CITY COUNCIL
CITY OF NEW YORK

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TRANSCRIPT OF THE MINUTES

Of the

COMMITTEE ON AGING

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September 20, 2017 Start: 10:10 a.m. Recess: 12:51 p.m.

HELD AT: Committee Room - City Hall

B E F O R E: MARGARET S. CHIN

Chairperson

COUNCIL MEMBERS: Karen Koslowitz

Deborah L. Rose Chaim M. Deutsch Mark Treyger Paul A. Vallone

Rosie Mendez

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

Caryn Resnick, Deputy Commissioner Department for the Aging, DFTA

Sarah Solon, Deputy Director Justice Initiatives. Mayor's Office of Criminal Justice, MOCJ

Jennifer Scaife, Executive Director Prevention Diversion and Reintegration Mayor's Office of Criminal Justice, MOCJ

Eli Fresquez, Assistant General Counsel NYC Mayor's Office for People with Disabilities

Anna Caffarrelli Injury and Violence Prevention Program NYC Department of Health and Mental Hygiene

Mario Ferrigno, Assistant Commissioner Division of Code Enforcement Housing, Preservation and Development

Monica Krakowski, Director Legislative Affairs Jewish Association for Services for the Aged, JASA

Alex Riley, Director Elderly Project, Volunteers of Legal Service

Andrea Cianfrani, Director Public Policy, Live On New York

Frances Mc Murray, Formerly Incarcerated

Virgil Cabeer, Formerly Incarcerated

Fernando Martinez Osborne Association Laura Whitehorn, Representative Release Aging People in Prison, RAPP

Sophia Bandelli, RAPP Representative Retired from Medgar Evers College

James Royall, Reentry Specialist Brooklyn Defender Services 2 [sound check, pause] [gavel]

3 CHAIRPERSON CHIN: Good morning.

COUNCIL MEMBERS: [in unison] Good

morning.

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CHAIRPERSON CHIN: I'm Council Member Margaret Chin, and I'm the Chair of the Committee on I would like to thank my fellow committee members and the Council staff for coming together to hold this hearing. Today's hearing will provide the committee with an opportunity to discuss four legislative items. First, the committee will discuss Intro No. 189. This bill, sponsored by Council Member Danny Dromm, would require the Department for the Aging, also known as DFTA, to implement a program to aid seniors dealing with bed bugs infestations in their homes including moving furniture and heavy equipment. Seniors are particularly vulnerable to bed bugs infestations, and are often unable to carry out the physical task necessary to prepare for an exterminator to rid their home of the infestation. This bill would enable seniors to receive the help they need ensure that the exterminator can do their job properly so that the bed buts are eradicated from the seniors' homes.

Second, the committee will discuss Intro
1185 sponsored by Council Member Deutsch. This bill
would require DFTA to provide information to
households with users of life-sustaining equipment
and individuals with a medical hardship on how to
register with their utility company so that they can
receive information regarding power disruption and be
included in the utility company's system's emergency
plan. Power outages can be life threatening to
people who use life-sustaining equipment, or who have
a medical hardship. This bill would require DFTA to
ensure that registration information are available in
senior centers, Naturally Occurring Retirement
Communities, NORCs, or DFTA's website and the Mayor's
Office of People with Disabilities website, and upon
request. First, the committee will discuss Intro
1616, also sponsored by Council Member Dromm, which
would establish a task force focused on older adults
re-entering civil society after being incarcerated.
The task force would report to the Mayor and the
Speaker on certain data regarding this population,
and also provide recommendations on how to aid
seniors leaving prison, and returning to the city.
Finally, the committee will discuss Intro 1684, a

COUNCIL MEMBER DROMM: Thank you very

much, Chair Chin for taking the lead on aging issues.

And for hearing my two bills today. The first bill

is Intro 1616, the Compassion and Assistance for
Reentering Elders or CARE Act, aims to establish a
much needed task force on issues facing older adults
reentering from a period of incarceration. An
increasing number of older adults are facing a
destitute heritage.(sic) These individuals many of
whom have spent significant periods away from the
rest of society must deal with a myriad of issues
associated with aging simultaneously with the
challenges of reentry. Throughout the city, families
and communities must also deal with the increasing
number of older adults who are coming from prison and
jails. All our city's senior services and program
prepared to welcome re-entering individuals. Are re-
entry services adequately equipped to deal with the
older population? This hearing will focus on the
need to address gaps in services. I also hope to
hear about models that are working, and that the city
can tap into.

The second bill is Intro 189, which seeks to address an ever vexing problem: Bed bugs.

Thoroughness is key to successful eradication, but this often entails moving furniture and heavy equipment. Without assistance many seniors would

2	never be able to rid their home of stubborn
3	infestations. I have constituents who have described
4	how chemical treatments applied in their homes by
5	landlords and others were effectively useless because
6	they could not take the other necessary steps. My
7	bill would require the City to maintain, operate and
8	control the program to provide effective assistance
9	and support for senior citizens to successful
10	eradicate bed bug infestations provided, however,
11	that such assistance shall include the moving of
12	furniture and heavy equipment, if necessary. I want
13	to thank all the advocates for being here today, and
14	I look forward to hearing your testimony and I joined
15	the press conference earlier this morning on Intro
16	1616, something that is really very important and
17	close to my heart in terms of providing reentry
18	services for those who are elderly and returning from
19	prison, and I want to also state that I have an
20	Education Committee hearing next door, which I chair.
21	So, I'm going to have to leave, but I'll look at this
22	later on and, of course, we will be back with each
23	other, you know, because you're also on that
24	committee. So, thank you for allowing me to make

2 this statement, and I will—I will be back shortly.

