievances. Do we track how often the
5 tenant's grievances are resolved in favor of tenants?

6 ASSISTANT COMMISSIONER NECKLES: We are
7 tracking and reporting on our website in accordance
8 with the Local Law requiring the supportive housing
9 tenants' notice of rights so those violations are
10 posted on our website.

11 CO-CHAIRPERSON AYALA: Okay. I'm sorry. I
12 lied. I have one last question. The agency claims
13 that the interview process is a low-barrier process,
14 but there is no universal interview template, and
15 providers can ask virtually any question that they
16 want to applicants. Many applicants and advocates
17 experience the application process as a very high-
18 barrier process requiring tenants to jump through
19 enormous administrative hurdles and obtain multiple
20 clinical assessments to be approved, especially for
21 those that are unsheltered. How can the agencies make
22 this process more streamlined for the applicant and
23 easier to navigate, less given to subjectivity and
24 less prone to error and discrimination.

ADMINISTRATIVE DIRECTOR BOSKET: Thank you
for that question. The low-barrier admission policy
is a policy we implemented approximately four or five
months ago so it's a relatively new policy for us,
but that policy directs providers that they cannot do
background and credit checks, which used to be a
problem in the past, and it also directs that they
should collect as little documentation as is possible
for the client to move in. Now, that does not
include, however, like the retail market when
somebody applies for an apartment, there is an
application process for what's called property
management that clients must go through. That
includes documentation that oftentimes is required
for the provider to get low-income tax credits and
other sources of funding for the provider, but we are
working with our providers to ensure that they are
not violating the background checks, credit checks,
and working with them towards requiring as little
documentation as possible that would meet only the
information they need for the income qualifications
and tax credits that they need for these units.

ASSISTANT COMMISSIONER NECKLES: I can
elaborate a little bit on that as well. Along with

1 the other policies that Mike just mentioned, we've
2 release apartment viewing guidance last year to shift
3 away from this sort of interview approach to reframe
4 it as an opportunity for the prospective tenant to
5 view the apartment. Like you or I would want to see
6 an apartment before we move in, we meet with the
7 service provider, understand the services offered,
8 the support services on-site so that's not a surprise
9 to anybody, oh, I didn't know this was a supportive
10 housing program. We heard somebody mention that
11 earlier in the public testimony. That's not a
12 scenario we want. We want people to understand what's
13 available and on-site and the program they're
14 entering, understanding the community resources so
15 it's a conversation between the provider and the
16 tenant about whether this is where they want to live.
17 Because we want it to be a conversation, that also
18 means we don't want it to be just a checklist script.
19 We do want an opportunity for human interaction. We
20 are human service providers, and so we're providing
21 as much additional guidance as we can to sort of
22 prevent against the examples that you talk about, but
23 we do want to keep some level of human fluidity for
24 the setting. We're not robots.

CO-CHAIRPERSON AYALA: Absolutely. Council
Member Sanchez.

CO-CHAIRPERSON SANCHEZ: Thank you, Deputy
Speaker, and hello, good afternoon to everyone here.

I'm going to ask two sets of questions
and then we have a lot of Colleagues that are here
wanting to participate.

First and foremost, HPD, this might be a
question that you are getting a head start on for
Monday if you cannot answer today. In the context
that in June 2023 more than 2,600 supportive housing
units were vacant citywide since this Administration
began, the number of vacant units has not been below
2,000. Meanwhile, we have over 7,000 individuals who
are seeking placement in supportive housing. In light
of that, the November Plan includes a PEG for the
agency of 4.5 million dollars. That is a cut to
supportive housing, and the explanation that we are
understanding is that slow lease-ups means that the
agency will not be using these funds for rental
assistance payments. Can you or sister agencies
explain to us why, given the high demand for
supportive housing across the City of New York, we

1 are seeking a cost-savings in rental assistance
2 payments for supportive housing?
3

4 ASSISTANT COMMISSIONER LEHMAN: Thank you
5 for that question. It's not so much a matter of
6 lease-ups being slow. It's really a matter of we have
7 to project out a couple of years when we think units
8 will come online and be open and ready for occupancy
9 and what the unit distribution of those units will
10 be, and so the PEG that we had in our November Plan
11 for the 15/15 rental assistance is really just a
12 right-sizing of when those units actually did come
13 online and what the unit distribution is so the
14 number of studios versus one bedroom versus two
15 bedrooms.

16 CO-CHAIRPERSON SANCHEZ: Can you put that
17 explanation that you just gave, that there is no
18 slowness in the context of over 2,000 supportive
19 housing vacant units across the City of New York?

20 ADMINISTRATIVE DIRECTOR BOSKET: I'll talk
21 about the vacancies if you don't mind. Yes, there are
22 approximately today about 2,000 vacancies. However, I
23 think I may have mentioned this earlier, about 600 of
24 those are currently linked to clients and waiting to
25 move in. We keep them as listed as vacant until the

client moved in just out of transparency.

Additionally, those 1,400 units that are left, that doesn't mean clients haven't been referred to those units. It may mean that the client has been referred. Many of those units may be older units. Approximately 9,000 units of supportive housing here in New York are some of the original buildings that have been around for some time and may be less desirable because they're in SRO settings or areas that the clients don't want to move in. Clients have a right, clients have a choice, that's very important to us so even the units that are left that are vacant does not mean people haven't been referred to those units.

CO-CHAIRPERSON SANCHEZ: Okay, so can you give us a breakdown of how many people have not been referred to?

ADMINISTRATIVE DIRECTOR BOSKET: To the 2,000 units?

CO-CHAIRPERSON SANCHEZ: Yeah, or the 1,400 that you mentioned.

ADMINISTRATIVE DIRECTOR BOSKET: I can get back to you on that.

CO-CHAIRPERSON SANCHEZ: Thank you. The second set of questions is around rejections. The

1 Coordinated Assessment and Placement System, as you
2 all discussed, in conjunction with the Standardized
3 Vulnerability Index was implemented in January 2018
4 to streamline access to homeless services and
5 prioritize assistance based on individual assessed
6 vulnerability and the severity of service needs.
7 Approved supportive housing applications receive a
8 vulnerability rating of high, medium, and low based
9 on criteria that contributes to the probability of an
10 individual or family that is vulnerable becoming
11 again homeless. Some of these criteria include
12 multisystem contacts, functional impairments, high
13 utilization of Medicaid, length of time homeless. In
14 the context of these two systems existing, we've
15 heard many stories from advocates previously that
16 supportive housing applicants are rejected for
17 reasons that appear to go against the spirit of
18 supportive housing. For example, rejections because
19 someone was intoxicated, showing symptoms, didn't
20 have so-called insight into their illness, or showed
21 up to the interview with pajamas. How does the agency
22 or sister agencies ensure that providers don't reject
23 applicants because they might be seen as difficult to
24

1 serve, and how has the Standardized Vulnerability
2 Index impacted this issue?

3
4 ADMINISTRATIVE DIRECTOR BOSKET: I'll
5 start with the Standardized Vulnerability Assessment.
6 You correctly characterized it in that the assessment
7 really is the likelihood that the individual or
8 family will remain homeless is what our Standardized
9 Vulnerability Assessment, and the indices that you
10 mentioned are the correct indices that we use for
11 that determination. Something I want to make clear is
12 that the high, medium, or low does not necessarily
13 equate to clients' needs or the severity of their
14 needs. It really equates to really the homelessness,
15 the possibility or likelihood that they're going to
16 remain homeless, and I'm going to ask Jamie to tackle
17 the first part of that question.

18 ASSISTANT COMMISSIONER NECKLES: Thanks.
19 As I mentioned in response to an earlier question, we
20 rolled apartment viewing guidance last year to shift
21 away from this idea of an interview by the provider
22 of the prospective tenant, and with that guidance
23 included very specific expectations around how to
24 handle, for example, a person showing up to an
25 apartment viewing intoxicated. The appropriate next

1 step is to rescheduled the interview, right, to make
2 sure the person is safe, get them to where they
3 return to where they came from safely and reschedule
4 the interview. Lack of insight is not an example to
5 reject somebody. The apartment viewing is an
6 opportunity for the provider to talk about their
7 services. It's possible that a person's situation has
8 changed from the time they have their eligibility
9 determination to the time they went to view an
10 apartment. Our housing is independent supportive with
11 case management. There may be situations where, based
12 on that meeting, it's apparent that the person may
13 benefit from a higher level of care, a licensed
14 housing setting for example. In those cases, there
15 may be a recommendation and a very careful discussion
16 about doing that.

18 CO-CHAIRPERSON SANCHEZ: Okay. Thank you.
19 That is helpful. Just grabbing onto your example,
20 lack of insight is not a reason to reject someone,
21 but a higher need for service might be so looking at
22 the Local Law 3 report of 2022, the agencies reported
23 that the majority of rejections were due to an
24 applicant needing services outside of the provider's
25 offering. Can you help us to understand what is that

1
2 gap between what providers have as their services and
3 what they're not offering that the clients need and
4 how are we making sure that folks who need this
5 housing are receiving it?

6 ASSISTANT COMMISSIONER NECKLES: All of
7 our supportive housing services provide case
8 management support at a minimum once a month of case
9 management, voluntary participation in that case
10 management. What case management means, right, that's
11 a broad term, and it can mean a variety of things
12 depending on what the person wants or is interested
13 in. The case manager will help a person maintain
14 their apartment, get benefits, reunite with family,
15 find mental health treatment, substance use
16 treatment, participate in those services, medical
17 care, group activities, spending leisure time, and,
18 if there are children in the unit, the services will
19 be more focused on ensuring that there's a safe
20 environment for the children to meet their
21 developmental milestones. People will connect to
22 outside treatment services which can vary greatly
23 according to the larger continuum of care, and so we
24 would want them to sort of work with the tenant to
25 help them connect to a clinician who can assess them

1
2 for community-based treatment services. None of our
3 settings are clinical settings. These are not
4 clinicians who are coming in. They're generally
5 bachelor's level case managers.

6 CO-CHAIRPERSON SANCHEZ: Okay, thank you.
7 Has there been consideration by the agencies to
8 change the requirements of providers to provide more
9 of those frequently needed services by tenants?

10 ASSISTANT COMMISSIONER NECKLES: Our
11 approach is to provide education to the providers
12 about how to link to those services in the community
13 where they are funded, often reimbursable, and then
14 not attach to the person's tenancy because people do
15 move on and we don't want them to lose all their
16 services if and when they do move on which we do
17 expect so we think it's more prudent to connect them
18 to other community resources so that they're as
19 integrated really as possible into the service
20 system.

21 CO-CHAIRPERSON SANCHEZ: Thank you. That
22 makes sense.

23 Supportive housing providers share with
24 us that current demand for supportive housing is due
25 in part to decreases in State finance licensed mental

1 health beds and that this has put providers in a
2 position where they have to serve individuals who
3 maybe they were not prepared to assist so what has
4 been the City's ask to the State in this regard?
5

6 ASSISTANT COMMISSIONER NECKLES: Sure. I
7 don't think the State has reduced any of their
8 licensed treatment capacity, and I know that they
9 will be expanding licensed treatment capacity.
10 There's a timeline for procurement on the State
11 Office of Mental Health's website right now that
12 indicates their sort of growth trajectory.

13 CO-CHAIRPERSON SANCHEZ: Okay, so the City
14 has not made any particular asks to the State in this
15 regard? You think the State is doing a great job, we
16 have enough resources from the State in terms of
17 licensed beds?

18 ASSISTANT COMMISSIONER NECKLES: No, I'm
19 saying that the State has already articulated a plan
20 to increase those beds, and I know we're speaking
21 regularly with our counterparts, particularly at the
22 State Office of Mental Health about the service needs
23 of New Yorkers with serious mental illness, and so I
24 think that's responsive to our dialogue.
25

1
2 CO-CHAIRPERSON SANCHEZ: Okay, but you are
3 not asking for anything above and beyond what the
4 State has put out as their plan? Just trying to get
5 at whether there is advocacy coming from the City of
6 New York to the State for more supportive services.

7 ASSISTANT COMMISSIONER NECKLES: That's a
8 little bit beyond the scope of my testimony here and
9 my responsibilities.

10 CO-CHAIRPERSON SANCHEZ: Okay. Next
11 question, our constituent experiences here, as
12 Council Members, they inform our perspectives on how
13 these programs are working on the ground as, of
14 course, you've heard from the Deputy Speaker, in some
15 of my situations, I've had issues with responsiveness
16 from providers, I've had providers tell me that they
17 can't always reach their clients because they're
18 based in Brooklyn and my District is in the Bronx,
19 and so how do your agencies hold providers
20 accountable like CAMBA, like Met Council, Met Council
21 and Postgrad Center have not been responsive to my
22 office and I'm the Chair of Housing and Buildings. I
23 wonder how my other Colleagues are faring. How do you
24 instruct them to be responsive to elected officials
25 and to community concerns for their clients?

2 ASSISTANT COMMISSIONER NECKLES: We
3 require all of our providers to implement the
4 supportive housing tenants' notice of rights which
5 provides tenants with information about who is
6 responsible for various aspects of their unit, the
7 services and the funding. We also expect and require
8 all of our contractors to have grievance policies
9 that they notify their tenants about and be
10 responsive to those grievances. We review charts
11 periodically when we go out to look at providers and
12 speak with tenants to spot check adherence to those
13 requirements. Additionally, providers report to us on
14 individualized tenant measures or select performance
15 measures with respect to connection to primary care
16 and engagement in the array of the person-centered
17 activities and ultimately the reasons for which a
18 tenant would leave the unit.

19 CO-CHAIRPERSON SANCHEZ: Thank you. That
20 makes a lot of sense. My questions are more getting
21 at even outside of the tenant provider, City agency
22 relationships, the relationship with community, and
23 so to that end, this is my last question, I'll turn
24 it back to our Deputy Speaker. What is the process to
25

rehouse a client that perhaps is not in the most
supportive setting for that client?

ASSISTANT COMMISSIONER NECKLES: Could you
clarify what you mean by rehouse, if they're already
in supportive housing?

CO-CHAIRPERSON SANCHEZ: Yes.

ASSISTANT COMMISSIONER NECKLES: So you're
talking about moving to different...

CO-CHAIRPERSON SANCHEZ: So if they're in
a Scatter Site, a setting where they are not
receiving or feel that they do not have access to the
services that they need in an intensive way, what is
the process that a provider can follow and work with
you all to make sure that that person is moved to a
more appropriate setting.

ASSISTANT COMMISSIONER NECKLES: Sure.
It's the person's choice. They're a leaseholder,
right, so we don't pick up and move a person to a new
setting. It would have to be the person's preference
to participate in the process and choose to end their
lease if they want or to articulate the setting that
they would prefer. This is really a tenant-led
choice.

1
2 CO-CHAIRPERSON SANCHEZ: What I've heard
3 from providers is that there needs to be an active
4 2010-E application, that that is very difficult to
5 obtain again, and so let's say that the tenant does
6 want to move and the provider is willing to do so,
7 what is the process for them?

8 ASSISTANT COMMISSIONER NECKLES: This is a
9 challenge in permanent housing, when people have a
10 lease and we have significant demand, we're not
11 moving people around, plugging and placing.
12 Everybody's got their lives and their furniture and
13 their community so it's not very straightforward to
14 simply pluck up a person and move them from A to B so
15 we would work with a provider within their own sort
16 of organization's portfolio. If it's large, if they
17 have a lot of options, perhaps they can find a way to
18 orchestrate a move. It's difficult. Housing is
19 difficult in New York City.

20 CO-CHAIRPERSON SANCHEZ: Thank you. The
21 feedback I've heard is that it's really difficult to
22 get support from the agencies to move folks so I kind
23 of feel like there's a little bit of finger-pointing,
24 it's difficult and they're not helping, it's
25 difficult and they're not helping so just a concern

1 area that I'd love to follow up on and understand
2 better.

3
4 Thank you so much. Deputy Speaker, back
5 to you.

6 CO-CHAIRPERSON AYALA: I want to recognize
7 that we're also joined by Council Members Rivera and
8 Ossé.

9 With that, we'll move on to Chair Lee.

10 CO-CHAIRPERSON LEE: Thank you, Deputy
11 Speaker. Thanks to everyone for bearing with us as we
12 ask our questions, especially those that are here to
13 testify. I know it's a long day so just thanks for
14 being here and continuing your participation.

15 I'm going to ask my first set of
16 questions. Based on the testimony, I know that since
17 2021 you added 1,000 new additional units. Do you
18 know if those are Scattered versus single and what
19 the breakdown is?

20 ASSISTANT COMMISSIONER NECKLES: I can
21 tell you I wouldn't be able to say exactly during
22 that timeframe but broadly across our 11,800 units,
23 about 75 percent are congregate, 25 percent are
24 Scattered.

1
2 CO-CHAIRPERSON LEE: Okay, and for the
3 1,000 new units that you have, or just in general,
4 how do you select where the units are going, is there
5 a breakdown by borough that you have that you could
6 share with us or ZIP code or how do you select, is it
7 based on the highest areas of need of services?

8 ASSISTANT COMMISSIONER NECKLES: There's
9 partially a question about sort of the proposal and
10 the award section and then those that are already
11 awarded. We have supportive housing everywhere, in
12 all boroughs across our city. We could provide you
13 with the ZIP codes of the buildings that we're in.
14 The scattered site units may change over time.
15 Typically, a provider will focus on a given borough,
16 but they are leasing units on the general market and
17 they may shift over time.

18 ADMINISTRATIVE DIRECTOR BOSKET: Can I
19 also just add, part of the dependency of where units
20 are located depends on where the vendors when they
21 submit to us a proposal for units for a congregate or
22 scattered site, they tell us as part of that proposal
23 where the units will be located.