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CHAIRPERSON CHIN: Thank you, Council Member Dromm. Council Member Deutsch.

COUNCIL MEMBER DEUTSCH: Thank you, Madam Good morning to everyone. Today we're Chair. hearing Intro 1185-1185, the bill I sponsored requiring the Department for the Aging to conduct widespread educational outreach to seniors who rely on life-sustaining equipment. Department for the Aging would be mandated to provide easily accessible information about how to register with the utility company that provides their electric service. case of a power outage, registered individuals are given top priority for repairs, and emergency and medical services are alerted to the potential risk that the resident may face without their lifesustaining equipment. When the Office of Emergency Management responds to a lights outage, they are also provided with a registry so they may respond appropriately. This is especially relevant in my district, which is a waterfront community that made up of more than 30% of services. When telephone lines were done after Hurricane Sandy, many were

2	trapped in their homes without any means of alerting
3	first responders to their location. Those who relied
4	on medical equipment to help them leave when
5	particular danger. With my bill these seniors will
6	be made aware of the option to register, thereby
7	ensuring that first responders an instantly notified
8	about their status and medical needs. This outreach-
9	this outreach will be conducted in the ten most
10	commonly spoken languages in New York City. Yes,
11	English will be included. To know more-the more you
12	know, the better off you are, and I urge my
13	colleagues to support Intro 1185, a bill that can
14	rely—that can truly save the lives of many. Thank

CHAIRPERSON MENCHACA: Thank you, Council Member Deutsch. We would like to invite up the first panel. [pause] Caryn Resnick, Deputy Commissioner from DFTA and Sarah Solon, the Mayor's Office of Criminal Justice, the Deputy Director of Justice Initiatives. Welcome.

LEGAL COUNSEL: Can you raise your right hand. Do you affirm to tell the truth, the whole truth and nothing but the truth in your testimony

you.

testimony on Intro No. 1616 in relation to

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2 establishing a temporary task force on post-3 incarceration re-entry for older adults. DFTA's 4 mission is to work to eliminate ageism and ensure the dignity and quality of life of New York City's diverse older adults, and for the support of their 6 caregivers, their service, advocacy and education. 8 DFTA continues its long history of collaborative partnerships with community based organizations for the provision of programs and services, which aim to 10 11 foster independence, safety, wellness, community 12 participation and quality of life. Pursuant to the New York City Charter, DFTA's powers and duties 13 14 include: To stimulate community interest in the 15 problems of the aging; to promote public awareness of 16 resources available for the aging and to refer the 17 public to appropriate departments and agencies of the 18 city, state and federal governments for advice; 19 assistance and available services in connection with 20 particular problems; to cooperate with and assist 21 local neighborhoods in the development of programs; 2.2 to disperse available city, state and federal funds 2.3 to programs throughout the city and when practical coordinate such funds with available funding from the 24 private section; and to maintain, operate and control 25

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such programs and facilities as may be necessary, or required for the proper administration of the department. DFTA carries out the agency's charter mandate and mission through the sponsorship of community based and in-home programs for older New Yorkers such as senior centers, case management, home care and home delivered meals. Given that the bills that are the focus of today's hearing are in relation to areas outside of DFTA's purview, expertise and budget, the Administration does not support this legislation. Intro No. 189, Assistance to Seniors with bed bugs. Bed buy infestations are burdensome to New York City residents, property owners and health and social service providers in both the public and private sectors. Though bed bugs are not known to transmit disease, they are a pest of public health importance. As such, the New York City Department of Health and Mental Hygiene, DOHMH, has numerous resources regarding bed bugs focusing on homeowners and tenants, landlords, and building managers, visitors and travelers, pest management professionals, health professional, shelter and group homes and moving and storage. DOHMH issues a Healthy Homes Guide on preventing and getting rid of bed bugs

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The agency also provides information on bed safelv. bug identification, disposal protocol, pest control company selection and practices, prevention methods and moving storage, and enforcement protocols for bed bug complaints. DFTA does not have the expertise nor the budget to address bed bug infestations. Further, older adults can be homeowners, tenants, landlords, building managers, shelter residents, hotel guests, boarding house dwellers and many other types of dwelling occupants maintaining, operating and controlling the program in the city to assist and support seniors with bed bug infestations who reside in any and all dwellings and successfully eradicate such infestations would be cost prohibitive. such a program be a budgetary priority for the Council, the Administration can explore how to work with contractors who provide this service and have the expertise in this area.

Intro No. 1185, Information for users of life-sustaining equipment and individuals with a medical hardship. Utility providers in the city Con Edison, PSEG and National Grid maintain information on those who rely on medical equipment that qualifies them to be listed as a life-sustaining equipment

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customer or an LSE making them eligible to register for a Priority Power Restoration Program. This is an opt in program, and those who want to be registered with a utility provider as an LSE must self-register They can do so by visiting the utility themselves. provider's website or calling their customer service numbers. New York City Emergency Management, NYCEM, also provides information through its website and in its Ready New York materials on where and how to register with utility providers and includes this as an emergency preparedness measure to incorporate when developing individual preparedness plans. Among these resources are recommended steps to prepare for power disruptions for individuals who rely on medical equipment that require electric power. recommendations include having an alternate-alternate source of electric power such as battery back-up systems using generators according to manufacturers instructions' and local reg-regulations, and registering with the associated utility company as a life sustaining equipment customer. DFTA's Office of Emergency Preparedness works closely with NYCEM in disseminating information to older adults, senior center participants, case management clients,

Naturally Occurring Retirement Community residents,

caregivers, senior service providers and others. It

4 is important to note that not all users of life-

5 sustaining equipment and persons with medical

6 hardship are older adults and many of these

7 individuals require a higher level of care and

8 support in what is provided by the services sponsored

9 by DFTA.

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Intro No. 1684, Interagency Program Coordinator for the Aging. The duty of the Interagency Program Coordinator provided in the legislation is currently carried out by the Deputy Mayor for Strategic Policy Initiatives who oversees On behalf of the Mayor, the Deputy Mayor helped to martial interagency coordination in the development of the recent iteration of age-friendly New York City together with the leadership of the Council, the New York Academy of Medicine and the Age-Friendly New York City Commission. The latest Age-Friendly NYC Report encompasses 86 new commitments for a city for all ages, which builds upon the ongoing success of the original initiatives and includes new citywide endeavors to support older The great age-friendly work of sister New Yorkers.

agencies such as the New York City Department of 2 3 Transportation under Vision Zero, the New York City 4 Department of Housing Preservation and Development 5 under the Housing New York Plan and DOHMH under Thrive NYC are all incorporated in the update. Other 6 7 commitments include launching an acute car for the 8 elderly hospital unit at New York City Health and Hospital Harlem, which is designed to meet the special needs of older adults. Expanding access to 10 11 tenant legal services for individuals facing eviction 12 with incomes at or below 200% of the poverty level 13 under the New York City Human Rights. Sorry, Human 14 Resources Administration. Forty percent of older New 15 Yorkers meet this income threshold. Establishing 16 multi-disciplinary team comprised of groups of 17 professionals in various fields such as district 18 attorneys, the New York City Police Department, HRA's 19 Adult Protect Services, and DFTA in all five boroughs 20 to respond to elder abuse cases, and recruiting 21 artists to conduct programs in senior centers through the Su Casa Initiative made possible through a \$2.55 2.2 2.3 million Council discretionary allocation in FY18, and a partnership with New York City Department of 24 Consumer Affairs. DFTA remains committed to carrying 25

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out its core mission of ensuring the best possible deliver of services to older New Yorkers in partnership with the Council, our sister agencies and community stakeholders. We look forward to our continued collaboration with the Council to provide critical programming and information to older adults. I thank you again for this opportunity to testify on this legislation. I will turn it over to the Mayor's Office of Criminal Justice and I will be pleased to answer any questions you may have following their testimony. Thank you.

SARAH SOLON: Thank you. Good morning
Chair Chin and members of the Committee on Aging. My
name is Sarah Solon, and I am the Deputy Director of
Justice Initiatives for the Mayor's Office of
Criminal Justice. I am joined here today by my
colleague Jennifer Scaife, who is the Executive
Director Prevention, Diversion and Reintegration in
my office. Thank you for the opportunity to testify
today. [door bangs] The Mayor's Office of Criminal
Justice advises the Mayor on public safety strategy,
and together with partners inside and outside of
governments, develops and implements policies aimed
at reducing crime, reducing unnecessary arrests and

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incarceration, promoting fairness and building strong and safe neighborhoods. One of the issues we're here to discuss today, a bill to create a temporary task force on post-incarceration reentry for older adults, should be seen in New York City's larger public safety context. In the last three years in New York City we have seen an acceleration of the trends have defined the public safety landscape in the city over the last three decades. While jail and prison populations around the country increased, New York City's jail population has fallen by half since 1990, and in the last three years alone the jail population dropped 18%, the largest three-year decline in the last 20 years. This declining use of jail has happened alongside record crime lows. Major crime has fallen by 76% in the last 30 years and by 9% in the last three. 2016 was the safest year in COMPSTAT history with homicides down 5%, shootings down 12%, and burglaries down 15% from 2015. New York City's experience is continued and unique proof that we can have both more safety and smaller jails. To drive down crime, arrests and the unnecessary use of jail even further, our officer seeks to enhance the spectrum of criminal justice responses available to

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effectively match enforcement to risk and need. In April, 2016, the Mayor's Office of Criminal Justice announced a strategy to continue safely reducing the Rikers Island population by connecting eligible individuals through effective interventions before and after jail. The strategy involved the creation of the New York City Diversion and Reentry Council, a multi-disciplinary council of 54 organizations and agencies including city government agency representatives, the courts, district attorneys, defenders, providers, members of the faith community, formerly incarcerated individuals and advocates. Council reviewed data on populations and available options, and-and developed solutions to address unmet needs and improve program effectiveness, two subcommittees dedicated to the diversion and reentry were created. Each year roughly 45,000 people return to New York City from jail and prison. Pre-jail and post incarceration programs in the city currently divert roughly 10,000 people from jail. The new strategy ensures that reentry and diversion resources are being used as effectively and efficiently as possible to reduce jail use safely while promoting public safety. This strategy aims to drive New York