2 CO-CHAIRPERSON LEE: How do they determine
3 that and then how do you hold them accountable? Is it
4 based on need or what are the criteria?

5 ADMINISTRATIVE DIRECTOR BOSKET: For a
6 congregate, as an example, if we're pulling it back a
7 little bit, they already have site control by the
8 time they submit to us a proposal so they already
9 have a location, a lot, whatever you want to call it,
10 where they're going to build. If we're awarding
11 scattered site units, we award for a number of units.
12 It's then that vendor's responsibility to go out and
13 find those units within the essentially retail
14 residential economy.

15 CO-CHAIRPERSON LEE: Okay.

16 ASSISTANT COMMISSIONER LEHMAN: I could
17 just elaborate a little bit more on the congregate
18 side from HPD's perspective. We develop supportive
19 housing sites on both public and private land. If it
20 is private land, the developer and the provider are
21 finding the site on their own and bringing it to HPD
22 and HRA. They are applying to HRA for the service
23 funding, and they are submitting a proposal to HPD
24 for the capital financing and the rental assistance
25 so it's really someone finding the site on their own.

2 For public sites, we are awarding those
3 through an RFP or an RFQ process, and so people are
4 expressing interest in developing a public site.

5 CO-CHAIRPERSON LEE: Okay. From what we've
6 hard from the advocates, it seems that we heard that
7 there are more frequent complaints or issues that
8 come from the scattered site housing model, and so
9 are there any internal discussions from any of your
10 agencies about the efficacy of scattered site
11 housing, whether the agency would consider focusing
12 less on this model and more on the congregate
13 setting?

14 ASSISTANT COMMISSIONER NECKLES: I can
15 answer that. From a programmatic perspective, we
16 don't see differences in our outcomes for people in
17 Scattered and congregate. We see fairly similar
18 outcomes.

19 CO-CHAIRPERSON LEE: If I could just ask
20 one question then, because we know that there's a
21 huge workforce shortage amongst the healthcare and
22 mental healthcare sector, and so I guess my question
23 is it more difficult or are you finding it more
24 difficult or complaints from the providers of the
25 case management also as well in terms of going to

1 those different sites versus having a more congregate
2 setting?
3

4 ASSISTANT COMMISSIONER NECKLES: There are
5 pros and cons to both congregate and Scattered from
6 the provider and tenant perspective. For tenants,
7 there's often more independence in a scattered site
8 model. For providers, there's more travel time to
9 meet with the tenant in their more independent
10 apartment.

11 CO-CHAIRPERSON LEE: If they have to go to
12 individual apartments, do you find that there are
13 more cancellations or people who are dropping off in
14 terms of the services for those clients?

15 ASSISTANT COMMISSIONER NECKLES: It takes
16 more effort to regularly see a tenant in a scattered
17 site apartment. The provider will attempt to schedule
18 it and find a cadence that works for the individual's
19 schedule, but, yes, there are missed appointments. In
20 a congregate setting, there's more opportunity for
21 spontaneous contact. You bump into a tenant in the
22 common areas and the lobby so there is more footwork
23 for the provider to have the in-person contact. They
24 will also have telephonic contact with folks. It's
25 not limited to in-person exclusively so there's other

ways to stay in touch although we do expect attempts
for in-person contact monthly.

CO-CHAIRPERSON LEE: Okay, great. Moving
on to one of my favorite topics is contracts and
procurements. Just going back to something that you
mentioned before when you were answering Chair
Sanchez's questions about the case management not
really have a clinical component in terms of the
services because I know that you had mentioned it's
usually the bachelor's level caseworkers, and so my
question is that if there are incidents, do you also
require the providers to have linkage agreements or
MOUs with Article 31s, Article 28s, or other
healthcare providers in the area that would be able
to come quickly or de-escalate or provide services or
other incidents like that?

ASSISTANT COMMISSIONER NECKLES: Sure.

While the case managers are not clinicians, there is
training, we have a training vendor to provide
training in supportive counseling, crisis de-
escalation, harm reduction, person-centered service
planning, all of these terms that are really adjacent
to clinical care but not explicitly clinical care so
there is a supportive element of the case management

1 and a therapeutic element to it without calling it
2 explicitly clinical. The providers are not required
3 to have linkage agreements, although they are
4 expected to be familiar with all community resources,
5 physical healthcare, mental healthcare, substance
6 use, community gardens, the full spectrum of things
7 that people might be interested in, and that is the
8 work, that's what they're doing all the time is
9 connecting people to those community resources. If
10 they're having trouble finding services that are
11 appropriate, we will help. That is part of the
12 technical assistance that we provide. Sometimes we do
13 make introductions, right, there's this great new
14 CCBHC in your neighborhood, have you heard about what
15 a CCBHC is, this is a great new model, and so we will
16 provide that sort of education as appropriate.

18 CO-CHAIRPERSON LEE: Okay, and the reason
19 why I say this is because when I was running my
20 social service agency, we had caseworkers, case
21 managers, but we also had a clinic setting where,
22 especially when you're dealing with folks that are in
23 supportive housing that have more serious mental
24 illnesses, I just think it's important to make sure
25 that there is that immediate, instead of the provider

1
2 for the housing side having to search and figure out
3 which mental health providers are there, I think it
4 would be a great idea to sort of have that as part of
5 the contracting process so that there is that
6 immediate relationship-building that happens because
7 it's great if the folks that are dealing with the
8 more serious mentally ill population that they have
9 that built-in relationship with some of the clients
10 in those settings already so I would just want to put
11 that out there as well.

12 I know that DOHMH is responsible for
13 awarding and overseeing the contracts with the non-
14 profit providers on behalf of the State OMH office so
15 how many contracts do you currently oversee, and
16 would you be able for the record to name all the
17 organizations that you contract with?

18 ASSISTANT COMMISSIONER NECKLES: Sure. We
19 have 219 contracts with 78 different organizations so
20 will spare this audience the pain of reading that.
21 I'm happy to provide it to you.

22 CO-CHAIRPERSON LEE: Yes, if you could,
23 that would be great.

24 ASSISTANT COMMISSIONER NECKLES: Sure.

25

1
2 CO-CHAIRPERSON LEE: When awarding
3 contracts to the housing providers, what criteria
4 specifically does your agency use to determine which
5 providers should receive certain contracts?

6 ASSISTANT COMMISSIONER NECKLES: Sure.
7 I'll defer to DSS because they're really the holders
8 of the RFP. Although we work collaboratively with
9 them, they're the lead.

10 ADMINISTRATIVE DIRECTOR BOSKET: Providers
11 respond to what's called an open-end solicitation
12 that we have right now for these 15/15 units. Again,
13 they would respond to if they want congregate units
14 or they're seeking scattered site units. We empanel
15 representatives from each of our agencies here,
16 meaning DSS, DOHMH, and HPD, who review the
17 solicitations and have a standardized tool for
18 reviewing and determining if the responder should be
19 awarded the contract or not.

20 CO-CHAIRPERSON LEE: How long is the
21 contract usually for? Is it three- or five-year or
22 how often do the RFPs come out?

23 ADMINISTRATIVE DIRECTOR BOSKET: The RFP
24 right now is an open-ended solicitation so
25 (INAUDIBLE) and then the duration is..

2 ASSISTANT COMMISSIONER NECKLES: Typically
3 nine years. Some congregate sites will request a 15-
4 year contract because of the issues around the site.

5 ASSISTANT COMMISSIONER LEHMAN: The rental
6 assistance contracts on the congregate side have an
7 initial term of 15 years. 15 years is also the term
8 of the low-income housing tax credit compliance
9 period so, depending on the financing, a provider may
10 ask for a social service contract that's coterminous.

11 CO-CHAIRPERSON LEE: Okay, and is there an
12 evaluation process for the contract renewals, and,
13 even in that 9- or 15-year period, how do you sort of
14 re-evaluate the providers on a consistent basis
15 because I know that oftentimes when the contracts get
16 awarded, there's accountability that needs to happen
17 there and sometimes that doesn't always happen so I
18 just wanted to know what your criteria was for that
19 too.

20 ASSISTANT COMMISSIONER NECKLES: Sure. We
21 rate all of our contracts annually through the
22 PASSPort system so there's a performance evaluation
23 that's publicly available. We also expect our
24 providers to report regular information to us about
25 their tenants. I mentioned earlier around the types,

1 the categories of activities they're engaging in,
2 they're connection to primary care, and the reasons
3 that they leave their unit if they choose to leave.
4 We receive that data. We provide comparisons back to
5 the programs about how they compare to similar
6 programs, right, other scattered site programs in the
7 Bronx about the same size so they can have a sense of
8 how they compare to their peers and we can use a
9 quality improvement approach there to help do the
10 best that we can, and we will also go to the programs
11 on-site to review charts, meet tenants, and spot
12 check the information that they're reporting to us.

14 CO-CHAIRPERSON LEE: Okay. Do those annual
15 evaluations include, because I know that we've heard
16 also from the advocates that some of the DOH-
17 contracted providers are in violation of the New York
18 City and New York State Housing and Human Rights
19 Laws, and so how does your agency or any of the
20 contracting agencies assess whether the provider is
21 complying with relevant laws as part of that annual
22 evaluation?

23 ASSISTANT COMMISSIONER NECKLES: The
24 annual evaluation that I talked about is through
25 PASSPort, the City's procurement system, right, so

1 it's based on how they're doing vis-à-vis the
2 contract scope and budget.

3
4 CO-CHAIRPERSON LEE: So it's more
5 fiscally, right, so then in terms of this aspect, how
6 do you capture that data?

7 ASSISTANT COMMISSIONER NECKLES: The
8 entity enforcing whatever the law is, right, because
9 there is City, State, and Federal laws. The entity
10 charged with enforcing those laws would have that
11 data that you're talking about so for the supportive
12 housing tenants' notice of rights, for example, we
13 are posting that information on our website because
14 we're the contracting agency for that particular
15 local law, but I think the human rights laws would be
16 not something that we would know necessarily things
17 that were under investigation for example.

18 CO-CHAIRPERSON LEE: Right, but then if
19 you're contracting with the providers and you hear
20 directly from residents that there are complaints
21 that they are in violation of it, then is it your
22 responsibility then to escalate that to the Human
23 Rights Division or what is the process for that?

24 ASSISTANT COMMISSIONER NECKLES: I think
25 depending on the scenario, we would, and if we're in

1 communication with the tenant and we have their
2 permission, we would help to connect them with
3 whatever, sometimes it's legal representation to help
4 them pursue a claim, sometimes it's providing them
5 with a phone number or a website for them to explore
6 it so it'll vary depending on the situation.

8 CO-CHAIRPERSON LEE: Okay. As someone who
9 ran a former agency that provided services similar to
10 this, if a client comes to me and complains and says
11 that these human rights laws are being violated, I
12 feel like it's our obligation and duty to then report
13 to the appropriate agencies and so I'm just wondering
14 if I'm a contractor of DOHMH and I'm providing these
15 services on behalf of the City, am I being told as a
16 provider then to report these things to you and then
17 do you then have the responsibility to report to
18 Human Rights? I'm just trying to figure out what the
19 process is for some of the grievances that are coming
20 up potentially with some of the providers.

21 ASSISTANT COMMISSIONER NECKLES: Sure. I
22 think in the example that you talked about, if
23 there's a tenant complaining that their human rights
24 have been violated, we would work with the tenant to
25 connect them to the Human Rights Commission. We have

1 contracts. One of our contracts is for legal
2 representation for people with mental health
3 disabilities. We might connect them to one of those
4 contractors to help them. We will not have as much
5 information as the tenant themselves, and so, if
6 they're able to, we'd want to help them tell their
7 story to whoever is responsible for the law that
8 they're complaining has been violated so this could
9 vary. If it's a privacy law, if it's a human rights
10 law, if it's a Local Law, there's a lot of uniqueness
11 here.
12

13 CO-CHAIRPERSON LEE: Hopefully there's
14 connections because I know that a lot of times City
15 agencies, and I understand why sometimes, but they're
16 very siloed and so hopefully if they need legal
17 services or anything like that we can help connect
18 them as well.

19 Just a couple more questions around the
20 complaints and open violations. I know that you had
21 mentioned that sometimes you are able to do the spot
22 checks and look at the charts, and so how often do
23 those spot checks and looking at the charts happen?
24 Is it based on OMH's guidelines or if you could
25 elaborate?

2 ASSISTANT COMMISSIONER NECKLES: Sure. It
3 depends on our contract. This is typically annually.

4 CO-CHAIRPERSON LEE: Okay. With room to do
5 potentially more? Let's just say you hear there seems
6 to be more complaints coming from X provider, then
7 would you look into that more than just the annual
8 check?

9 ASSISTANT COMMISSIONER NECKLES: Yes, if
10 there's a specific complaint, we will investigate
11 that immediate complaint. We would not wait for a
12 regular cadence of investigation or in spot checking.

13 CO-CHAIRPERSON LEE: Okay. I know that for
14 the grievance policies, from my understanding and
15 correct me if I'm wrong, you're saying that it's
16 largely up to the providers to make sure that the
17 tenants understand what their rights are and what the
18 grievance process is, but then I guess my question is
19 are those grievance policies the same across the
20 board, who's in control of making sure that those
21 notices are actually going out and that they're
22 happening?

23 ASSISTANT COMMISSIONER NECKLES: Sure.
24 Since the supportive housing tenants' notice of right
25 Local Law was passed, there's an expectation that

1 that information be provided when a person initially
2 views an apartment, when they sign a lease and
3 further as needed. There is a lot more consistency
4 across the board about how that goes, and then
5 providers have to report to us annually an
6 attestation that they have in fact provided that
7 information to their tenants and, if they are in
8 violation of that part of the law, we would also post
9 that publicly.
10

11 CO-CHAIRPERSON LEE: Okay. Really quickly,
12 I just wanted to move on to tenants with physical
13 disabilities. Are all supportive housing facilities
14 contracted by DOHMH ADA-compliant?

15 ASSISTANT COMMISSIONER NECKLES: I'll have
16 to get back to you on the answer to that question.

17 CO-CHAIRPERSON LEE: Okay.

18 ASSISTANT COMMISSIONER NECKLES: We will
19 work to get people into a unit that meets their
20 particular needs, for example, a first-floor unit. We
21 have older buildings in our housing portfolio that
22 were built in a different time so I will have to
23 follow up on that question.

24 CO-CHAIRPERSON LEE: Okay, because my
25 understanding is that even if it's an older building,

1 the City will outfit it accordingly if someone has a
2 disability, and so if I'm someone with a disability
3 and I come into let's just say a unit on the fourth
4 floor of a walk-up building, what is the process then
5 for myself to advocate for some accommodations?
6

7 ASSISTANT COMMISSIONER NECKLES: Sure, so
8 I think a person is unlikely to choose a fourth-floor
9 walk-up if they're in a wheelchair, right? That's not
10 going to be...

11 CO-CHAIRPERSON LEE: It doesn't even
12 necessarily have to be a wheelchair, but it could be
13 some other sort of physical...

14 ASSISTANT COMMISSIONER NECKLES: So
15 depending on the physical accommodation, I think
16 that's why the apartment viewing is really important
17 for a tenant to see the unit that they may choose to
18 move into to choose to understand what the needs are
19 and then talk with the provider about what sort of an
20 accommodation would be feasible and what timeframe.

21 CO-CHAIRPERSON LEE: Okay.

22 ADMINISTRATIVE DIRECTOR BOSKET: Just to
23 add to that, in the application process itself, there
24 is information that is collected around the physical
25 limitations and/or accommodation needs for a client,

1 and, when the OASAS team makes referrals, they
2 consider that information as they make the referral
3 to ensure that the accommodation can be provided to
4 the client.

5
6 CO-CHAIRPERSON LEE: Okay. Do contracted
7 housing providers receive training on how to
8 accommodate tenants with disabilities, both physical,
9 mental, and otherwise?

10 ASSISTANT COMMISSIONER NECKLES: They
11 absolutely receive training on how to support people
12 with mental health and substance use needs. That's
13 who they're serving, and so those mental illnesses
14 have risen to the level of disability if a person is
15 qualifying for having a serious mental illness so
16 yes, they are trained in that.

17 Physical disabilities may vary widely,
18 and so we can absolutely support providers who need
19 extra training sometimes for certain things.

20 CO-CHAIRPERSON LEE: Okay, and then who
21 conducts the trainings?

22 ASSISTANT COMMISSIONER NECKLES: We have a
23 contract for a training resource center for
24 supportive housing providers that's available to all
25 of them. Many organizations also, they have a

1 training line in their budget, and they will,
2 depending on their population, if they're serving
3 older adults, people with families, substance use,
4 they will pay for their own training relevant to
5 their particular population's needs.
6

7 CO-CHAIRPERSON LEE: Okay. Do you
8 currently work with MOPD, Mayor's Office for People
9 with Disabilities, and/or OCMH, the Mayor's Office of
10 Community Mental Health, to ensure that individuals
11 with SMI are connected to agencies like yours and DSS
12 to access the appropriate supportive housing and
13 services?

14 ASSISTANT COMMISSIONER NECKLES: Yes.

15 CO-CHAIRPERSON LEE: Okay. I just had one
16 question I wanted to ask on behalf of Council Member
17 Riley who had to leave early so please bear with me
18 while I read his question.

19 The background is families where a parent
20 or caretaker is receiving cash assistance through HRA
21 and employed or in school, they may be eligible for
22 childcare. They need to contact their HRA benefits
23 access center. If a parent was previously on cash
24 assistance but is not longer financially eligible,
25 they may be eligible for subsidized childcare

1 services under the one-year transitional childcare
2 benefits program so his question is how many people
3 received the transitional care voucher in FY-22 and
4 are recipients reported on a log by the Department
5 disaggregated by ZIP code?
6

7 ADMINISTRATIVE DIRECTOR BOSKET: That
8 level of detail, I'd have to get back to the Council
9 on.

10 CO-CHAIRPERSON LEE: Okay, and then he had
11 a second question about is there any supportive care
12 linked to the transitional childcare benefits
13 program, understanding a family may be moving out of
14 a shelter and into a new environment and
15 neighborhood?

16 ADMINISTRATIVE DIRECTOR BOSKET: Can you
17 repeat the question, please?

18 CO-CHAIRPERSON LEE: Is there any
19 supportive care linked to the transitional childcare
20 benefits program, understanding that a family may be
21 moving out of a shelter and into a new environment
22 and neighborhood?

23 ADMINISTRATIVE DIRECTOR BOSKET: Again,
24 I'd like to get back to you. That's an area under the
25 supportive housing realm usually.

2 CO-CHAIRPERSON LEE: Okay. Thank you.
3 Thank you, Deputy Speaker.

4 CO-CHAIRPERSON AYALA: Council Member
5 Holden.

6 CO-CHAIRPERSON HOLDEN: Thank you. On to
7 Department of Veteran Services, you guys have been
8 sitting very patiently. I thank you for that. We'll
9 give you guys a little break now.

10 Let me just get to, since I'm concerned
11 with veterans, basic questions. What is the current
12 demand for veteran supportive housing in that realm?
13 We have a lot of veterans, and I visited Borden and
14 they have a new shelter, and a lot of them want to
15 get an apartment or supportive housing. Can you tell
16 us how many are currently waiting?

17 DIRECTOR LOUGHRAN: Absolutely, Chair.
18 Deputy Speaker, Committee Chairwoman, thank you for
19 having us today. It's an honor to be here.

20 Before I go on, I just want to take a
21 minute to thank the Council for the Mental Health
22 Roadmap Stop 2 legislation. We are looking forward to
23 working with you and seeing that age, and obviously
24 the effects of those bills will make an impact on the
25

1 conversations that we're having today about
2 supportive housing.

3
4 Going on to the demand, it is important
5 for you to know the context of how veterans are
6 different than the non-veteran community in our
7 homeless shelters, particularly in that they have a
8 higher probability of having access to federal
9 benefits so, unlike our counterparts, veterans
10 actually have the HUD-VASH rental subsidy, the
11 Veterans Affairs Supportive Housing rental subsidy,
12 and, because of that, a significant number of our
13 homeless veterans utilize HUD-VASH to move into
14 supportive housing, which that supportive element
15 comes from the VA. To the extent of what the demand
16 is, our population is slightly different, but, even
17 to go on beyond that, the City of New York with our
18 colleagues here at the local, state, and federal
19 level in partnership with the VA, HUD, NYCHA, and our
20 colleagues at DSS, we also expanded that rental
21 subsidy to disconnected veterans, those who are other
22 than dishonorable so we already had a high proportion
23 of veterans who are homeless qualified for a
24 supportive housing subsidy, and then we went further
25 than that in the City of New York to pilot a program

1 where we expanded that rental subsidy to more
2 veterans, which is why we have what we have today,
3 the homeless population of veterans that have a
4 higher supply of housing made available.
5

6 To talk about supportive housing and the
7 demand, I do want to turn it over to my Director of
8 Housing and Support Services, Lamarr Wheeler, as his
9 team works directly with our homeless veteran
10 population.

11 DIRECTOR WHEELER: Good afternoon. We can
12 only speak to...

13 CO-CHAIRPERSON HOLDEN: Can you speak up a
14 little bit, get a little closer?

15 DIRECTOR WHEELER: I can only speak to our
16 own efforts as far as how we're seeding the
17 supportive housing arena. We are seeding for
18 supportive housing through Empire State Supportive
19 Housing initiative. Right now, we have one that is
20 right in Brooklyn. It's called Surf Vets. We have
21 round six, which was awarded to Community Access in
22 Brooklyn Community Housing Services where they have
23 142 units available. For round seven, Samaritan
24 Daytime Village, Fortune Society, we're talking 82
25 new affordable housing.

CO-CHAIRPERSON HOLDEN: Are these vacant
or they currently occupied?

DIRECTOR LOUGHRAN: Chair, those are
projected. ESSHI selected those awardees in 2021
which totaled 150 units. In 2022, round seven, there
were two other partners selected which totaled an
additional 152 units so these are projected.

CO-CHAIRPERSON HOLDEN: Projected?

DIRECTOR LOUGHRAN: Yes.

CO-CHAIRPERSON HOLDEN: Okay, but do we
have a number of how many veterans are waiting for
supportive housing? Do we have a number on that?

DIRECTOR WHEELER: We'll have to get back
to you on that.

DIRECTOR LOUGHRAN: Right now, we believe
that two out of five veterans seeking permanent
housing placement would benefit from supportive
housing environment, but, again because of the wide
array of resources that our veteran population is
eligible for, choice has a significant role in that
decision making.

CO-CHAIRPERSON HOLDEN: Right. Let me just
ask you on the model of supportive housing, is it
different for veterans because some of the veterans

1 that I spoke to said they were forced to live with
2 someone that they didn't know, another veteran, and
3 they didn't want that. Is that a model or do they get
4 their own apartment or space?
5

6 DIRECTOR LOUGHRAN: I'll begin by saying
7 that because our population has a higher probability
8 of having access to that Section 8 subsidy as in HUD-
9 VASH and CCN, at a minimum they're eligible for a
10 studio so when we have SROs available, to the degree
11 that those SROs are ones that they prefer, most
12 likely they would prefer not to do that and wait for
13 a studio and even go as far as waiting to upgrade
14 their Section 8 subsidy to a one-bedroom from that
15 studio. Since our team of Veteran Housing
16 Coordinators works so closely with those clients, we
17 would never put them into a unit that they do not
18 want to be in. We would continue to work with them
19 until we find permanent housing that meets their
20 choice and ensures that they're recidivism rate stays
21 low. Part of our recidivism rate that we track is
22 that we follow up with our clients 6, 10, 18, to 22
23 months after they're housed, and, of our data so far
24 which we can share with you after, a significant
25 portion of those that do answer our aftercare calls

1 report still being housed which we're very happy
2 about meaning that we've connected them with the
3 right housing source at the very beginning.
4

5 CO-CHAIRPERSON HOLDEN: What criteria, if
6 any, are used to determine which veterans receive
7 priority for supportive housing units because
8 obviously there's a need if they're obviously
9 homeless and we have homeless veterans on our streets
10 so when you engage, I don't know with the application
11 process if there's a veteran's box that they check
12 and you're saying yeah so there is so then that
13 information is passed along to DVS when you see the
14 veteran? I'm sorry to get you involved again. I just
15 wanted to give you a break.

16 ADMINISTRATIVE DIRECTOR BOSKET: It's
17 perfectly fine. Yes, as part of the application
18 process, as I've mentioned before, there are criteria
19 where someone could check that they have veteran
20 status, and that would...

21 CO-CHAIRPERSON HOLDEN: Are they given
22 priority? Do they go to the top of the list?

23 ADMINISTRATIVE DIRECTOR BOSKET: We make
24 the determination of their eligibility would be up
25 to...

CO-CHAIRPERSON HOLDEN: So DVS would
determine the priority?

DIRECTOR LOUGHRAN: One thing we want to
make clear here is that how DVS facilitates building
up supportive housing for veterans is that we work
really closely with NYCHA and HPD. As NYCHA's RFP
just previously released, HPD's comes out quarterly,
because Section 8 runs through NYCHA and HPD we can
facilitate conversations with developers, and those
developers make our partners known if they want to
build housing for veterans. We then can use project-
based housing, Section 8 vouchers, to facilitate a
priority per se for those veterans.

CO-CHAIRPERSON HOLDEN: Is that part of
your efforts to try to get more supportive housing
for veterans, like what is your agency doing in that
area?

DIRECTOR LOUGHRAN: Great question, Chair.
As Lamarr mentioned, we continue to engage the Empire
State Supportive Housing Initiative and the Homeless
Housing Assistance Program and NYCHA and HPD and our
developers. You may have not seen this, but the New
York State Comptroller released a homeless veteran
report last month which highlighted New York's

1 success of reducing the veteran homeless population
2 by 83 percent, and 90 percent of that reduction came
3 here in New York City so clearly what we're doing
4 with Council, our private sector partners in the real
5 estate community and our City partners have been
6 successful and we want to keep that up, but one thing
7 I want to emphasize is we really want developers to
8 ask us how they can be more involved in building
9 housing for veterans which we can facilitate
10 instructions and help them work with our City
11 partners to make that a combination. We can always do
12 more with more housing.

14 CO-CHAIRPERSON HOLDEN: Yeah, and I think
15 if we set aside a certain percentage of supportive
16 housing for veterans, particularly targeting veterans
17 because we owe them. Of course, you know, you served,
18 and thank you, so that's a priority at least for my
19 Committee to try to not have any veteran living in a
20 congregate setting even so that's what we did at
21 Borden, we got rooms for them actually rather than a
22 congregate setting, which I think they're happier but
23 they still would like supportive housing.

24 DIRECTOR LOUGHRAN: Yeah. I'd like to say
25 thank you to Chair for doing that. I know that our

1 community was very happy about the progress that you
2 made in Borden Avenue, and we thank you for all that
3 you're doing for our community.

4
5 CO-CHAIRPERSON HOLDEN: Just as an
6 editorial comment, but that probably should be the
7 model for the entire city shelters so everybody gets
8 their own space, and it could be a small cubicle, 8
9 by 10, but at least you don't have to sleep in an
10 open setting and certainly our veterans should have
11 that automatically.

12 I want my Colleagues to ask questions so
13 I'll just ask a few more and be brief, but you get
14 information, when somebody applies for supportive
15 housing or housing, obviously you identify them as a
16 veteran. Contacting them is another hurdle,
17 especially if somebody is homeless. What are some
18 other barriers that you're seeing from veterans who
19 possibly you can't get them, you can't find them,
20 they don't get back to you, or they're not willing to
21 get maybe some of the supportive services that you're
22 offering.

23 DIRECTOR LOUGHRAN: I want to take this
24 moment to highlight Councilman Dinowitz's bill in our
25 Roadmap. Identifying veterans is an issue across the

1 country but, here in the City, that's what we want to
2 do more of, and we commend the executive order, but
3 we certainly support the bill that Councilman
4 Dinowitz has brought to the attention in the Roadmap
5 Stop 2 because we do believe that that's going to
6 help us go further. If more agencies and more offices
7 are asking the question and we can get that
8 information, we can be more proactive about helping
9 folks connect to resources that they're qualified
10 for.
11

12 CO-CHAIRPERSON HOLDEN: Okay. Just a
13 couple more questions on this end. Let's deal with
14 serious mental illness. It doesn't necessarily have
15 to be with veterans, but if someone goes into
16 supportive housing and they're not getting treatment
17 or they're not attending treatment, they're not going
18 to the doctor or they're not engaging, what happens?
19 How does that work? Is that voluntary or do they
20 jeopardize their stay at the supportive housing if
21 they don't seek treatment for serious mental illness
22 because serious mental illness if it's untreated
23 always gets worse. It doesn't get better by itself.

24 ASSISTANT COMMISSIONER NECKLES: Sure. I
25 can answer that question. We're always trying to

1 encourage tenants to connect to whatever services
2 will help them to remain stably housed and be as
3 healthy and of the best quality of life possible.
4 That may include mental health treatment or
5 rehabilitation services, and so we will consistently
6 work with the tenant for as long as they are living
7 in one of our programs to help them find and stay,
8 afford those sorts of services. However,
9 participation in mental health treatment is not a
10 requirement for tenancy in our supportive housing so
11 if a person chooses not to participate in treatment
12 at any point in time, that's their choice, and we
13 will individualize our service planning based upon
14 wherever they are in what we refer to..

16 CO-CHAIRPERSON HOLDEN: So there's no
17 agreement in the lease, for instance, that we offer
18 this but, you're shaking your head no, there's
19 nothing in the lease that requires that..

20 ASSISTANT COMMISSIONER NECKLES:
21 Absolutely not.

22 CO-CHAIRPERSON HOLDEN: They seek
23 treatment for serious mental illness?

24 ASSISTANT COMMISSIONER NECKLES: No.

25 CO-CHAIRPERSON HOLDEN: Okay.

2 ASSISTANT COMMISSIONER NECKLES: That is
3 not how supportive housing works.

4 CO-CHAIRPERSON HOLDEN: Okay. Thank you.
5 Thank you, Chair.

6 CO-CHAIRPERSON AYALA: Thank you. I have a
7 question just before we go to Council Member Hudson
8 regarding the connection between Veteran Services and
9 DSS and DOHMH because I have a building in my
10 District that was supposed to be primarily, it was
11 told to us that it was going to be supportive housing
12 for veterans, and my understanding is that they had a
13 hard time filling up those units with actual
14 veterans, and so I'm trying to figure out what is the
15 relationship and how often are you referring, are you
16 finding it difficult?

17 DIRECTOR LOUGHRAN: Deputy Speaker, I'll
18 begin and then I'll pass it to Lamarr as his team
19 probably worked on-site or on the ground with the
20 clients, but I will just begin with saying that what
21 we have found over the years is that housing for
22 veterans works better if it's integrated into
23 buildings and not just solely for veterans and...

24 CO-CHAIRPERSON AYALA: It's integrated,
25 but the majority of the units were for veterans.

1
2 DIRECTOR LOUGHRAN: I see, okay. Without
3 knowing some of the details of the building though, I
4 will pass it to Lamarr.

5 CO-CHAIRPERSON AYALA: Yeah, I think that
6 the gist of it is really are you finding it difficult
7 to get access to units and what is the coordination
8 with the different agencies like?

9 DIRECTOR WHEELER: The coordination is
10 great. I'm really surprised that you're telling me
11 this. I'm really surprised because, again, the Surf
12 Vets was really a success. It's an integration of 172
13 units for veterans and 50 for everyone else so I'm
14 not aware of any...

15 CO-CHAIRPERSON AYALA: Okay, it was a
16 couple of years ago, but I'm just curious.

17 DIRECTOR LOUGHRAN: We would love to
18 follow up, learn more about, get in touch with the
19 project management company or whoever is leading the
20 lease-up for the building and we'll coordinate with
21 our City agencies to figure out how to get it going.

22 CO-CHAIRPERSON AYALA: Okay, and if
23 there's any way that we can be helpful also as
24 Council Members in very diverse communities, I think
25 I find that sometimes I get veterans that are on the

1
2 verge of homelessness and don't realize that they can
3 apply for certain apartments, even independent of
4 supportive units because they just don't realize that
5 they have a preference, and once they are connected,
6 the process is pretty expeditious.

7 DIRECTOR LOUGHRAN: Deputy Speaker, I
8 would like to offer you at this time, I mean we are a
9 small and nimble team, but what we've been doing, and
10 thanks to the Chair here, is we've been facilitating
11 veteran resource centers in City Council offices.
12 Chair Holden, we were at his office. We're going to
13 be visiting Dinowitz.

14 CO-CHAIRPERSON AYALA: You're more than
15 welcome.

16 DIRECTOR LOUGHRAN: We'd love to do the
17 same and, to the extent that we could do it at every
18 City Council office, we...

19 CO-CHAIRPERSON HOLDEN: You're going to
20 need a bigger budget.

21 DIRECTOR LOUGHRAN: We would love to try.
22 If not physically showing up at your office, we'll
23 make a visit to also connect you and your staff with
24 our virtual and remote online options to make it
25 easier for folks to understand what their benefits

1
2 are. When it comes to housing, I do want to shoutout
3 nyc.gov/vetladder. That's our housing ladder so if
4 any veteran is curious of what is the right path for
5 them to find the right fit. That housing ladder is a
6 great resource.

7 CO-CHAIRPERSON AYALA: If you could just
8 forward me something, I would love that.

9 DIRECTOR LOUGHRAN: Absolutely.

10 CO-CHAIRPERSON AYALA: I appreciate it.

11 DIRECTOR LOUGHRAN: Thank you.

12 CO-CHAIRPERSON AYALA: Thank you.

13 ADMINISTRATIVE DIRECTOR BOSKET: Council
14 Member, I'd also just like to say if you've got the
15 specifics on the building you're speaking of, we can
16 look and see what the referrals were for veterans.

17 CO-CHAIRPERSON AYALA: Okay.

18 ADMINISTRATIVE DIRECTOR BOSKET: But I
19 would say if there's a building that has units and
20 it's earmarked for a particular population and we're
21 having difficult finding individuals to fill those
22 units, we will fill those units with other people
23 because supportive housing is such a limited resource
24 here in New York.

2 CO-CHAIRPERSON AYALA: Understood. The
3 only thing that I would add to that is that we, and
4 that's why it's important to see that graph of like
5 what types of models we're creating for because so
6 many categories fit under the supportive housing
7 model that we want to make sure that there's equity
8 for all populations and that we're not building more
9 of one at the expense of the other. I find that I
10 have, and I guess that there is also a larger need
11 for supportive housing for individuals with serious
12 mental health and substance use disorder, but very
13 rarely do I hear of any other category, and so I
14 don't know if that's indicative of the number of
15 applicants and the need in that population as opposed
16 to the need in the others, but I would love some data
17 that better reflects that.

18 Council Member Hudson.

19 COUNCIL MEMBER HUDSON: Thank you so much.
20 Just a couple of questions. The first is in March
21 2022, the Mayor created a task force with the New
22 York City Department of Social Services with DSNY,
23 Parks Department, and the NYPD to dismantle and
24 remove homeless encampments in the city as well as to
25 connect homeless people in these encampments with

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1 services, housing, and more, and this might be
2
3 redundant and forgive me if it is, but is this task
4 force still active?