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City's crime rate even lower by reliably assessing 2 3 who poses a risk of recidivism, appropriately 4 addressing the issues that have brought many into 5 contact with the Criminal Justice System, and connecting people with stabilizing services that can 6 7 help ensure that they do not return to jail. Since May, 2016 the Mayor's Office of Criminal Justice has 8 worked with the Diversion and Reentry Council to accomplish the following:

First, we are comprehensively understanding the population and need. We are currently conducting a deep analytic dive to understand the risk, service needs and characteristics of the target population in order to identify opportunities for intervention. Additionally, we are mapping the available interventions and identifying gaps. So we are working to comprehensively map available interventions across diversion and reentry points by creating an electronic catalogue of New York City's justice and service providers. Re are identifying existing gaps, which will help us to determine what additional resources or partnerships are necessary to address these gaps while promoting public safety

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goals, and where we should reinvest resources that my currently be supporting the most effective programming, and we further conduct direct outreach with currently incarcerated individuals to better understand reentry needs. The Mayor's Office and partners learn directly about the needs of detainees to better understand what circumstances one couldwould contribute to their wellbeing, and their ability to be able to take full advantage of reentry services. Last year work groups of the Diversion and Reentry Council identified individuals who were sentenced to 30 days or less in jail as a target population for diversion initiatives. We are in the process of implementing new programs to divert these individuals, many of whom have 26 and more prior misdemeanors convictions and are over the age of 40. Key service interventions include cognitive behavioral therapy to address thinking areas, trauma informed services, Medicaid enrollment, linkage to healthcare including substance use treatment and connections to transitional employment. Additionally, a high utilizer work group of the Diversion and Reentry Council was recently formed to address the needs of people who regularly enter both

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jail and shelter and also of high use of emergency departments and Medicaid. Many high utilizers are older adults who have cycled through public systems for years. They have significant trauma histories and longstanding behavioral health needs, and often have experienced years of housing and stability or homelessness. We are working closely with various city-city agencies to better understand their needs, and help them stay out of public-out of the jail and shelter system. We will reach out to the Department of the Aging [bell] to invite them to participate in these efforts. In October, we will have preliminary recommendations and by January we will have full height or other plan. Reentry services are critical to preventing recidivism and ensuring that people leaving that the Department of Correction's custody have opportunities to embark on a productive and stable path. Last March, the city announced it is building a spectrum in which every person who enters city jails will be provided with new tools and services that will help to promote a stable future. By addressing vocational, educational therapeutic and other needs in an individualized way, time inside jail can be used productively to lay a foundation

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that can prevent future inter-interaction with the Criminal Justice System. The Administration's new system will begin with expanded risk and the assessment on the first day when someone enters jails, offer five hours everyday of programming that addresses an individual's unique needs, and continuous support including [door bangs] new employment and educational programs after someone leaves jail and returns to the community. A 2013 Rand Corporation Study showed that participation improvement education including both academic and vocational programming was associated with an over 40% reduction in recidivism, save \$4 to \$5 for each dollar spent. By the end of 2017, every single person who enters city jails will be meeting with counselors starting on day one who will assess their unique risks and needs. These counselors will work with detainees to develop and individualized approach for their time in custody that will include efforts to identify vocational and educational needs, and help them connect with the right programs during their stay. Everyone in city custody will be matched with five hours per day of vocational, educational, and therapeutic programming that will help lay a

Toundation to best support long-term stability after
release. The Administration supports the goals of
Intro 1616. Ensuring individuals are reentering
their communities with stabilizing services and
transitional employment supports to address their
unique needs is a key element of ensuring that they
do not return to jail. As such, the Administration
has already begun examining the unique needs of older
adults who are often the same individuals sentenced
to 30 days and are high utilizers of the city's jail
and shelter systems. Our office has concerns about
any legislation that would duplicate our existing
initiatives and investments. Given this overlap, we
propose that the aims of Intro 1616 be achieved
through non-legislative means. We appreciate the
City Council-Council's interest and look forward to
continuing to work together. Thank you for the
opportunity to testify here today. [door bangs] I
would be happy to answer any questions. [background
comments, pause]

CHAIRPERSON CHIN: Thank you. Thank you for your testimony. Since we have the Education Committee next door, the council member had to go there and check in, and so do I, but I'm—I have to

they need?

2	chair this committee. Okay, I'm going to start off
3	with some questions. I'm gong to wait for the
4	council members to come back to ask their questions.
5	I'll start with the—the legislation that I sponsored,
6	Intro 1684. [pause] So Deputy Commissioner, in-in
7	your testimony [coughs] you were talking about all of
8	these services that are available, and so everybody
9	knows, and the seniors know the problems of aging.
10	So, how do seniors receive this information about
11	city services or other government services that they
12	are eligible for? I mean do they have to actually go
13	and look up every agency, or can they just come to
14	DFTA, and be able to find all the information that

DEPUTY COMMISSIONER RESNICK: So, I'm not quite sure exactly the question. If it's services are you asking about services that are provided by our agency or services provided by the whole city of New York?

CHAIRPERSON CHIN: The whole city of New York, but everybody knows DFTA. So why would we be there?

DEPUTY COMMISSIONER RESNICK:

[interposing] Okay, so when people come to--

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2 CHAIRPERSON CHIN: I know what I can
3 qualify for or the [coughing] programs that are
4 available to help—to help me. The first thing

5 seniors think about is the Department for the Aging.

DEPUTY COMMISSIONER RESNICK: Okay. So, we are in the process and, in fact, just have our data and about to launch our new website, which has a tremendous amount of information on it for seniors, and links to programs and services that could impact older people that are provided by other city agencies. We have a Community Outreach Team, and Intergovernmental Team that attend all of the Interagency Council meetings, many of the district cabinets meetings, local community board meetings. We go to health fairs. We get to just about everywhere we're invited, and bring with us materials not only about our own programs, but of other agencies as well, and, of course, one can always call 311 or use Access NYC where you can screen and apply for the plethora of benefits and entitlements, which one might be eligible to. So, I think there are a great many ways that seniors can access services, and if they are unfamiliar with other ways to reach other city agencies, they can always come to us and we

assistance.

with DFTA?

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- direct them to the right place. I didn't mention New
  York Next, a new program, which also provides a great
  deal of information and assistance to older people as
  well as in senior centers where we have case
- 7 CHAIRPERSON CHIN: So, do you—when an
  8 agency considers adding new programs, you know, do
  9 they do any analysis on the senior population, or how
  10 this new service can benefit them? Will they consult

majority o times they do. I would have to say that our Commissioner Donna Corrado has made it her business since she became the Commissioner to make sure that we are on every other agency's agenda. So we have spent the last four years doing that, and if agencies don't reach out to us, then we reach out to them. So, we try to make sure we always have a seat at the table.

CHAIRPERSON CHIN: Okay, now—so, do you have any insight on what city services that apply to seniors are currently underutilized?

DEPUTY COMMISSIONER RESNICK: We know that there is—I didn't bring data with me, but we

2	know that there is underutilization in the SNAP
3	program. We work very, very closely and
4	collaboratively with HRA. We're doing data matching,
5	sharing our data trying to find and locate seniors
6	who could eligible. The same with SCRIE and the
7	Department of Finance. We have an extremely close
8	working relationship with them and again, the same.
9	We've tried to not only do data matching with our own
10	agency but linking them up with HRA, working with
11	Robin Hood and others trying to find ways to do
12	outreach and target and find seniors that could be
13	eligible. So those are the-the two big entitlements
14	I can think of that are underutilized by seniors.
15	CHAIRPERSON CHIN: What about services
16	that—that apply to seniors that are most utilized

that—that apply to seniors that are most utilized
what we are doing on that? Like what services does
the city provide that a lot of seniors use?

DEPUTY COMMISSIONER RESNICK: There's, of course, the federal programs such as Medicare and Medicaid, which have the—the very high usage by seniors. [pause] I'm not sure what you're looking for.

CHAIRPERSON CHIN: Well, we do—the senior now knows that if they are facing—

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## DEPUTY COMMISSIONER RESNICK:

[interposing] Eviction?

CHAIRPERSON CHIN: --landlord harassment, eviction that there are legal services available to them.

DEPUTY COMMISSIONER RESNICK: Yes, they
do. We've been also working with HPD and, in fact,
they've come to the Age-Friendly Commission to talk
about their portal and how seniors can apply for lowincome housing, which is, of course, one of the
biggest one of the biggest needs for older adults.
So, by sharing information with our sister agencies,
we try and get the information out to all the seniors
in the city of New York.

CHAIRPERSON CHIN: Now, you in your testimony you were talking about this—the age, new Age—Friendly NYC Report. I mean you quote a lot of stuff from there. So, this report is going to be updated annually and—and also how does the implementation that's going to take effect?

DEPUTY COMMISSIONER RESNICK: We have not made a commitment to update it annually, but we do want to update it. It's quite a heavy lift, but in the process of doing that, we convened basically all

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of our sister agencies in the human services world, and that has really helped to strengthen our ties with those agencies, and it's the work of each of those agencies to continue on the implementation. We ourselves will not necessarily implement every program, but we will be working with our sister and partner agencies to make sure that these initiatives are successful.

CHAIRPERSON CHIN: So, in your testimony, you're saying that right now you don't have anybody in DFTA that serves this role of coordination and with the inter—with the other agencies in terms of the services they provide for the senior. But you said that the Deputy Mayor for Strategic Policy Initiatives that oversees DFTA is doing this work.

DEPUTY COMMISSIONER RESNICK: Yes, the agencies that report to the Deputy Mayor or collaborate we have a liaison who is specifically assigned to our agency who works to make sure that we are a part of all the other major initiatives going on in the city and myself and our Director of Intergovernmental Relations essentially serve in that role as being the coordinator for our agency.

elaborate on that?

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DEPUTY COMMISSIONER RESNICK: I think the answer to that is that we don't particularly because we don't see it as our role or function as we are Charter mandated, and I can actually call on some of my sister agencies to help with the response to that.

[pause] Okay, you want to come up here? Great.

ELI FRESQUEZ: Alright, good morning. My name is Eli Fresquez. I'm from the Mayor's Office for People with Disabilities. We work closely with New York City Emergency Management on supporting public outreach for people with disabilities in disasters. I—I don't believe Emergency Management is available today. I think they are busy at work given the hurricanes that are currently impacting Puerto Rico, et cetera. So, what we do at the Mayor's Office for People with Disabilities we link many of the resources that are available to constituents with disabilities in emergencies. So, we do have links currently on our website to Emergency Management that gives information for LSE customers.