5 ADMINISTRATIVE DIRECTOR BOSKET: I am
6 unaware of that task force.

7 COUNCIL MEMBER HUDSON: Okay, so then you
8 can't describe the task force's role and powers?

9 ADMINISTRATIVE DIRECTOR BOSKET: Correct.

10 COUNCIL MEMBER HUDSON: Okay. You're aware
11 of those actions that occurred, right?

12 ADMINISTRATIVE DIRECTOR BOSKET: Yes,
13 Council Member.

14 COUNCIL MEMBER HUDSON: Okay, just not of
15 a specific task force?

16 ADMINISTRATIVE DIRECTOR BOSKET: Right.

17 COUNCIL MEMBER HUDSON: Okay. All right,
18 how can DSS address the prevalence of supportive
19 housing rejections based on a subjective assessment
20 of the client's disability or social services needs
21 like lacks insight or higher level of care needed if
22 this is clearly based on a client's known disability
23 status?

24 ASSISTANT COMMISSIONER NECKLES: I think
25 there are different levels of care between licensed

1 and unlicensed. The Health Department units that I'm
2 talking about are unlicensed so they have case
3 management support. There's licensed housing which is
4 operated and contracted for by the New York State
5 Office of Mental Health, and so there are
6 circumstances where people are recommended for one or
7 the other based upon their needs. When DSS determines
8 a person to be eligible for supportive housing, the
9 level of care that the Health Department contracts
10 for, we have released guidance last year around the
11 do's and don't's of that apartment viewing and the
12 questions that are appropriate or inappropriate to
13 avoid the sorts of scenarios that you're talking
14 about so that prospective tenants are given every
15 opportunity to choose an apartment and screened in
16 to that unit rather than finding reasons to screen
17 them out.

18
19 COUNCIL MEMBER HUDSON: Okay, I appreciate
20 that, but would you classify a subjective assessment
21 as disability discrimination?

22 Let me rephrase. Would you agree that
23 perhaps a subjective assessment could result in
24 disability discrimination?

2 ASSISTANT COMMISSIONER NECKLES: Yes, any
3 time there's subjectivity, there's opportunity for
4 discrimination, racism, bias to creep into the
5 process. We guard against that and put as many
6 requirements and provide as much guidance to avoid
7 that. That said, we think it's important for there to
8 be a conversation between the prospective tenant and
9 the provider about the program and the services that
10 are available so that the prospective tenant
11 understands what's offered, what they're signing up
12 for, what this program is, and also so that they have
13 the opportunity to view the building to which they
14 are being referred so there's a person's choice about
15 the placement so the subjectivity comes in that human
16 conversation.

17 COUNCIL MEMBER HUDSON: Okay, thank you.
18 My last question, according to an MOU effective
19 October 19, 2021, between DSS, DHS, NYCHA, and the
20 NYPD, the agencies are collaborating on an initiative
21 to address to incidents of unsheltered homeless
22 persons on NYCHA campuses and developments throughout
23 the city. Do you know what the current level of
24 funding is for this program?

ADMINISTRATIVE DIRECTOR BOSKET: We are here to talk about supportive housing, and that sounds like an area that is outside of our area of supportive housing.

COUNCIL MEMBER HUDSON: Okay, great. Thank you.

ADMINISTRATIVE DIRECTOR BOSKET: You're welcome.

CO-CHAIRPERSON AYALA: Thank you. Council Member Brewer.

COUNCIL MEMBER BREWER: Thank you very much. I had to step out so I hope you didn't discuss this. First of all, thank you for all your hard work on such an important issue. The one-shots, I am really good at getting one-shots, but what's the criteria for those? Is it any different for those who are in supportive housing because I do know, and I know people may disagree with me, I have obviously many, many non-profit friends working in supportive housing, and sometimes somebody doesn't pay the rent and I call because the tenant calls me, I say so help me god, do not throw that person, but they feel they have to go to court in order to get the person to pay the rent, blah, blah, blah, and the person does not

1
2 get kicked, but one-shots can be helpful so is there
3 a different role for one-shots as opposed to those
4 that I deal with other housing because it says here
5 that there's not a prerequisite for qualifying for a
6 one-shot deal so if you could just explain that to me
7 because it can often be helpful, the one-shots?

8 ADMINISTRATIVE DIRECTOR BOSKET: There's
9 no difference in criteria for one-shot deal
10 eligibility for supportive housing as to any other
11 resident of New York City. I think you acknowledged
12 and I'd like to acknowledge that that one does not
13 have to have an eviction proceeding to obtain a one-
14 shot deal.

15 COUNCIL MEMBER BREWER: Okay, so that's
16 clear for you as well as for everybody else.

17 ADMINISTRATIVE DIRECTOR BOSKET: I'm sorry
18 to interrupt. We are trying to get that message out
19 that there is no requirement to have eviction
20 proceedings or a court proceeding to obtain a one-
21 shot deal.

22 COUNCIL MEMBER BREWER: Okay, trying to
23 keep people in their apartments is the bottom line.

24 ADMINISTRATIVE DIRECTOR BOSKET: That's
25 correct.

2 COUNCIL MEMBER BREWER: Okay. Next issue,
3 I am so focused on trying to buy new buildings for
4 supportive housing so as the, I assume, hopefully
5 some of the migrants, I don't want anybody to move
6 who's a family, I'm crazed on that topic, but I
7 assume that in the next couple of years there will be
8 more SROs, I have more SROs on the West Side perhaps
9 than any other area, so what's the process for
10 helping, if a building becomes available, an SRO, how
11 fast can you help that non-profit buy it so that we
12 have more supportive housing?

13 ASSISTANT COMMISSIONER LEHMAN: Thank you.
14 That's a great question.

15 COUNCIL MEMBER BREWER: I know it's a good
16 question. I want buildings bought.

17 ASSISTANT COMMISSIONER LEHMAN: We have
18 some great recent success stories of non-profits
19 buying SROs..

20 COUNCIL MEMBER BREWER: I know every one
21 of them, but I want what the new ones.

22 ASSISTANT COMMISSIONER LEHMAN: Yeah, we
23 can always do more with more. Generally, the process
24 for HPD's pipeline with acquiring sites, particularly
25 if it's a non-profit developer or an..

1
2 COUNCIL MEMBER BREWER: I don't want the
3 for-profit. I only want the non-profit.

4 ASSISTANT COMMISSIONER LEHMAN: For non-
5 profits, they are eligible to access acquisition
6 financing through the New York Acquisition Fund so
7 that would probably be the first step and seeing if
8 they can secure an acquisition loan to buy a building
9 through that.

10 COUNCIL MEMBER BREWER: Okay. Religious
11 institutions, I'm pretty familiar with them one way
12 or the other, what are you doing with them to help
13 them participate in supportive housing? They have
14 land, they have no congregants, etc., so it doesn't
15 go to the highest bidder. We don't want that. We want
16 it to go to you, non-profit, and supportive housing.
17 What are you doing? I see some of them in the room
18 here today.

19 ASSISTANT COMMISSIONER LEHMAN: We are
20 very, very thankful to our faith-based partners who
21 are making land available for the development of
22 supportive and affordable housing. HPD doesn't play
23 the role of matchmaker between developers and
24 landowners, but we encourage partnership wherever
25 possible. We are happy to work with faith-based

1 organizations and their development partners to
2 structure a deal that makes sense for all the parties
3 involved, and HPD would provide the financing to
4 build the building.
5

6 COUNCIL MEMBER BREWER: Okay, I'm just
7 saying one suggestion would be to call some of them
8 up and say we can help you as opposed to waiting for
9 time to move on. Something to think about. We are
10 desperate.

11 ASSISTANT COMMISSIONER LEHMAN: We are
12 actively thinking about ways to provide further
13 technical assistance for faith-based organizations.

14 COUNCIL MEMBER BREWER: You're thinking or
15 you're doing?

16 ASSISTANT COMMISSIONER LEHMAN: We are
17 doing and thinking.

18 COUNCIL MEMBER BREWER: Okay. Next issue,
19 it says here 19 days, I think you said this, to move
20 to the repair for the room, for the unit, but does
21 that mean move-in, how long does it take? I'm in a
22 shelter, I qualify, how fast? 19 days to repair it
23 says, but how about actually getting there because I
24 think it takes a little bit longer.
25

ADMINISTRATIVE DIRECTOR BOSKET: To clarify, the 19 days was from when a unit is taken offline because a client (INAUDIBLE) so 19 days is pretty fast to get a unit back online.

COUNCIL MEMBER BREWER: Okay, that's for the repairs and everything?

ADMINISTRATIVE DIRECTOR BOSKET: Correct. From determination to move-in, in Fiscal Year 2024, our most recent quarter, it's taking 132 days. That compares to Fiscal Year 2022, it was 169 days, so we've made a 20 percent decrease in the last two years.

COUNCIL MEMBER BREWER: Is that a good number, 132? It sounds like a lot.

ADMINISTRATIVE DIRECTOR BOSKET: 132, that includes the client's completion, determination. It takes time to make referrals for the viewing appointment. As I described earlier, after the viewing appointment, there is a process where the client has to complete paperwork to move into the unit so we're striving to get that number down, and we have gotten that number down over the last few years.

1
2 COUNCIL MEMBER BREWER: Okay. One last
3 thing, are pets allowed in everywhere and couples who
4 are not married, is that all part of supportive
5 housing? Dogs, cats, no guinea pigs. Somebody doesn't
6 like them around here. Fish, turtles.

7 ASSISTANT COMMISSIONER NECKLES: That's
8 probably my responsibility. I don't know the answer
9 off the top of my head. I'll have to get back to you.

10 COUNCIL MEMBER BREWER: I think the answer
11 is no dogs. That's why I'm concerned.

12 ASSISTANT COMMISSIONER NECKLES: I'm
13 certain if there's...

14 COUNCIL MEMBER BREWER: Unless they're a
15 service dog.

16 ASSISTANT COMMISSIONER NECKLES: Let me
17 get back to you with the answer to that question.

18 Couples, single adults without children...

19 COUNCIL MEMBER BREWER: Not married
20 couples.

21 ASSISTANT COMMISSIONER NECKLES: May live
22 together who are not married.

23 COUNCIL MEMBER BREWER: They're okay? They
24 can come to supportive housing?

25 ASSISTANT COMMISSIONER NECKLES: Correct.

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2 COUNCIL MEMBER BREWER: Okay. Thank you.

3 DIRECTOR LOUGHRAN: Councilwoman, I just
4 want to add that if you do have any constituents that
5 have a dog but they're a veteran and want it to be a
6 support dog, please connect with our office. We have
7 great organizational allies that can help facilitate
8 that for them or if they need support dogs we can
9 help.

10 COUNCIL MEMBER BREWER: Thank you. I think
11 some of my constituents who have these I don't think
12 you want. Thank you very much. I can handle them, but
13 nobody else wants them. Thank you.

14 CO-CHAIRPERSON AYALA: Thank you. Council
15 Member Nurse followed by Council Member Rivera.

16 COUNCIL MEMBER NURSE: Thank you, Chairs.
17 My line of questioning will be about Intro. 1153.
18 Just because of Council Member Hudson's previous
19 question, is anyone on the panel able to speak to the
20 sweeps or have familiarity with the programs, any of
21 the ins and outs of how those work?

22 ADMINISTRATIVE DIRECTOR BOSKET: No.

23 COUNCIL MEMBER NURSE: Okay. I'm going to
24 let my questions go.

25

1
2 COUNCIL MEMBER RIVERA: Hi there. Thank
3 you for your testimony and for all your time.

4 You can't tell us how DHS determines what
5 areas will be cleaned up, right, and how you
6 coordinate with NYPD for the removal of individuals
7 from an encampment site that is to be cleaned? No one
8 can speak to that?

9 ADMINISTRATIVE DIRECTOR BOSKET: Again,
10 Council Member, we're here to talk about supportive
11 housing, and that's not the area that any of us work
12 in.

13 COUNCIL MEMBER RIVERA: I understand. I
14 think most of us agree that individuals who are on
15 the street, many of them are in need of supportive
16 housing, and so all roads lead to stabilized housing.
17 I would say the housing insufficiency, particular
18 supportive housing, that is the root cause of so many
19 issues including people experiencing homelessness on
20 the street. I'm sure you know that.

21 Let me just ask what steps are agencies
22 pursuing to increase the amount of justice-involved
23 supportive housing for New Yorkers, I just want to
24 say particularly access to funding due to definitions
25

1 of chronic homelessness that actually prevent people
2 from qualifying?

3
4 ASSISTANT COMMISSIONER NECKLES: Sure. I
5 think a couple of us will respond to this. I'll start
6 with it.

7 We have people with justice-involvement
8 across all of our supportive housing. We released
9 some low-barrier admission guidance last year that
10 clarified that criminal background checks are not
11 permissible as part of the supportive housing
12 placement process. We also have a subset of our
13 supportive housing units that are justice-involved
14 supportive housing that are focused on people with a
15 high number of city jail and shelter stays, and so
16 there's an open RFP for the JISH program as it's
17 called, and we have proposals under review right now
18 for that expansion.

19 ADMINISTRATIVE DIRECTOR BOSKET: If I may,
20 Council Member Rivera, go back to the street homeless
21 issue. Just some stats. From Fiscal Year 2022 to
22 2023, our referrals of street homeless people for
23 supportive housing increased by 40 percent, and we
24 placed 354 individuals who were defined as street
25 homeless in housing in Fiscal Year 2023.

2 As to individuals who have criminal
3 justice involvement, I think many of us on this panel
4 are actually right now working with the Corporation
5 for Supportive Housing exactly around this issue and
6 how we can better serve individuals with criminal
7 justice history. I think you're referring to the HUD
8 definition of homeless chronicity which becomes a
9 barrier for many of these individuals. It's something
10 we're actively discussing.

11 COUNCIL MEMBER RIVERA: The number 40
12 percent from Fiscal Year 2022 to 2023, what number is
13 that, and if it's 354 individuals in one year, 354
14 individuals out of what?

15 ADMINISTRATIVE DIRECTOR BOSKET: I don't
16 have the denominators.

17 COUNCIL MEMBER RIVERA: If you can get
18 back to me, that would be great.

19 ADMINISTRATIVE DIRECTOR BOSKET: Sure,
20 okay.

21 COUNCIL MEMBER RIVERA: And yeah, it is
22 that definition that has been so limiting and
23 restrictive so I know you said there's an open RFP.
24 This is something that we struggle with every single
25 year in terms of qualifications and funding, and I

1 think, again, people are awaiting trial at Rikers
2 because they were deemed to not have stable housing
3 to go back to. It is unbelievable that 5,000 people
4 detained pre-trial, many of them because they don't
5 have housing stability. People are languishing. 1,500
6 dollars a day, half a million dollars a year, it's
7 unbelievable.
8

9 Okay, so ongoing municipal vacancy rates
10 continue to impact service delivery and, in May 2022,
11 myself and many of my Colleagues we called upon the
12 Mayor to fully staff agency teams tasked with
13 securing affordable housing for qualifying New
14 Yorkers so where do we stand on staffing rates now
15 for agencies responsible for preventing and ending
16 homelessness and making sure that people are getting
17 into supportive housing?

18 ADMINISTRATIVE DIRECTOR BOSKET: I'll take
19 that first. For the Office of Supportive and
20 Affordable Housing at HRA, we are fully staffed.

21 COUNCIL MEMBER RIVERA: Fully staffed at
22 HRA?

23 ADMINISTRATIVE DIRECTOR BOSKET: For the
24 Office of Affordable and Supportive Housing. Not the
25 entire agency, ma'am.

2 COUNCIL MEMBER RIVERA: We know that.
3 Forgive me if this was asked, but the language
4 services, which ones are available for DHS outreach
5 teams in the field? What language services are DHS
6 outreach teams equipped to provide in the field?

7 ADMINISTRATIVE DIRECTOR BOSKET: I'd again
8 have to answer we're each here representing
9 supportive housing and not the street outreach teams
10 that are part of DHS efforts to engage individuals.

11 COUNCIL MEMBER RIVERA: Okay. I appreciate
12 your answers. I'm looking forward to the breakdown of
13 some of those numbers, especially for justice-
14 involved supportive housing. That is really a big
15 priority I think for this Council, and we look
16 forward to seeing any sort of progress in addition to
17 the RFP and we look forward to supporting that. Thank
18 you.

19 Thank you to the Chairs for the time.

20 CO-CHAIRPERSON SANCHEZ: I have a question
21 to ask on behalf of Council Member Velázquez. I will
22 paraphrase it since I cannot find it.

23 This one is for HPD and on our Land Use
24 side, what are the greatest obstacles that we have to
25 producing supportive housing in terms of in new

1 communities and, in particular, as we consider the
2 budget difficulties in front of us, does the agency
3 have any plans to reduce or walk back any previously
4 announced supportive housing projects?
5

6 ASSISTANT COMMISSIONER LEHMAN: Thank you
7 for that question. We always want to figure out ways
8 to finance more supportive housing at HPD. It takes a
9 variety of tools to be able to do that. It takes
10 land, it takes financing tools, and it takes your
11 partnership. These are all things we need more of to
12 be able to do more. If it passes, we think the City
13 of Yes zoning text amendments will allow us to build
14 more on the land we have so we think that will be a
15 great tool. On the financial side, this
16 Administration has made the largest capital
17 commitment to supportive housing in history, and that
18 has allowed us to do a lot and will allow us to do
19 more, but what we really need help with on the
20 capital side and on the expense side is help at the
21 federal level so the biggest thing that is slowing
22 down our new construction pipeline is the limitations
23 around low-income housing tax credits and volume cap
24 so any advocacy our LIHTC allocation, lowering the 50
25 percent test to the 25 percent test which is related

1 to volume cap, and more resources for rental
2 subsidies would allow us to build more new
3 construction supportive and affordable housing. We
4 also need support from our communities and local
5 elected officials, especially in cases where
6 supportive housing projects are subject to ULURP or
7 require other Council discretionary approvals.
8

9 CO-CHAIRPERSON SANCHEZ: No plans to walk
10 back any existing ULURPs?

11 ASSISTANT COMMISSIONER LEHMAN: No. At
12 this point, we believe we have the resources to meet
13 our supportive housing targets.