COUNCIL MEMBER DEUTSCH: So define to me people with disabilities. If someone is disabled in a wheelchair, let's say, they're not on life-sustaining equipment, but if someone is in the

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- hospital, and they just go discharged with lifesustaining equipment, so, would you consider that some people with disability?
  - ELI FRESQUEZ: A person who is using life-sustaining equipment is a person with disabilities. Most-most likely--

Most likely, you wouldn't have that person on your list if that person was not just a person with disability, but ended up in the hospital and just came out, got home and is on life-sustaining equipment. So, it's not something that the person was disabled, would you know who he or she is?

ELI FRESQUEZ: No, we would not. That's the responsibility of the utility company, PSEG and Con Edison they are the ones that--

Are you saying that—we just had a brownout a few minutes ago. So, Con Edison is not reliable so, when it comes to services. We have blackouts and power outages and brownouts that we just had all the time. So, if we cannot rely on Con Ed, when there's a storm if there's high winds, so how can we as a city rely on Con Edison to do outreach for people who in return

2 give them a lot more work, and for them to register 3 that their address, their home address has someone 4 who is on life sustain equipment. So, I-don't you 5 think it will be the city's responsibility the Department for the Aging to do an education outreach. 6 7 I never heard anyone say that there's too much 8 education, and when you talk about OEM, they do a phenomenal job, excellent job, but if you ask anyone in my waterfront district that if they look at one of 10 11 the pamphlets that OEM gives out, which is excellent, 12 has a lot of resources and everything, but it doesn't 13 single out when someone on life-sustaining equipment. 14 They could tell you that you must evacuate. 15 could give you information, you know, go find it and 16 you have to pay yourself and have, you know, in case 17 something happens. You should go with a family 18 member, stock up on food, but when it comes to 19 someone's life if someone on life-sustaining 20 equipment, and that person is home and many of the seniors have families that live out of state, out of 21 2.2 the country. Many seniors I know in my district 2.3 don't have family, and when you're talking about a younger-a younger adult who you mentioned in your 24 testimony that it doesn't have to be a senior, but 25

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chances are someone that is younger they're on lifesustaining equipment, they family members, they have brothers, they have sisters, they have children, they have aunts, uncles, and many seniors are just left alone and they don't know and they can't fend for themselves, and we as a city must protect them, must stand up for them. And I think that having an outreach to seniors and people with disabilities and to everyone actually, but in particular seniors, that this what you should do. Very simple. People get scammed every single day. We have an outreach that if you receive a phone call that you just kidnapped your grandchild, right, don't send the money. Call 911, and why do we do it for seniors? Because they are the ones that lose \$5 billion each year in the United States of America because they fall for these scams. We're talking about someone's life. During Hurricane Sandy, we had a life course (sic). I don't want to see something like that repeated. So, you're talking about OEM. Does OEM have this outreach in 10 different languages? Can you answer that?

ELI FRESQUEZ: So, I can't—I can't speak for OEM, but I can speak to what we lead to in our MOPD website, the Mayor's Office of People with

is the site?

Disabilities and we lead to the access and
functioning web page that also has information on my
emergency plan, and really about community outreach
through Ready New York. So, again, I can't speak for
OEM, but I know that they have a very robust outreach
where they do go out to the community to do these
events for personal preparedness for people with
disabilities. So, what specifically does it mention
in the pamphlet or what you're talking about that
already has this kind of page, and what specifically

ELI FRESQUEZ: So, New York City

Emergency Management, and again, I can't speak for

Emergency Management, but from the brochures that

I've seen and what we support on our website at the

Mayor's Office of People with Disabilities is the

non-emergency plan, which gives lots of information

for people, everyone really, but also people with

disabilities on how to prepare for disasters. It has

information about making sure that you have your

medication, that you have a doctor's designation.

COUNCIL MEMBER DEUTSCH: It doesn't mention that you should register your home address

have in the officer. So, I know that my office is in

have 20 people that come in a day.

2		ELI	FRES	SQUEZ:	They	come	to	our	office	
3		COUN	NCIL	MEMBER	DEUTS	SCH:	[ir	nterp	oosing]	In

the day?

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ELI FRESQUEZ: That's just one—that's just one way of—of doing outreach, and again, this is a question for Emergency Management or Ready New York, people who go out into the community. They do literally hundreds of events each year.

So—so if someone—it's, you know, it's—when you—when you give information that someone should prepare themselves and go out and buy food, that's pretty common sense, but you need to remind people when you tell people they should evacuate, right. Now after Hurricane Sandy people would—people are more proactive, but you always need to remind them. But, you know, in many of the things you mentioned in your past posts, it's like a reminder to them. It's common sense now, but you need to remind them. It's always good to remind people. But when you—someone needs to register with Con Ed, and you don't know about it, you're not reminding them. You need to do education outreach and you tell them—

presentations about emergency preparedness.

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COUNCIL MEMBER DEUTSCH: [interposing]

So, I have a question. If you—if you do a poll

today, how many seniors there in the city of New

York?

ELI FRESQUEZ: Over the age of 60, 1.4 million.