14 CO-CHAIRPERSON SANCHEZ: Okay. Thank you
15 so much.

16 CO-CHAIRPERSON AYALA: I just want to
17 clarify before we conclude this portion of the
18 hearing that there is no one here to respond to
19 questions regarding Council Member Nurse's bill
20 because the Administration was warned ahead of time
21 that this was part of the hearing questions this
22 afternoon?

23 ADMINISTRATIVE DIRECTOR BOSKET: I would
24 repeat that in my testimony I provided a statement
25 from HRA that at this point we cannot support this

1
2 legislation based on the frequency of reporting and
3 the privacy concerns that we have related to it.
4 However, we would be committed to working with
5 Council.

6 CO-CHAIRPERSON AYALA: Okay. Council
7 Member Holden and then we're moving on to public
8 testimony.

9 CO-CHAIRPERSON HOLDEN: Just a question,
10 HPD is accepting applications for hotel conversions
11 to supportive housing. How many did we get?

12 ASSISTANT COMMISSIONER LEHMAN: Thank you
13 for that question. We accept applications for any
14 type of project on a rolling basis including hotel
15 conversions. We have not had that much interest
16 (INAUDIBLE) and hotel conversions. We currently have
17 one active hotel conversion.

18 CO-CHAIRPERSON HOLDEN: Only one for the
19 entire city?

20 ASSISTANT COMMISSIONER LEHMAN: Only one.

21 CO-CHAIRPERSON HOLDEN: That's interesting
22 because I would think we would get a lot more. What
23 about for office buildings? Are you getting some of
24 those?

2 ASSISTANT COMMISSIONER LEHMAN: We do not
3 currently have any office conversion proposals in our
4 pipeline, but, again, are open and would be very
5 excited to talk to developers about those
6 conversions.

7 CO-CHAIRPERSON HOLDEN: Thank you, thanks
8 so much. Thank you, Chair.

9 CO-CHAIRPERSON SANCHEZ: Thank you.
10 Council Member Ayala will be right back.

11 Just one more from me on the 15,000 units
12 of supportive housing to be produced under NYC 15/15,
13 are we on track?

14 ASSISTANT COMMISSIONER LEHMAN: Just to
15 take a step back again, the 15,000 unit commitment is
16 half congregate, 7,500 units, again congregate are
17 single sites where it's usually a mix of affordable
18 and supportive apartments, and then the other half,
19 the other 7,500, are scattered site. The congregate
20 program has been very successful. We are on track to
21 meet our accelerated goal of financing all 7,500
22 congregate units by the end of 2028.

23 I'll hand it off to Mike to talk about
24 scattered site.

1
2 ADMINISTRATIVE DIRECTOR BOSKET: The
3 scattered site has been more difficult primarily
4 because, as we've discussed, scattered site relies
5 heavily on the retail rental market here in New York
6 City, and we are having an affordable housing crisis
7 and so the three agencies sitting at this table are
8 aware of the concerns around our ability to meet the
9 7,500 scattered site units and are actively
10 discussing that.

11 CO-CHAIRPERSON SANCHEZ: Where are we
12 today?

13 ADMINISTRATIVE DIRECTOR BOSKET: We're
14 still in discussions regarding that.

15 CO-CHAIRPERSON SANCHEZ: Where are we
16 today in terms of the 7,500 unit goal?

17 ADMINISTRATIVE DIRECTOR BOSKET: 1,300
18 awards approximately.

19 CO-CHAIRPERSON SANCHEZ: 1,300?

20 ADMINISTRATIVE DIRECTOR BOSKET: Yes.

21 CO-CHAIRPERSON SANCHEZ: Okay. That is
22 alarming. Thank you.

23 Thank you to all of the members of the
24 Administration for your participation in today's
25 hearing.

ADMINISTRATIVE DIRECTOR BOSKET: Thank
you.

COMMITTEE COUNSEL KILAWAN: Thank you. We
are now going to move to public testimony with the
following panel, Karim Walker, Roxanna Henry,
Jennifer Akchin, Michael Andersson, Sandra Gresl, and
Ramon Leclerc.

As a reminder, you all will have two
minutes to testify, and you can, of course, submit
your full written testimony to us afterwards. We have
a lot of people registered to testify so please be
mindful of the clock.

All right, you may begin when ready.

KARIM WALKER: Thank you for taking the
time for your audience. My name is Karim Walker. I am
an Outreach and Organizing Specialist with Safety Net
Project at Urban Justice Center. For those who
haven't heard of the SNP, we provide direct services
to many homeless New Yorkers from food, shelter,
legal advices, legal services, what have you. I'm
here today to speak about the City's practice of
conducting homeless sweeps and the need for further
transparency around the way the City forces street
homeless individuals out of public sight. SNP works

2 with many street homeless clients who have been swept
3 by the City, forced to leave their homes, and had all
4 their personal belongings tossed in the back of a
5 Sanitation truck and compacted. We support them to
6 uphold their rights, deal with traumas and sweeps,
7 and to replace their belongings, important documents,
8 and more. For those who are unfamiliar with this
9 practice, sweeps are an interagency initiative
10 involving the Department of Homeless Services,
11 Sanitation, NYPD, Parks Department, and on occasion,
12 depending on where the sweeps take place, the
13 Department of Transportation where the City forces
14 street homeless folks to relocate while they throw
15 away all their personal property. The City has
16 performed approximately 5,000 of these sweeps over
17 the past year so it comes out to about 100 a week
18 across the boroughs. This bill would ensure that the
19 public is aware of the volume and the frequency of
20 these sweeps. SNP staff, myself included, are often
21 present at sweeps to help prevent the seizure and
22 destruction of our clients' personal belongings, and
23 we have seen firsthand the terrible impact that
24 sweeps have had on people living on the street. We
25 are currently working with clients at an encampment

1 in Manhattan, in fact you spoke with them earlier
2 this afternoon, who are being swept by the City on a
3 weekly basis without any prior notice and having had
4 all their property destroyed including belongings
5 that they need to stay warm in below freezing
6 temperatures. As we all know, it was pretty cold
7 these last couple of nights. This has been incredibly
8 traumatizing for our clients, and we are also working
9 with wheelchair client who is recovering from
10 multiple surgeries and has experienced over 20
11 sweeps, even sometimes without notice over the past
12 year. Repeated sweeps have slowed their physical
13 recovery and inflicted serious psychological harm as
14 they live in constant fear that the City is going to
15 return and destroy all of their belongings. The City
16 purports to carry out sweeps to connect homeless
17 people with homeless services including housing, but
18 we know for a fact that sweeps do not...

20 COMMITTEE COUNSEL KILAWAN: I'm going to
21 ask you to wrap just in consideration of everyone's
22 time.

23 KARIM WALKER: That was basically all I
24 had to say but thank you.

2 COMMITTEE COUNSEL KILAWAN: Okay, thank
3 you. Sorry about that.

4 ROXANNA HENRY: Hi. My name is Roxanna
5 Henry. I work with Karim at Safety Net Project. Thank
6 you all for inviting us over and the opportunity to
7 testify before today regarding oversight of
8 supportive housing. I am submitting this testimony on
9 behalf of the Urban Justice Center and the Safety Net
10 Project. The Urban Justice Center assists thousands
11 of individuals each year with anti-eviction defense,
12 legal service, and public benefits and homeless
13 advocacy with the Department of Homeless Services
14 agency.

15 As you know, supportive housing is an
16 evidence-based model of housing and a solution for
17 homelessness for people with disabilities that
18 provide permanent housing attached to rental
19 assistance subsidies and paired with supportive
20 services to improve housing stability including case
21 management. I want to emphasis especially the
22 psychiatric supports that it's a lifeline for
23 thousands of New Yorkers with disability languishing
24 in shelters and on the street because of a broken and
25 unfair rental market. The Safety Net Project works

1 with a significant amount of people each year to both
2 apply for and living in supportive housing. While
3 supportive housing is a needed and evidence-based
4 intervention, it is rife with discriminatory
5 practices of creaming that screens out the most
6 defenseless tenants during the interview process. The
7 supportive services that providers claim to provide
8 are often nonexistent, paternalistic, and punitive,
9 resulting in clients having unaddressed apartment
10 repairs and being forced into eviction proceedings.
11 We hear from our clients time and time again that
12 supportive housing is not that supportive. New York
13 City is currently experiencing the worst homelessness
14 crisis since the Great Depression as we all know, and
15 New York City must exhaust every effort to move
16 homeless people into permanent housing. I'll wrap it
17 up one more time. What I really want to say is
18 evictions are harmless (sic) and traumatic and, for
19 folks who are living in supportive housing to have to
20 go through that process, it's just horrifying. In
21 addition, supportive housing providers must help
22 those folks with the rent arrears with the one-shot
23 deal and not just tell them to go get a one-shot
24 deal. They need to provide wraparound services for
25

1 these clients. I also want to add that in a question
2 regarding language for the sweeps, there is no
3 language support or translation for people in need
4 when they're going through the sweeps.
5

6 COMMITTEE COUNSEL KILAWAN: Thank you so
7 much.

8 MICHAEL ANDERSSON: Hi. Thank you for
9 hearing my testimony. My name is Michael Andersson.
10 My pronouns are he and him. I live in North Central
11 Bronx which is District 11. I've been a member of
12 SHOUT since April 2021, and I've been a volunteer at
13 NAMU NYC for the last 15 years. I'm submitting my
14 testimony for the record. I will be sharing some key
15 highlights for the Council to think about.

16 I was diagnosed with bipolar disorder and
17 PTSD back in 1997. For eight or nine years, I
18 struggled in and out of psych hospitals with suicidal
19 ideation, depression, and mania, all related to
20 bipolar and PTSD. In 2005, I was homeless and was
21 hospitalized in a psychiatric ward. I ended up
22 staying for three months, and they released me to
23 supportive housing to the agency that I've been since
24 2005. They released me to a roommate situation in
25 scattered site housing. I had two roommates. I had my

1 own room. There was a lot that was wrong with the
2 situation. I didn't have a lock on my door. Of my two
3 roommates, one would put food under the bed and
4 another would leave food out. There were roaches
5 everywhere. I couldn't eat in the kitchen because of
6 it. Social workers were good at coming three times a
7 week to count my meds but, apart from that, they
8 never did anything about my roommates. I had to live
9 for two years with those roaches. I was eating at
10 Burger King every night. It was hard to live in these
11 conditions, but it did make me want to graduate much
12 faster. Fifteen years ago, I did graduate to my own
13 one-bedroom in the Bronx. It is a slumlord situation.
14 We've had great case workers, but they keep trying to
15 get repairs done from the landlord and management
16 company, and it's like pulling teeth. I've had water
17 leaks and part of the ceiling cave in, and when the
18 super does actually do repairs, he is often
19 dismissive. I don't feel like it's 100 percent my
20 home and, even though I do believe it's permanent
21 supportive housing, there are rules. I've always
22 gotten the feeling that I can't really entertain or
23 have people stay over because the provider stresses
24 strongly that we want to make sure you're not
25

1 harboring people. Those are just some of the examples
2 from my experience. Thank you for hearing my
3 testimony.
4

5 COMMITTEE COUNSEL KILAWAN: Thank you so
6 much.

7 SANDRA GRESL: Good afternoon. Thank you
8 for your time and attention. My name is Sandra Gresl,
9 but I'm reading testimony today on behalf of Mrs.
10 Antoinette Lane who is a member of SHOUT, the
11 Supportive Housing Organized and United Tenants.

12 Transparency, hire qualified staff, staff
13 should not bring their personal feelings to work,
14 hire qualified people. No accountability within the
15 supportive housing system. The case managers, project
16 managers, directors of these housing programs do not
17 have the adequate training to hold these various
18 positions. Unfortunately, the professionals in these
19 positions have been promoted from within the agency
20 they currently work within and lack the training and
21 experience to have the direct contact with the
22 clients they are supposedly providing the services
23 to. Thank you.

24 RAMON LECLERC: Good afternoon. My name is
25 Ramon Leclerc, he/him/his pronouns. I'm a SHOUT ally

1 and a representative of New Alternatives for homeless
2 LGBTQ youth. At one point, I was a supportive housing
3 applicant 13 years ago when I aged out of foster
4 care. There needs to be an improvement, screw that,
5 an overhaul of the process for people aging out of
6 foster care because right now as it stands, if your
7 only method of approval is aging out of foster care,
8 it expires at the age of 24. If you have no other
9 underlying conditions, you are evicted from your
10 supportive housing apartment at the age of 24, and
11 you're jumping from institution to institution, from
12 foster care to supportive housing then into the
13 shelter system. What is the point? There was a lot
14 spoken about today of permanent supportive housing.
15 There is no permanent supportive housing for people
16 who are aging out of foster care. Think about it. You
17 get three years then what.

18
19 Also, I want to move on to the safety in
20 supportive housing buildings. A few years ago at New
21 Alternatives, we had a young person murdered by an
22 older person in the lobby with no effort of anyone to
23 intervene in a situation that could have been
24 avoidable. The supportive housing system needs a
25 total overhaul, and there are so many falsehoods I

1 heard in the Administration's testimony that I don't
2 have time to get into right now.

3
4 JENNIFER AKCHIN: Good afternoon. My name
5 is Jenny Akchin, and I'm a Staff Attorney at TakeRoot
6 Justice. I'm also an ally and supporter of the
7 Supportive Housing Organized and United Tenants or
8 SHOUT.

9 I first want to thank Deputy Speaker
10 Ayala and Aminta and David for organizing this
11 hearing today. I will just say it's a radically
12 different tone than the past oversight hearings, and
13 we think that's so important and a first step towards
14 this overhaul of supportive housing that Ramon is
15 referencing. All I can say is that by listening to
16 and believing the stories of the tenants that you're
17 hearing today, that's the way that we're going to see
18 this change happen and so thank you for taking that
19 first step.

20 I have submitted written testimony, and I
21 do hope that the Committee reviews it. I want to
22 affirm the experiences of the tenants that have
23 spoken today. As a tenant advocate, I just need to
24 see it once for the record, supportive housing
25 tenants are tenants and, in spite of the efforts by

1 providers and agencies to convince them otherwise, by
2 law and in practice, if someone is paying rent for
3 their own home, they are entitled to every right of
4 every other tenant in New York City. There is no
5 reason why someone's psychological or medical
6 diagnosis should prevent them from having access to
7 the same rights and privileges as any other tenant,
8 including the peaceful use and enjoyment of their
9 home. That's not happening today.
10

11 To that point, I would like to read the
12 testimony of an anonymous tenant. I know DOHMH
13 referenced earlier that they don't know if they have
14 a policy on retaliation. This tenant didn't feel
15 comfortable testifying today because of a credible
16 fear of retaliation. I think you'll glean it from the
17 testimony. This is not an illusion. This is really
18 happening and needs to be addressed.

19 City Council Members, thank you for
20 giving me the opportunity to make this statement. I
21 have been a supportive housing tenant for more than a
22 decade. During that time, I have had many different
23 housing case workers due to the high turnover rate of
24 my housing provider.

25 Do I have permission to continue?

1
2 The last six years have been the most
3 difficult of my life. I have always had strained
4 relations with my provider. Six years ago, my
5 provider inspected my apartment and decided that the
6 floor was in bad condition and that they would have
7 to notify the landlord. Subsequently, I was called
8 down to the main office and forced to sign a letter
9 stating that I was financially responsible. It was
10 inferred that if I did not sign, my housing stipend
11 would be stopped, essentially meaning that I would
12 end up being homeless. From that point on, I started
13 on a downward spiral emotionally and experienced
14 stress-related health issues. I started looking into
15 what rights I had. A complicated grievance process
16 and ambiguous guidelines left me few options. I
17 called the local State Office of Mental Health, OMH,
18 and complained about my provider's convoluted
19 grievance process. The response I got, and I'm
20 paraphrasing, was that's the way we want it. I
21 obtained a copy of the supportive housing guidelines
22 and found these to be very ambiguous on the subject
23 of a tenant being terminated from a supportive
24 housing program.

1
2 Just to conclude, we heard a lot today
3 from DOHMH about the guidelines that they have for
4 their providers, there were repeated references we
5 have guidelines, we provide training, but guidelines
6 aren't enough, and particularly when those guidelines
7 are ambiguous, we're leaving tenants out to dry. We
8 need regulations. We need policies. We need uniform
9 requirements. Otherwise, the discretion is going to
10 allow for further abuse and further harassment of the
11 tenants in supportive housing programs. Thank you.

12 COMMITTEE COUNSEL KILAWAN: Thank you to
13 this entire panel for your testimony.

14 We're now going to move to a virtual
15 panel, and this panel will be comprised of Nicole
16 McVinua, Olivia Lazan, I apologize if I'm
17 mispronouncing your name, and James Dill.

18 Over now to Nicole McVinua. Just
19 requesting that Staff please unmute Nicole.

20 NICOLE MCVINUA: Hi. Good afternoon. My
21 name is Nicole McVinua, and I am the Director of
22 Policy at Urban Pathways. We are a non-profit
23 homeless services and supportive housing provider
24 serving over 2,000 single adults annually through a
25 full continuum of services with 703 of these

1 individuals residing in congregate and scattered site
2 supportive housing. Thank you for the opportunity to
3 testify today.
4

5 I also just wanted to thank the folks
6 with lived experience who have testified so far. We
7 are trying really hard at Urban Pathways to be
8 responsive to our tenants, and so I appreciate you
9 all sharing your stories of your experiences in
10 supportive housing as well.