COUNCIL MEMBER DEUTSCH: 1.4 million and you have about over 900,000 people with disabilities. So, if you did a poll today to the 1.4 million seniors, you know, and the 900 people the people with disabilities asking them about do they know about registering their home address with Con Ed with the life-sustaining in case there's a power outage, Office of Emergency Management should know that they must have emergency services responding and Con Edison would then in turn know that this—these are the areas we need to turn back on the electric, and make it a priority. How many people do you think would actually know that?

DEPUTY COMMISSIONER RESNICK: I think people who are on life-sustaining equipment know that.

COUNCIL MEMBER DEUTSCH: People that are on life-sustaining equipment, but if someone comes

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out of the hospital, right, and the hospital does not do the outreach and does not tell people to be on life-sustaining equipment. So if someone comes out of the hospital and he's out of the hospital for a month or two, right, or three months, they may not know that they should register their home address.

Because I know. I've spoken to people who are n life -sustaining equipment and they weren't registered with Con Edison, and this is so important because OEM already exists. OEM--

DEPUTY COMMISSIONER RESNICK: Uh-hm

COUNCIL MEMBER DEUTSCH: --currently if there's a power outage in any neighborhood due to a wind storm or a hurricane, they already know to call Con Edison and get this list of all the people that are on life-sustaining equipment, which already exists.

DEPUTY COMMISSIONER RESNICK: Uh-hm.

COUNCIL MEMBER DEUTSCH: Everything is already in place. I have seen it first hand, and I'm constantly speaking to Commissioner Esposito, and the first question that I ask when I call OEM and there was a power outage or when I call OEM I say how many people are on life-sustaining equipment, and they

2 have the answers to it. This whole thing already 3 exists. What doesn't exist is the outreach for the 4 people. If we need to lose one life because someone 5 does not know that they should register their home address with Con Edison then shame on us. 6 7 personally called up Con Ed to see how long it takes 8 to register, and it took under two minutes just to go through the process to register someone, and all we need to do is education outreach. It's going to cost 10 11 the city some money, but this is going to a good 12 cause, and I do think the Department of Aging and 13 your office should be proactive and be involved in 14 this educational outreach in ten different languages 15 because how many people if they don't speak English 16 as a first language, how many people do you think 17 know that they should register with Con Ed because 18 the material that you are sending out, the people you 19 are sending out in the senior centers, which we 20 appreciate, do not speak ten languages, and I have a 21 very diverse district. We have a very diverse city, 2.2 and the fact that everyone came here with the mindset 2.3 saying I'm not supporting this, and not having the information because you said OEM is not. We're not 24 having that information. It's just irresponsible. 25

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Because we're talking about lives. We're talking about our seniors and seniors are living longer. So chances are that I just want to a birthday party. I actually went to three, a 100-year-old constituent, 101 and 105. Seniors are living longer. We're fortunate with that, and chances are as they live longer, we hope that they don't end up on life-sustaining equipment. But many of the caretakers don't speak English as their first language. So, the caretakers wouldn't even know. So, I really don't understand how everyone comes here with the mindset saying I'm not supporting this. This is people's

# DEPUTY COMMISSIONER RESNICK:

[interposing] I just want to clarify--

lives and we have --

COUNCIL MEMBER DEUTSCH: --we have—we have—we have—we have unfortunately now with what's going on around the world and now in Puerto Rico, right? This could happen any time here in New York City. If you walk outside today, it's very windy. Trees are coming down. You have plenty of—I could o onto the Con Edison website to see how many power outages there are. This is a bill that we all need to support whether you're a senior or whether you're

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a young adult, we all need to support this. This is—
this is really and favorite lately is unacceptable
for us not to support our seniors and our people with
disabilities who are on life-sustaining equipment.

DEPUTY COMMISSIONER RESNICK: So, just to clarify to the record, we absolutely support doing outreach and education and making people aware of the opportunity to register if they're on life-sustaining equipment.

COUNCIL MEMBER DEUTSCH: [interposing] this is not going--

# DEPUTY COMMISSIONER RESNICK:

[interposing] We are not supporting legislating that because we think we're doing a good job, and I'm sure we can do more and now that you've highlight the issue, we will make sure that we continue to do more in this area.

COUNCIL MEMBER DEUTSCH: So, again, OEM has a plan in place. You are doing outreach, and I thank you for that.

#### DEPUTY COMMISSIONER RESNICK:

[interposing] We work with them, and we do our own outreach, yes.

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the time.

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COUNCIL MEMBER DEUTSCH: But I don't agree that we have enough outreach. I think that we do need—we do need to legislate sometimes to make sure that his outreach is done. We have outreach all

DEPUTY COMMISSIONER RESNICK: Uh-hm

We have voter registration outreach.