11 I want to start by saying that we are
12 deeply concerned about the Mayor's 15 percent PEG and
13 the disastrous impact that the remaining 10 percent
14 cut will have on supportive housing, homeless
15 services, and the myriad of non-profit human services
16 and social programming that the people we serve in
17 our communities rely on at a time when housing and
18 community services are needed more than ever. I want
19 to be very clear that non-profit organizations cannot
20 do the same amount of work with less funding. If 10
21 percent cuts are passed down to City-contracted non-
22 profit providers, Urban Pathways will be forced to
23 reduce services resulting in serving fewer people and
24 possibly closing our program altogether. Well before
25 budget cuts, the City has long paid poverty wages to

1 the contracted human services workforce that are
2 nearly 30 percent less than government employees'
3 salaries for equivalent work. Years of this type of
4 under-investment has created the current crisis of
5 understaffing being faced by providers that is
6 putting workers and the people we serve at risk. At
7 Urban Pathways, we currently have a 22 percent staff
8 vacancy rate across the organization, and we also
9 have high rates of turnover, and these are the two
10 things that I repeatedly hear from our supportive
11 housing residents whose services are negatively
12 impacted by these turnovers...

14 SERGEANT-AT-ARMS: Time has expired.

15 NICOLE MCVINUA: When they have to share
16 their often traumatic stories with multiple case
17 managers, they have new staff coming in that have to
18 get caught up with their cases, and the dedicated
19 staff that we retain are suffering from burnout and
20 are overburdened so the lack of meaningful wages and
21 no true cost of living adjustments over multiple
22 years has been demoralizing to our workforce who are
23 providing 24/7 care to people most in need.
24 Meanwhile, multi-billion-dollar cost of living
25 investments are made in other sectors so we're

1 calling on the City to pay our workforce fairly so
2 that they can provide the services that people need,
3 and we're calling for a 3.2 percent COLA in the FY-25
4 budget and also for the City to make a public
5 commitment of funding, at least a 3 percent COLA over
6 the next three years. We are also in need of
7 increased supports to effectively meet the evolving
8 needs of the people that we serve through increased
9 on-site clinical supports, better communication
10 between the hospital system and supportive housing
11 providers, improved referral and placement processes
12 to ensure that prospective tenants are matched with
13 the correct level of care and preferred locations,
14 and allowing and enabling transfers between
15 supportive housing and Level 2 housing as needed.

17 I have more details in my written
18 testimony on those.

19 COMMITTEE COUNSEL KILAWAN: Thank you.

20 NICOLE MCVINUA: Additionally, we're
21 calling on the City to improve access to supportive
22 housing for people exiting incarceration. Thank you
23 for your time.

24 COMMITTEE COUNSEL KILAWAN: Thank you,
25 Nicole. Over now to James Dill for testimony. James,

1 if you can wait a few seconds for Staff to unmute
2 you.

3
4 JAMES DILL: Okay. I'm Jim Dill, Executive
5 Director of Housing and Services, Inc. We provide
6 permanent supportive housing. We are a member of the
7 Supportive Housing Network of New York and full
8 support all of the Network's advocacy points for this
9 hearing. We will provide written testimony to
10 supplement the Network's testimony.

11 In my limited time here today, we
12 strongly advise against the PEG budget cuts to our
13 funding agencies, HRA, DOHMH, and HPD. The proposed
14 cuts will not produce cost savings but actually
15 increase costs by substituting predictable permanent
16 supportive housing costs with a volatile service cost
17 such as EMS, hospitalizations, police interventions,
18 and jail time that the unsheltered absorb. Recent
19 studies by the Corporation for Supportive Housing
20 shows that an unsheltered single adult absorbs
21 approximately 40,000 dollars annually in such City
22 resources. (INAUDIBLE) disparities have also produced
23 unintended cost increases. In winter of 2022, the
24 pandemic beleaguered and underfunded HRA's housing
25 placement process slowed down, creating an

1
2 unprecedented 10 percent average vacancy rate in the
3 citywide permanent supportive housing. In our written
4 testimony, we attempt to ballpark the opportunity
5 costs of these kinds of slowdowns that could amount
6 to millions of dollars in terms of shelter stayers
7 that aren't being able to move into permanent
8 supportive housing and people on the street not being
9 able to move into the shelters. To truly produce
10 savings, the underfunded budgets for HRA, DOHMH, and
11 HPD should be increased to avoid ultimately
12 unnecessary spending. I thank you for your time today
13 and invite anybody on the Committee to visit one of
14 our projects.

15 COMMITTEE COUNSEL KILAWAN: Thank you,
16 James, for your testimony, and thank you to this
17 panel entirely for your testimony.

18 We're now going to an in-person panel
19 comprised of the following individuals, Olivia Lazan,
20 Theodora Ranelli, Trish Taylor, Terry Holt, Tamar
21 Lavy, and Christopher Luggiero. I believe Rowan will
22 be testifying on behalf of Theodora.

23 You can begin.

24 TRISH TAYLOR: Can you hear me now?
25

2 COMMITTEE COUNSEL KILAWAN: Yeah, we can
3 hear you.

4 TRISH TAYLOR: Hi. My name is Trish
5 Taylor, and I'm a member of SHOUT. I lived in
6 supportive housing in New York City for 17 years. I
7 joined SHOUT because I want to help change the
8 conditions of supportive housing. My peers and I
9 experienced uncaring and abusive behavior from
10 provider staff. Based on my experience, supportive
11 housing does not live up to the name supportive. I
12 lived in congregate Level 2 supportive housing. We
13 were called clients and not tenants, and we did not
14 have a lease. We had an occupancy agreement. An
15 occupancy agreement does not grant the legal
16 protections of a lease. At one point, my provider
17 told me that they had to be my payee. I was not given
18 a choice, and neither were the other tenants. I later
19 found out that this was illegal. In order to access
20 our money, we had to go through a degrading process
21 and we were at the mercy of the program director and
22 case workers. The provider did not respect my
23 privacy. The staff would enter our rooms unannounced.
24 There was not a chain on the door so nothing could
25 prevent them from violating our privacy. Locked

1
2 mailboxes were not provided. The staff handled our
3 mail, and it was kept behind the front desk. Staff
4 would also discuss the personal business of the
5 tenants in common areas of the building. When the
6 provider was getting ready for an audit, the program
7 director and my case worker entered my room with
8 large garbage bags. They threw out most of my
9 belongings. I was in shock and I felt powerless. This
10 also happened to four other women. If they thought
11 that my room was cluttered, why didn't they offer to
12 help me? They conducted monthly room inspections.
13 Medication distribution was often handled in an
14 unprofessional manner. Many times the med room and
15 cart were left unattended and unlocked, and the staff
16 did not always check off the med chart. One day, five
17 or six of my friends were discussing our psychiatrist
18 and our meds. We realized we were all being given the
19 same med at the same dose. It made me wonder if they
20 were not conducting a research project without our
21 consent. SHOUT has been organizing around the issues
22 I named in addition to many others for over two
23 years, and yet agencies like DOHMH have been ignoring
24 us. In April, SHOUT attended a conference. I handed
25 SHOUT's demands to the head of DOHMH. We were

1
2 promised that they would meet with us. This was in
3 April, and now it is December. I would like to know
4 why are they not willing to meet with SHOUT. Thank
5 you.

6 TAMAR LAVY: Hello. Good afternoon. My
7 name is Dr. Tamar Lavy. I'm a dual board-certified
8 psychiatrist. I've trained and worked in New York
9 City's public system for 14 years. I have visited
10 numerous people who are living or who have sought to
11 live in supportive housing sites. I've been at
12 congregate living facilities, scattered site
13 apartments, everything in between including shelters
14 and the street during my work. SHOUT's S.A.F.E.
15 campaign demands, which you've all seen, are an
16 excellent guide that will help the system better
17 reach its stated objectives from the website that I
18 won't read. The chronic lack of attention paid to
19 tenants' concerns has led to re-traumatization, undue
20 suffering, direct harm, and significantly reduced
21 quality of life, and I wholeheartedly support every
22 aspect of the proposals.

23 Today, I want to bring attention to the
24 first demand. Stop discriminating against supportive
25 housing applicants on the basis of disability. It was

1 mentioned earlier. Supportive housing is not made
2 accessible to all those who need it. It's a systemic
3 issue, and it must be addressed. Many steps in the
4 application process are cumbersome and opaque, and
5 they contribute to a loss of agency on the part of
6 the person seeking services and to myself, as a
7 psychiatrist who's tasked with producing the
8 psychiatric evaluation which is part of the 2010-E
9 application form, which is I think obscured a little
10 bit in some of the discussions here, but it's
11 basically a bottleneck for a lot of people to get
12 into supportive housing. There are unspoken
13 expectations in place about how to present the
14 applicant in the proper light. I think of this as the
15 Goldilocks dilemma. Will their needs be interpreted
16 by the facility as too much, too little, or just
17 enough? How is it decided who is accepted or
18 rejected? What undue influence do the in-person
19 interviews and the apartment tours have? Are there
20 code words being used to convey certain types of
21 information to the housing provider? I often fear
22 speaking frankly about my patients' needs because of
23 these unspoken rules. Reports are therefore produced
24 that serve the agency's need instead of the patient's
25

1 needs, and it creates a tiered system of care. Full
2 transparency and accountability are required. People
3 should be able to present themselves fully, knowing
4 they will not only have the dignity of being housed
5 but the dignity of receiving needed care and support.
6 As such, I call for an overhaul of the supportive
7 housing application process. Patients, people,
8 applicants should not have to misrepresent their
9 level of disability to avoid homelessness. Let's hope
10 that we can plan for a place where people in need of
11 robust and supportive housing will have a place to
12 call home. Thank you.

14 ROWAN SHUMIN: Good afternoon. My name is
15 Rowan Shumin, and I'm a social work intern with
16 Mobilization for Justice, but today I'm reading the
17 testimony of Theodora Ranelli who was unable to be
18 here in person today.

19 My name is Theodora Ranelli. I've been a
20 supportive housing tenant for almost nine years in
21 scattered site housing and have been part of SHOUT
22 since the organization came together. I used to live
23 with roommates but currently live on my own, a change
24 that came after a long period of advocacy to get my
25 provider to honor a reasonable accommodation. The

1
2 takeaways I would like Council Members to have are
3 this. First, there are many barriers to access in the
4 application process. I first got into supportive
5 housing in 2015 after starting looking in 2012 or
6 2013. For my first interview, I was told by my care
7 coordinator to think of like a job interview so I
8 said okay, I'll talk about being independent, but
9 then they told me they couldn't give me housing
10 because in the interview they asked if I was suicidal
11 and I said no, but in my history there was a mention
12 of a history with suicide, and so they said you lied,
13 we will give you a chance to do it again but you have
14 to not lie. It was terrible. It's so hard to know
15 what you're supposed to say to these people. If they
16 say you're too mentally ill, they won't give you
17 housing, and, if they say you're too independent,
18 they also won't give you housing.

19 Second, the supportive services offered
20 by my provider have been both insufficient and
21 invasive. I did have a positive experience with one
22 staff member for seven years, which was rare, but
23 after he left we went through case managers in one
24 year. They would come for like 10 minutes and said
25 that they would be following up about things but

1 would always come back to it on my next visit and I
2 would have to just repeat myself. It felt like they
3 were just seeing if we were alive.
4

5 Some of my worse experiences with
6 supportive housing had to do with neglect on the
7 landlord and super's part. My provider would just say
8 the landlord is terrible, but you should be grateful
9 for having something and they didn't do much to
10 engage the landlord, like put on pressure or withhold
11 rent. We also faced harassment from the landlord. At
12 one point, someone on my floor called 3-1-1 and, even
13 though we didn't do it, the landlord called my
14 roommate and I and said we'll put you through hell if
15 you continue to call.

16 May I have permission to briefly finish?

17 Okay.

18 In Theodora's written testimony, she also
19 describes difficult experiences with roommates in
20 supportive housing and having an active reasonable
21 accommodation that the provider did not escalate so
22 I'd encourage you to look at the full written
23 testimony.

24 In conclusion, the best thing about being
25 a supportive housing tenant was that despite

1 everything I felt glad that I was in stable housing,
2 but, on the other hand, supportive housing should not
3 be gatekept. Everyone needs housing. The application
4 process should be more transparent. Everyone should
5 be able to live alone. I want to voice support for
6 SHOUT's S.A.F.E. campaign demands which make a
7 fundamental difference in all supportive housing
8 tenants' and applicants' lives.

10 OLIVIA LAZAN: Good afternoon, Deputy
11 Speaker Ayala, Chairs Holden, Lee, and Sanchez and
12 the honorable Members of the Committees. Thank you
13 for the opportunity to testify today. My name is
14 Olivia Lazan, and I'm the Project Coordinator of the
15 Veterans Assistance Project at the City Bar Justice
16 Center which is a non-profit civil legal aid
17 affiliate of the New York City Bar Association. Our
18 project provides veterans living at or below the
19 poverty line in New York City with pro bono legal
20 assistance on issues related to their veterans'
21 benefits.

22 Throughout my time at the Veterans
23 Assistance Project, I've spoken to countless
24 veterans, many of whom are living with post-traumatic
25 stress disorder and other conditions while

1 experiencing housing instability and, for many that
2 our Project assists, housing stability is directly
3 tied to a lack of mental health support for veterans.
4 One young veteran we assisted emerged from the Army
5 with a broken back, pelvis, schizophrenia, and no
6 potential for veterans' benefits or support, and he
7 experienced months of homelessness while living in a
8 dissociative state and was denied therapy. Under the
9 Adams' Administration, there's been a huge increase
10 in subway arrests and summonses with both figures by
11 around 50 percent in 2022 and again by over 50
12 percent this year just so far. Last month, the Mayor
13 said that the City had on average involuntarily
14 hospitalized 137 people a week since May. Without
15 more specific information, it was unclear how many of
16 them were experiencing homelessness, how many of them
17 were veterans, and careful documentation of removals
18 as suggested in Intro. 1153 would increase the
19 ability of City agencies and advocates to make sure
20 that no one experiencing homelessness falls through
21 the cracks. Intro. 1153 should also help support the
22 decision-making process for future policy, which is
23 especially important given these increased levels of
24 police engagements and removals.
25

1
2 Veterans experiencing homelessness have
3 unique circumstances that should be specifically
4 addressed. Without determining if someone is a
5 veteran when making a removal, they may not be
6 offered the correct resources or benefits. According
7 to the types of outcomes report that the bill would
8 ensure, a result could be to state that the
9 individual had received a voucher, but more specific
10 language or procedure regarding offering housing
11 vouchers may also be helpful, particularly for
12 veterans who would need to be made aware of specific
13 programs such as HUD-VASH. This could also be an
14 opportunity to track if any veteran-specific mental
15 health resources or other resources were processed.

16 Intro. 1153 is a positive step towards
17 increased transparency for New Yorkers, but we also
18 owe it to our veterans to consider them particularly.
19 Thank you for your time. Please refer to the written
20 testimony for more detail.

21 COMMITTEE COUNSEL KILAWAN: Thank you. I
22 just want to confirm that Terry Holt and Christopher
23 Luggiero are not here.

24 TERRY HOLT: I'm here.
25

2 COMMITTEE COUNSEL KILAWAN: All right. You
3 are to be on this panel.

4 TERRY HOLT: Hi, my name is Terry Holt.
5 I'm currently homeless, living on the streets and in
6 the subways of your New York City subway station. I
7 live in the Bryant Park Train Station on 42nd Street
8 in Times Square and I have been a resident of that
9 train station for about three years. Meanwhile, your
10 Breaking Ground, your BRC organization has promised
11 me an apartment. I have never gotten keys to an
12 apartment. I've tried to work closely with BRC and
13 Breaking Ground, and they keep dangling keys, saying
14 oh, you're going to get an apartment someday, you're
15 going to get an apartment someday, and I never get an
16 apartment. I'm just sitting there wondering why I'm
17 the one that fell through the cracks, and I'm
18 wondering if any of you City Council people can make
19 calls to Breaking Ground on my behalf to have them
20 give me keys to an apartment so I not have to spend
21 the next winter on your sidewalks. Please help me,
22 City Council.

23 Basically, I have friends that are
24 homeless on these streets that are suffering the same
25 thing. Your Breaking Ground keeps promising them

1
2 apartments, and people are losing hope out there, and
3 it's getting cold, and you guys gave the migrants a
4 whole hotel. What about us Americans?

5 CO-CHAIRPERSON AYALA: Do you have an
6 application pending before Breaking Ground or BRC?

7 TERRY HOLT: Yes, I do.

8 CO-CHAIRPERSON AYALA: Okay.

9 TERRY HOLT: And those people keep playing
10 games by saying oh, you gotta be here at this time,
11 you gotta be here at that time. They keep saying oh,
12 you got a social worker. We're not going to work with
13 you if you're working with a social worker so these
14 people are trying to intimidate me and trying to
15 bully me and find reasons to keep me homeless and my
16 friends homeless, and we're just wondering when this
17 is going to stop. You guys need to start giving out
18 keys to homeless people instead of saying oh, you
19 gotta go to a shelter and spend six months in a
20 shelter and you gotta go here and go to this
21 organization, but if you're working with this
22 organization, this organization actually has the
23 apartments, is not going to work with you because
24 you're working with that organization. We're just
25

1 caught in a David and Goliath system. Please help me
2 conquer Goliath.

3
4 CO-CHAIRPERSON AYALA: Thank you.

5 TERRY HOLT: Thank you.

6 COMMITTEE COUNSEL KILAWAN: Thank you to
7 this panel for your testimony.

8 We're now going to move to the next
9 panel. The next panel is going to be comprised of
10 Herbert Sweat, Rabah Belkebir, Abdel Jamila, Jenny
11 Laurie, and Yarmila Lebron.

12 HERBERT SWEAT: Good afternoon. My name is
13 Herbert Sweat. I'm a veteran of the Vietnam War. I'm
14 also a Veteran Service Officer. I'm also a
15 Coordinator in Manhattan Veterans Court.

16 CO-CHAIRPERSON AYALA: Do you not want to
17 sit? You can sit.

18 HERBERT SWEAT: I want to stand today in
19 honor, I didn't say that in the beginning. I want to
20 stand today and give my 10 seconds to a prayer and
21 the gratitude of today's honor which is Pearl Harbor
22 Day.

23 Today is an honorable day, and I'm glad I
24 came here, and I thank you, Chairperson and also all
25 the other honorable people that are serving on this

1 Committee. I heard you speak, Chairman, and you spoke
2 in our defense. Our defense as a soldier is very,
3 very important to the United States of America, but
4 we seem to always come in late. We seem to always
5 have to dig deeper and deeper for you to care for us
6 and the respect of how we come home. We come home
7 with a lot of pain, wounds, and misunderstandings
8 about where we stand. I want to thank you though for
9 having this hearing. I learned a lot today. I'm going
10 to take it back to the courts because the veterans
11 need, when they leave there, to be able to have
12 somewhere to go. It's very difficult for them to get
13 it, and it's also our citizens here, I want to thank
14 you for sitting this time and I salute all of you and
15 I will fight for you at any time for the rest of my
16 life. I served in Vietnam in the Tet Offense in 1967.
17 I didn't think I was coming home, but you brought me
18 home, and I appreciate that. I just want y'all to
19 work very hard on understanding the veterans' point
20 here. We've served this country. If no one else
21 deserves to have decent housing or decent care, I
22 suffer from post-traumatic stress disorder and I've
23 been to long-term hospitals, so we have beautiful
24 long-term hospitals, but what's happening is
25

1 uncontrollable for me to even dream when I sit in
2 court and listen to these veterans that are looking
3 for even a little room somewhere, somewhere, but they
4 served and they deserve this. That should be a law.
5 You can't let a veteran sit in a place that he's
6 homeless, out in the street. Yes, I spoke, Chairman,
7 that I understand what happened on the Borden Avenue.
8 I was there when the first man died. I revived him
9 three times before an ambulance got there, three
10 times. The police took me to 23rd Street. They put me
11 on the 17th floor which was the psych ward, and I
12 stayed there for half a year before they released me,
13 but then I came out to assist these veterans.
14 Veterans need your assistance. We can't do it no more
15 once we done did a war so place, Board, Committee
16 People, leaders that you are to me now, take care of
17 us. Think of what you heard today. Identify with
18 people that sat here and explained to you the best
19 they could, but they can't break down this housing
20 project because New York is so big and it's a giant,
21 but you got that power. I heard a few of you speak to
22 them with that power. I don't want to take up nobody
23 else's time. I want to salute you and let you know
24 thank you. [APPLAUSE]
25

2 COMMITTEE COUNSEL KILAWAN: Thank you for
3 your testimony.

4 Just want to confirm that Rabah Belkebir,
5 Abdel Jamila, Jenny Laurie, and Yarmila Lebron are
6 not here.

7 All right, then we're going to move to
8 our next panel. Our next panel is going to be
9 comprised of Deniece Mills, Laureena Novotnak, Joelle
10 Ballan-Schwan, Siya Hegde, Sean Ramdhanie, Elizabeth
11 Malkey.

12 You can begin when ready.

13 UNKNOWN ON BEHALF OF ELIZABETH MALKEY:
14 Hi. Thank you. I'm reading this testimony on behalf
15 of Elizabeth who had to leave at 3 for a medical
16 appointment.

17 We know you guys really well. We know
18 that you know VOCAL and the work that VOCAL does.
19 VOCAL-NY has long said that supportive housing is one
20 of the most critical resources we have to save and
21 uplift people from the dangers of an undignified
22 position of homelessness. Members of our organization
23 who are able to gain a permanent place to live and
24 receive high-quality services through supportive
25 housing have had dramatic changes to their lives for

1 the better, and their stories really are proof that
2 supportive housing is a worthy investment because it
3 allows some of the most talented and capable New
4 Yorkers to contribute their full selves to their
5 communities. In recent years, however, we've seen
6 disturbing reports from our members about the current
7 state of supportive housing programs around our city
8 and state. We have lost leaders to overdose despite
9 the fact that the supportive housing units they lived
10 in were supposed to include access to services to
11 prevent exactly this tragedy. We have watched as
12 providers reject applications from people who have
13 clear need for support services while filling units
14 with individuals and families who simply have the
15 need for affordable homes and have nowhere else to
16 turn. It is critical that we work to address these
17 flaws in our supportive housing system. The expansion
18 of supportive housing we saw in 2015 is one of the
19 most significant victories in the fight to end
20 homelessness in our city in recent memory and even
21 the international community recognizes New York's
22 supportive housing program as one of the most robust
23 investments in a housing-first model by a
24 municipality of our size. Given these things, we have
25

1 a duty to fund and regulate supportive housing so
2 that it lives up to this promise.

3
4 For the sake of time, I'm going to skip
5 reading out all of the demands, but I do strongly
6 uplift and encourage you to read the demands that
7 SHOUT has listed out in testimony earlier today and
8 is in the paper copy that we distributed earlier.

9 In my last 15 seconds, I would also just
10 want to say that we strongly support Intro. 1153
11 which would provide meaningful data on the practice
12 of so-called encampment sweeps and what their
13 outcomes are. We saw a few months ago when the Adams'
14 Administration started this on the subway a really
15 embarrassingly low number of people being placed, and
16 we think that's it imperative we understand the full
17 cost of these sweeps, both on the human level and the
18 fiscal level to our city. Thank you.

19 SIYA HEGDE: Good evening, Deputy Speaker
20 Ayala and all those Council Members who were kind
21 enough to stay for this marathon hearing. My name is
22 Siya Hegde, and I'm a Human Rights lawyer at the
23 National Homelessness Law Center, a law and policy
24 organization working to decriminalize and end
25 homelessness while defending human rights and civil

1 liberties. My testimony in support of Intro. 1153
2 also amplifies our position that the forced removal
3 of unsheltered individuals from encampments is
4 unlawful, punitive, and inhumane. The Council must
5 implement proposals that shift away from encampment
6 raids and towards compassionate evidence-based
7 housing-first solutions to solve our City's
8 homelessness crisis, and this recommendation I must
9 note is supported by the United Nations Human Rights
10 Committee's recent statement calling for the
11 abolition of laws and policies criminalizing
12 homelessness at all levels. Recent years have seen
13 the rise of citywide policies that criminalize the
14 poor and unhoused, inviting more law enforcement
15 intervention and moving unsheltered homeless people
16 off the streets rather than into adequate housing.
17 The 2022 Sweeps Directive authorized the NYPD to
18 crack down on encampments in public spaces deemed not
19 meant for human habitation. Twelve days in, 239
20 locations were removed. Five and a half months in,
21 this number had increased nearly tenfold to 2,331
22 locations. Yet, as of January 2023, only three people
23 secured permanent housing and, as of April 2023, an
24 estimated one in every three encampment locations
25

1 will be shuffled. Simply put, these sweeps neither
2 end homelessness nor meaningfully reduce encampments.
3 Instead, they are violent, intrusive, destabilizing
4 events that further trap unsheltered homeless people
5 in vicious cycles of poverty, expose them to race,
6 gender, and health-based discrimination, impede their
7 ability to access vital documents, employment,
8 essential medical services, I can go on and on,
9 stable education, and they put them at risk of more
10 policing and more contact with the criminal legal
11 system. Sweeps also erode trust and rapport between
12 homeless people and the entities tasked with ensuring
13 them a safety net, causing many of them to stay
14 outside longer.
15

16 If I may have just a few more seconds.

17 Intro. 1153 would be a critical
18 accountability measure to ensure that the public
19 knows where its taxpayer dollars are going, but, on
20 its own, it is wholly insufficient in capturing the
21 long-term financial impacts of criminalizing and
22 policing homeless people. The NYPD's budget for 2023
23 exceeded 5.8 billion dollars while the City has
24 expended additional costs as we heard in warehousing
25 homeless people in inadequate shelter, detention, and

1 forced treatment facilities. This is fiscally
2 irresponsible. A housing-first approach permanent
3 supportive housing and wraparound services would be a
4 proven cost-saving measure estimated at 68 dollars a
5 day. Our solution to homelessness must be rooted not
6 in an enhanced police budgeting and police presence
7 but in ensuring that everyone has access to safe,
8 decent, and affordable housing. Thank you, again, for
9 the opportunity and welcome all questions. Thank you.
10

11 LAUREENA NOVOTNAK: Hi. My name is
12 Laureena Novotnak. I'm a Senior Attorney with Mental
13 Hygiene Legal Service in the Appellate Division First
14 Department. I have submitted written testimony which
15 is going to include much more detail that I provide
16 today in this hearing.

17 I'm here in a personal capacity. I'm not
18 representing the agency, but the work that we do, if
19 you're unfamiliar, is we, among other things,
20 represent individuals who are inpatient in
21 psychiatric hospitals, whether they are there
22 voluntarily or involuntarily, and what we're seeing
23 on the ground is a really extraordinary lack of
24 oversight and a really inappropriate intrusion on
25 patient care by supportive housing providers. We're

1 seeing patients who have been declared ready for
2 discharge by their clinical team, and the supportive
3 housing providers who have no clinical training are
4 coming in and saying you're not ready to come home,
5 which is, per the City Council, the supportive
6 housing tenants' bill of rights, supportive housing
7 tenants are tenants so it's completely inappropriate
8 for any landlord to come in and say you can't come
9 home but we're seeing in some extreme cases patients,
10 clients, who are discharged from the hospital, they
11 go home and their providers won't let them in the
12 building. We've had entry-level testimony of the
13 barriers to getting into housing but, once you're in
14 housing, where is the oversight in keeping you
15 housed. I would invite further question and further
16 oversight, and you can look to other models of where
17 Mental Hygiene Legal Service does provide
18 representation. We're a State agency. I understand
19 you don't have the authority to make us the
20 representatives for these supportive housing tenants
21 in particular, but we have oversight over residents
22 who are in licensed facilities for the Office of
23 People with Developmental Disabilities, and it's a
24 really significant body of regulation. In that
25

1 instance where if we have a client who is an opioid
2 consumer and their residence is saying you can't come
3 home, there's a whole process that we are there to
4 provide representation for. There's notice,
5 opportunity for a hearing, there's due process, and
6 that simply does not exist for our patient clients
7 who residents in supportive housing. Thank you.

9 SEAN RAMDHANIE: Good afternoon.

10 Greetings, Chair and all the Members of the
11 Committee. I am grateful for the opportunity to
12 testify before you. My name is Sean Ramdhanie. I'm
13 the Program Director of Borden Avenue Veterans
14 Residence. The Institute for Community Living, ICL,
15 where I work as the City's largest providers of
16 housing, behavioral and mental health services
17 supporting about 12,000 New Yorkers each year
18 including veterans. Many of our participants are
19 facing the most significant challenges. We pride
20 ourselves on a whole-health approach which considers
21 everything a person needs to be well. To that end, I
22 want to note that it's wonderful to see (INAUDIBLE)
23 by related Committees here today. Our interventions
24 alone, be it housing or counseling or medication,
25 will not help people overcome the significant

1 obstacles they face while getting better. We must
2 work together to address all of the person's basic
3 needs. A big one, of course, is housing in the case
4 of people with the most significant histories of
5 trauma, and supportive housing has proven to be an
6 extraordinary successful model. Several supportive
7 housing programs have units designed for veterans
8 including our Nevins Street Apartment which we have
9 placed 18 veterans last year. Nevins is the epitome
10 of housing and healthcare and best practices model
11 for replication where they get a beautiful
12 arrangement and support with health, employment,
13 education, nutrition, socialization, and all of their
14 needs. Overall, we placed over 100 veterans a year in
15 permanent housing including in rental apartments
16 using housing vouchers such as CityFHEPS, HUD-VASH,
17 Section 8 for veterans. Many of these vets come to
18 the Borden Avenue Shelter, the only shelter in the
19 city for veterans. I'd like to pause and thank
20 Council Member Holden for the continued investment in
21 the Borden Avenue Veterans shelter. Despite the
22 successes, there have been challenges with the
23 scattered site model of supportive housing in parts,
24 specifically for our City's supportive housing
25

1 program funded by DOHMH. I will submit further

2 (INAUDIBLE)

3
4 JOELLE BALLAN-SCHWAN: Hello. My name is
5 Joelle Ballan-Schwan. I'm with the Supportive Housing
6 Network of New York. We're a membership and advocacy
7 organization representing the developers and
8 operators of supportive housing. We join non-profits
9 across the board in urging the Council to oppose
10 Mayor Adams' hiring freeze and the remaining 10
11 percent of the 15 percent PEGs. These cuts will have
12 disastrous impacts on the City's supportive housing
13 system and the already strained agencies charged with
14 overseeing mental health and housing programs and
15 projects. HPD, DHS, HRA, DOB, DCP, and DOHMH must be
16 insulated from PEGs. The City must also keep the
17 promise of its NYC 15/15 initiative and reallocate
18 the thousands of currently unawarded units. NYC 15/15
19 was a promise to create 15,000 units of supportive
20 housing units over 15 years, and it envisioned an
21 even split between new development of congregate and
22 scattered site. Due to many difficulties with the
23 scattered site model including underfunding and low-
24 quality apartments, eight years into the plan and
25 only 17 percent of scattered site contracts have been

1 awarded versus 80 percent of congregate, leaving
2 6,220 unawarded units untapped for homeless
3 households. The infrastructure of first-generation
4 supportive housing is also crumbling and in dire need
5 of preservation. For the City to see NYC 15/15
6 through while ensuring we don't lose a single
7 existing unit, it should adopt the Networks
8 Reallocation Plan and reallocate a majority of the
9 unawarded scattered site units into more congregate
10 supportive housing, preservation of first-generation
11 supportive housing, and affordable housing overlay
12 units, prioritizing congregate depending on the
13 fiscal opportunity of the City. It should launch a
14 new supportive housing preservation program and
15 enhance and align all service and operating rights.
16 Additionally, post-pandemic, with the crisis in
17 mental health and proliferation of more addictive and
18 deadly drugs, overstretched staff and underfunded
19 models, our community has been pushed to the brink.
20 We urge the City to work to address unmet service
21 needs in supportive housing and invest in the
22 workforce and just pay our staff and fund an annual
23 COLA. We also call on the City to expand supportive
24 housing opportunities for those leaving jail and
25

1
2 prison by improving the justice-involved supportive
3 housing program, JISH, and revising the definition of
4 chronic homelessness to allow stays in jail or prison
5 over 80 days to count as homeless time to account for
6 those currently left out of NYC 15/15 eligibility.

7 Thank you so much for this opportunity to testify.

8 DENIECE MILLS: Good evening. Thank you
9 for the opportunity to speak. I welcome all
10 questions. I'm a resident of a supportive housing
11 building in Manhattan. The landlord is Breaking
12 Ground and the support service is CUCS. My experience
13 in supportive housing has been terrifying,
14 triggering, and traumatic. The building director,
15 Lauren Brogden, Assistant Director Rusmina Rodontik
16 (phonetic), and Director Jeremiah Holbert (phonetic)
17 from CUCS have utilized terror tactics, intimidation,
18 and bullying tactics. Breaking Ground and CUCS
19 continue to violate a court order stipulation of
20 settlement by initiating unnoticed inspections.
21 Breaking Ground continues to illegally access my
22 apartment. Just yesterday afternoon, someone
23 attempted to key into my apartment. Had I not had
24 something in front of the door, they would've keyed
25 in. I had to call the police and make a report. I

1 have filed three police reports to date. It still
2 hasn't stopped. Shortly after the judge issued a
3 court order stipulation of settlement, management
4 accessed my apartment, stole court documents and
5 personal belongings. Personal belongings continue to
6 go missing. All of this is retaliation because I've
7 reported rent fraud, repairs, unnoticed inspections,
8 illegal entry, annual recertification fraud, and
9 fraudulent lease rental practices. I humbly ask the
10 Committee for these things. Please open an
11 investigation into Breaking Ground and CUCS'
12 managerial practices, require Breaking Ground and
13 CUCS to put all inspection notices in writing. I ask
14 for the immediate termination of Lauren Brogden,
15 Rusmina Rodontik, and Jeremiah Holbert. Thus far,
16 submitting complaints to DOHMH, HPD, 3-1-1, and all
17 other City agencies has done nothing. It only
18 intensifies the harassment. Please hold City agencies
19 accountable for creating a solid grievance process,
20 take harassment and retaliation complaints seriously,
21 and penalize repeat offenders.

22
23 I'm so sorry, just two seconds.

24 I wanted to just mention because you all
25 were mentioning some of the bill of rights. For my

1
2 lease renewal this time around, there were several
3 issues. One of those issues was that I got, the bill
4 of rights is essentially five pages I believe, my
5 lease renewal came with page five which is just the
6 signature page. There was no page one through four.
7 There continues to be always issues I have to go
8 around and report. It takes me months. For example,
9 for the annual recertification, Lauren Brogden
10 provided misinformation on the monitoring agency. She
11 said that HPD, HUD, and HDC were the monitoring
12 agencies. However, I went to each of those agencies,
13 and they told me they had nothing to do with my
14 annual recertification process so it took me months
15 to find out who was actually involved. In fact, when
16 I say months, actually for this, it's actually been a
17 year, and they are quick to threaten legal action
18 even when they don't provide all the information or
19 the documentation they're required to provide. I am
20 tired of reporting harassment and it going unheard. I
21 greatly would appreciate your help to making it stop.
22 Thank you.

23 COMMITTEE COUNSEL KILAWAN: Thank you to
24 this panel for your testimony.

1
2 We're now going to move to the next
3 panel. The next panel will be comprised of Will
4 Watts, Aaron Horth, Richard Degen, Andrew, and an
5 anonymous tenant who completed a witness slip. The
6 anonymous tenant has already been represented.

7 You can begin when ready.

8 UNIDENTIFIED: Thank you. I want to say
9 thank you to my whistleblower. He was from Common
10 Ground. He was high up, and he said all the things
11 you're saying now about Common Ground, even worse, so
12 nothing has changed with Common Ground. They just
13 changed their name. The tactics are the same, and I
14 just wanted to say all these things that people have
15 testified on, I've gone through. All of it is true.
16 Common Ground is the worst. They just changed their
17 name, but here's what it did to me. They through me
18 out and then put, no place for me to go and made me
19 homeless. Here's what was going on. I had drug
20 dealers calling me on the house phone, trying to
21 break into my door, asking me if I wanted to buy
22 drugs. When I went down from the building to the
23 elevators, I said a drug dealer just asked me if I
24 wanted to buy drugs. The security said we didn't see
25 anything. They are in on it too, and part of the

1
2 problem and what we're trying to say is they put
3 someone in my apartment and he just was there. I was
4 like who has a key to my apartment. They do. I didn't
5 give them permission. I lease supposedly. These are
6 the common things that go through these not-for-
7 profits which really are for profit. The board of the
8 Committee on Common Ground are the Rockefellers, I
9 have it right here, a giant real estate company, and
10 a lot of these not-for-profits make a lot of money.
11 That's just a name they use which is BS. They make a
12 lot of money. I don't know about the people here. I'm
13 sure they're not like that, but Common Ground, these
14 connected giants in the industry, they make a lot of
15 money, but they probably can hide it very well.

16 One of the last things I want to say is
17 as a vet, a brother of a vet, the father of a vet, my
18 brother was a hippy, he died of AIDS and heroin
19 addiction. Of course, all they do is give you
20 methadone.

21 Can I finish?

22 And what my biggest upset is and still is
23 today, I'm an activist, I'm going to a Palestinian
24 protest after this. I was a squatter in the '80s, and
25 instead of letting me stay in the apartment we fixed

1 up in the building we fixed up, they threw us out to
2 put people that are already poor in there so I've
3 been through the whole spectrum, squatter rights,
4 squatter stuff, veterans stuff, and not all veterans
5 are like (INAUDIBLE) American flag. My brother's a
6 hippy. I asked him are you really happy you went to
7 Vietnam. He said I never should have gone. He said he
8 hated Vietnam. He never should have gone. I said
9 that's a different viewpoint of what I've heard here.
10 I would never volunteer for this military. I would
11 only volunteer for myself, my rights. That's the only
12 thing I'll volunteer. I'd like to concur that the
13 problem is, like these people said, we have no rights
14 because we don't have any money so you have like
15 cornered in a trap because they know we don't have
16 any money, and I was going to hire a lawyer to fight
17 Common Ground but I couldn't do it because they had a
18 lawyer so that's what we're trying to say. If you
19 don't take away the power of these not-for-profits,
20 they can do whatever they want, they will do whatever
21 they want, and they will continue forever so thank
22 you and please, you only have to look into the
23 funding and take some of the funding away. Even some
24 of the people here could probably run a building
25

1 better, and (INAUDIBLE) said, Common Ground, they got
2 the building for 10 dollars. This is their document.
3 I can run a building for 10 dollars. These tax
4 breaks, these gimmicks they get has to stop. Why do
5 they get a break like that? What have they done? They
6 testified in this hearing that Common Ground are
7 criminals. (INAUDIBLE) whistleblower told me about
8 SHOUT, and I thank SHOUT for telling me about this
9 hearing so please, you need to defund Common Ground,
10 I don't care what its name is now, it should be
11 defunded and they should go to jail. All those people
12 in Common Ground should go to jail immediately in my
13 opinion. Thank you.

15 CO-CHAIRPERSON AYALA: Thank you.

16 AARON HORTH: Good evening. Thank you for
17 the time. My name is Aaron Horth. I'm an attorney
18 with Legal Services NYC which is the country's
19 largest civil legal services organization. We
20 represent low-income New Yorkers, many of whom are
21 supportive housing tenants. I am personally an
22 attorney in the LGBTQ and HIV Advocacy Unit at
23 Brooklyn Legal Services. We represent members of the
24 LGBT community and people living with HIV, again,
25 many of whom are supportive housing tenants. We come

1 before the Committee today to address areas where
2 oversight of City- and State-funded supportive
3 housing providers has negatively impacted our
4 clients. We have numerous clients who have
5 experienced harassment, discrimination, and abuse at
6 the hands of the supportive housing providers. We are
7 greatly concerned not only about these actions but
8 also the responses we receive when we approach these
9 supportive housing providers about their illegal
10 actions. Supportive housing staff and leadership
11 alike regularly dismiss us and our clients' concerns.
12 They take no action to remedy the reported behaviors,
13 and they've even expressed their intention to
14 continue harassing and discriminating against our
15 clients. We see also serious issues with the
16 financial management of supportive housing providers
17 and with providers failing to provide reasonable
18 accommodations. In on egregious example, 200 out of
19 the 300 scattered site housing residents of
20 supportive housing provider St. Nicholas Alliance
21 were sued for nonpayment of rent last year. In each
22 of these proceedings, St. Nick's had received the
23 rent subsidy payment from the City, from HRA, but
24 failed to pass those on to the scattered site
25

1 landlords. Because of St. Nick's failure, 200 of
2 their 300 scattered site tenants were facing eviction
3 when none of them had failed to pay their rent. In
4 some other instances, supportive housing providers
5 have sought to evict tenants with severe mental
6 health issues rather than accommodate them. I've
7 abbreviated my written testimony. It goes into this a
8 little bit more, but I just want to address a few of
9 our clients, one of whom is a transgender woman who
10 lives in a supportive housing project for people with
11 mental illness. From the moment she moved in, high-
12 level staff told her that they were not supportive
13 and they did not approve of her gender identity. The
14 harassment then escalated to staff sending a series
15 of letters threatening to evict her without going
16 through required judicial processes. When she
17 retained my office, we reached out to the provider to
18 advise them that these actions were illegal, but
19 management boldly told us that they often circumvent
20 court processes to evict people and that they
21 intended to continue doing so. After these
22 conversations, the provider continued to send her
23 notices, some of them containing overtly
24 discriminatory language telling her that she was
25

1 going to be evicted "because you have constantly
2 shown the symptoms of your mental health illness."
3 Despite our numerous attempts to demand the
4 harassment cease, the provider has continued in their
5 attempts to intimidate her to get her to move out of
6 the facility but has to date not started a housing
7 court proceeding.
8

9 Another client of ours who lives in a
10 supportive housing building exclusively for people
11 living with HIV, his provider told a member of the
12 community where he was living and thus exposed his
13 HIV status and he is now afraid to be seen in this
14 community because he does not know who knows that he
15 is living with HIV.

16 A third client of ours who is a
17 transgender man began his transition while living in
18 a supportive housing building exclusively for young
19 adults. When he informed staff that he was going to
20 begin to transition, fellow residents made derogatory
21 comments about his transition when he attempted to
22 use the men's bathrooms facilities, asked
23 inappropriate questions about his genitals, and
24 repeatedly outed and misgendered him and even
25 threatened violence against him. When this client

1 made complaints to staff, they dismissed him and told
2 him that the discrimination was brought on by his own
3 actions and failed to take any reports of his
4 complaints seriously. This client then began to
5 withdraw and eventually was hospitalized for suicidal
6 ideation, but the supportive housing provider has
7 still yet to take responsibility for their actions.

8
9 Finally, I would just add in response to
10 some of the information I heard from the Department
11 of Health representative today, we rarely see tenants
12 who have or are aware of the alleged tenants' bill of
13 rights but we have seen tenants coerced into signing
14 agreements that mandate case management or mental
15 health services, which I heard the DOHMH
16 representative was never a condition of continued
17 tenancy. For all this, we really believe that
18 mandatory training for supportive housing providers
19 around LGBTQ issues, specifically trans and gender-
20 nonconforming people, and people with mental illness
21 is greatly necessary in addition to much greater
22 oversight. Thank you.

23 WILL WATTS: Thank you, Deputy Speaker
24 Ayala and other Council Members, for this opportunity
25 to speak with you today on behalf of Coalition for

1 the Homeless and our counsel, the Legal Aid Society.
2
3 My name is Will Watts, and I am the Deputy Executive
4 Director for Advocacy at the Coalition for the
5 Homeless. Before coming to New York, I represented
6 homeless men, women, youth, and even veterans in Los
7 Angeles, most of whom were living rough on the
8 streets. As you well know, for over 40 years the
9 Coalition together with Legal Aid has advocated for
10 and defended New York's right to shelter. Given our
11 constant work on behalf of unhoused New Yorkers, we
12 are quite familiar with the needs and experiences of
13 unhoused New Yorkers and, therefore, we unequivocally
14 and emphatically oppose this Administration's focus
15 on coerced removals of people living on New York City
16 streets. It was disappointing that earlier today no
17 one was here from the Administration to be able to
18 talk about this particular measure, but, for so long
19 as sweeps are continuing, we feel it's important to
20 have transparency into what is occurring and an
21 ability to yet again say that sweeps are more costly,
22 both financially and otherwise, than investing in
23 quality supportive housing and other evidence-based
24 solutions. Therefore, we support Intro. 1153 with a
25 few friendly amendments.

1
2 First, it should be clear that the
3 removals triggering this reporting obligation are not
4 just those involving tents and other items for rest
5 and protection from the cold. Clearing of any
6 personal property should trigger these obligations.

7 Second, even though we know certain facts
8 such as black and brown people are disproportionately
9 represented in the unhoused population, we don't have
10 specific data about how various demographics align
11 with the frequency of police involvement or the
12 resources offered in each sweep. Therefore, the data
13 reported should be disaggregated by race, gender
14 identity, age, sexual identity, and disability status
15 to the extent possible without personally identifying
16 individuals.

17 Finally, just because someone is residing
18 on the street does not mean that their personal
19 property should be discarded or afforded fewer
20 constitutional protections than any other New York
21 City resident. Under current DHS and HRA policies,
22 owners unable to take all of their personal property
23 with them after a removal are entitled to temporarily
24 store it and apply for grants for any ongoing storage
25 needs. We need to know whether individuals are being

1 made aware of these options as well as any costs
2 related to utilizing storage. Again, we firmly
3 believe and hope that this data will show that the
4 sweeps policy is costly, harmful to those targeted,
5 and grossly ineffective at addressing street
6 homelessness.

8 This Administration must recognize that
9 the solution is actually quite simple. Our unhoused
10 neighbors need appropriate shelter, not sweeps. They
11 deserve house keys, not handcuffs. Thank you.

12 UNIDENTIFIED: Council men and women, I
13 thank you for being here today. I appreciate the
14 opportunity to speak to you. I'd like to talk to you
15 about homelessness. There is a court case right here
16 in New York City called Socialist Workers Party
17 versus the Attorney General where law enforcement
18 (INAUDIBLE) to make people homeless and get people
19 fired from their jobs. I was shocked when I first
20 heard that, but that's what law enforcement does.
21 Also, according to the same court case, they use
22 thugs to illegally break into people's homes and
23 businesses. Again, that's in the court case. How does
24 law enforcement that you're not at home? According to
25 the New York Times, Philando Castile was followed

1
2 around by police for 13 years and then they brutally
3 executed him so law enforcement likes to follow
4 people around. Why? I have no idea. So when the
5 people kept saying to defund the police, has crime
6 gone up or has crime come down? If crime has come
7 down, fine, but if crime has gone up, the police tell
8 their thugs to go out there and commit more crime
9 like they did (INAUDIBLE) the court case, Socialist
10 Workers Party versus the Attorney General, to break
11 into people's homes and businesses. Why have I been
12 targeted by police? I put this online 10 years ago
13 that I'm being followed around by a criminal
14 organization, which I had no idea who they were but
15 it turned out to be corrupt cops, so why have I been
16 targeted? I want you to think about a person named
17 Breonna Taylor and Eric Garner. These people were
18 murdered by police, and then their family members
19 also died so when you find out the connection between
20 that, then I want you to come to my family and ask
21 yourself has anybody been murdered in my family by
22 police. That's why I've been targeted as well. My
23 friends tell me to record the police and, when I
24 record them, the video keeps disappearing so they
25 keep hacking my cell phone and they keep erasing the

1 video. The last time I stood here, November 30th, at
2 the other place, 250 Broadway, the police were called
3 on me again as an excuse just to murder me because
4 last time I gave the same testimony, police is
5 terrorizing me and I keep asking for an open
6 investigation. They assaulted me in two different
7 states, New York and Chicago. They assaulted me in
8 two different states illegally. Every day they keep
9 following me and terrorizing me. They keep sabotaging
10 my car. I bought a body cam. I left it in my car. I
11 use it and I can't record because they keep doing
12 things to the body cam, they keep sabotaging my car,
13 they keep terrorizing me every day so when they say
14 they don't have enough funds to solve crime and
15 violence, but they have enough money to have their
16 thugs to break into people's homes and businesses,
17 but they don't have enough money to solve crime so
18 I'm asking for an open investigation to find out why
19 is it that they're not only attacking me but they're
20 attacking people through America. Just a flier that I
21 gave...

22
23 CO-CHAIRPERSON AYALA: Thank you. We're
24 going to review that.

25 UNIDENTIFIED: Okay, thank you.

2 CO-CHAIRPERSON AYALA: Thank you so much.

3 COMMITTEE COUNSEL KILAWAN: Thank you to
4 this panel.

5 If we have Dinah Luck here, Dinah, you
6 can come up to testify.

7 At this time, if we have inadvertently
8 missed anybody who would like to testify in person,
9 please visit the Sergeant-at-Arms table and complete
10 a witness slip.

11 If we inadvertently missed anybody who
12 wants to testify virtually, you can use the Zoom
13 raise hand function, and I'll call on you.

14 Over now to Dinah.

15 DINAH LUCK: My name is Dinah Luck, and
16 I'm a Senior Staff Attorney at Mobilization for
17 Justice and a SHOUT ally. MFJ has decades of
18 experience representing people with mental illness,
19 especially in our Mental Health Law Project. We've
20 submitted written testimony that describes the most
21 significant issues that we've seen in supportive
22 housing. Today, I'm going to focus on our
23 recommendations.

24 First and foremost, MFJ supports SHOUT's
25 S.A.F.E. campaign demands which we have included as

1 an appendix to our written testimony. Additionally,
2 we make the following recommendations.

3
4 Require and enforce anti-discrimination
5 policies in the tenant selection process. DSS has not
6 dedicated any oversight in its Legal unit to ensure
7 applicants do not suffer disability discrimination or
8 other types of discriminatory behavior.

9 Require a reasonable accommodation
10 process for applicants. There is no process for
11 requesting a reasonable accommodation for supportive
12 housing applicants. This is illegal and unacceptable.

13 Develop an appeal process for applicants.
14 There is no formal process by which an applicant can
15 appeal a denial of supportive housing. Given that
16 this is a City-facilitated application, this raises
17 serious due process concerns.

18 Next, embed anti-eviction requirements
19 into contracts. Many supportive housing providers
20 jump to using housing court to resolve case
21 management or clinical issues, putting vulnerable
22 tenants at risk of re-entering homelessness. City
23 officials should embed anti-eviction requirements
24 into supportive housing contracts. Such requirements
25 would safeguard tenants from the unnecessary use of

1 housing court and pushing providers to provide the
2 services that can make this type of housing so
3 successful.
4

5 Number five, require all providers to
6 have a reasonable accommodation process for tenants.
7 Many providers do not have a formal process in place
8 or do not inform their tenants how to request an
9 accommodation.

10 I just avenue a little bit left. Okay.

11 DSS and DOHMH must ensure that all
12 providers have formal transparent procedures and
13 educate their tenants about the process and their
14 rights.

15 Six, make CityFHEPS available to all
16 supportive housing tenants who want to move on and
17 who do not have access to alternative rental
18 subsidies.

19 Last, create a City complaint process for
20 supportive housing tenants. There is currently no
21 formal process available for tenants who want to make
22 a complaint against their supportive housing
23 provider.

24 Last, I just want to point out that as a
25 SHOUT ally, we've met with a lot of politicians and

1
2 we've had regular meetings with the State Office of
3 Mental Health. The City, DOHMH, has refused to meet
4 with us, and they all left today before the public
5 testimony. I want to end on that note. Thank you.

6 CO-CHAIRPERSON AYALA: Okay. I want to
7 thank you all for coming, and I want to give SHOUT a
8 shoutout. Great organizing, guys, and really excited
9 to hear your testimony today. I think that you've
10 leant a lot of insight into what applying for and
11 living in supportive housing feels like. I've taken a
12 lot of notes, I know that my Colleagues have as well,
13 and we will be following up and looking at some
14 possible legislative fixes to some of these issues,
15 but I want to say that I'm really proud of having the
16 ability to be able to host this hearing today because
17 I know that it was long overdue, but I think that it
18 was very, very informative, and that's a testament to
19 your dedication so thank you so much.

20 Does any Member have anything, Chair
21 Holden? No? Okay.

22 With that, this hearing is concluded.

23 [GAVEL]

24

25

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 December 21, 2023