COUNCIL MEMBER DEUTSCH: We have outreach in different languages for people to go out and vote and what they need to do. We have outreach all around the city where it's legislation. We-we do legislate because the reason why we couldn't vote because we don't feel that enough is being done, and this bill is very crucial because of not only what's going around it-like what's going on around the world, and we see it happening, and I have personally been making phone calls to people that I know in Florida and other areas and other parts of the United States to see how they're doing and, you know, if we're-if we're making phone calls it's not just me. People all over New York City are making phone calls to relatives, to friends to acquaintances, people they know. They care about those people. need to care about the people in the city of New York, too, and make sure that yes if there's-if we

2	feel there's not enough outreach, and I could tell
3	you if you do a poll today, right, people don't know
4	because they'll be surprised. Oh, how come I wasn't
5	told about this? Why do we have to do outreach so
6	people should put smoke alarms in their homes, right
7	Because you want to prevent a death, and we need to
8	do outreach. Is the Fire Department doing enough
9	outreach? They do plenty of outreach, but it's
10	always not enough. I never heard anyone say that we
11	have too much outreach, and we need to do more. So,
12	I—I still don't understand that why the
13	Administration is not supporting this bill. It's a
14	common sense bill. It's pretty simple, and I think
15	our taxpayers will support something like this, and
16	not spend money on other nonsense, and this is an
17	important bill and this bill will save lives,
18	guarantee you. So, I'd like to get the
19	Administration's support. I think this is totally
20	unfair for everyone to come in here and not
21	supporting this bill and have the mindset by saying
22	no we're not supporting this bill because we do
23	enough education. Do schools do enough education?
24	Yes, but they could always do more. Do senior

sudden because of some health reason they have to use

and be responsible for all New Yorkers. We are a

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small agency with a small budget. The legislation
does not specify just outreach to seniors, and
homebound seniors should they be on our case
management program, clearly in emergencies we do
tremendous preparedness tot make sure that all of our
homebound are prioritized that the frailest of those
have whatever supports are in place, and we would

So, this bill is not to send out a mailer to 1.4 million. It talks about going to senior centers, doing education outreach in senior centers and NORCS and the libraries and other areas, but—so it's—it's not going to be that costly to have this done in ten languages. You're already doing outreach in senior centers and everything else—

DEPUTY COMMISSIONER RESNICK: [interposing] And in also the languages.

certainly educate about the on online--

COUNCIL MEMBER DEUTSCH: --and this is just having another piece of paper, another flyer doing outreach. By bringing in additional information, which you're already doing, right?

DEPUTY COMMISSIONER RESNICK: Yes,

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bringing additional information to the senior centers and NORCs and libraries and other areas where you're already doing outreach at those—at that location.

So, I don't see how this is going to cost—this is costly because everything is already being done.

This is just giving another piece of information separate from everything else to let people know that this is what you should do.

DEPUTY COMMISSIONER RESNICK: Alright, I mean the information, and I can share with you what's on the Office of Emergency Management's website.

COUNCIL MEMBER DEUTSCH: Yeah, but many seniors don't have-many seniors don't have computers.

DEPUTY COMMISSIONER RESNICK: But we share that information in Ready New York. That is all read and it's in multiple languages. That is what we used to distribute to educate people about the opportunity to--

COUNCIL MEMBER DEUTSCH: [interposing]

So, I would ask you if—if it's possible, if—if you could do a poll and just as you—your people going the rounds to different things, how many people and how many seniors would know that this is what they have

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I mean to me this is very simple, and really common sense, and everything is being done. OEM is ready-we're not mandating OEM okay you must work with They're already doing that. Con Ed.

DEPUTY COMMISSIONER RESNICK: Right.

COUNCIL MEMBER DEUTSCH: We're not asking you to do anything special more than-than you're doing now. You're already doing outreach--

DEPUTY COMMISSIONER RESNICK: Yes.

COUNCIL MEMBER DEUTSCH: -but this is to expand on outreach by giving them separate information that this is what you need to do because of the many power outages that we have, and all the storms that's been going on now, and it's-it's common--

### DEPUTY COMMISSIONER RESNICK:

[interposing] We need to work with you and meet after this hearing. If-if you feel that we need to develop a separate outreach piece of material, I'm sure that's something we could work on with Emergency Management.

COUNCIL MEMBER DEUTSCH: This is something that I would like to see that will continue that once this bill passes, I'm hoping it passes, and

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I'm hoping this comes into, you know, I'm hoping to get the Administration to support this bill. I think it's really—it's really unfair that, you know, this is not going to be costly unless you have numbers right now telling you how much—how much it could cost. I'm sure you don't have that, but if this bill passes do you have any numbers or how much this bill would cost—

DEPUTY COMMISSIONER RESNICK: No.

pass? If it should pass? So, we're in the hearing here. We don't have information about the OEM stuff that we spoke about. We don't have information of how much this would cost if it should pass, right.

So, how could we just throw things out saying this is costly. Were they doing this? We do have this information in some book that has 50 other things in there that are mostly common sense that you're reminding people about. You know, we don't have all that information so how could we even have a hearing on this bill today if we don't have that information, and by everyone telling me they're not supporting this? [pause] Anyone?

2	ELI FRESQUEZ: You know, I can only
3	really speak towards what the Mayor's Office of
4	People with Disabilities do and we work very closely
5	with New York City Emergency Management in all facets
6	of Emergency Management particularly the community
7	outreach. We do fairs. We do symposiums. We do
8	working group. We work with them on a myriad of
9	different approaches and each
10	COUNCIL MEMBER DEUTSCH: [interposing]
11	When was the last time you had a fair in my district?
12	ELI FRESQUEZ: I—I—I don't know.
13	COUNCIL MEMBER DEUTSCH: You don't have
14	that so you don't have any information today at a
15	hearing when we're hearing my bill. So, if you're
16	going to say
17	ELI FRESQUEZ: [interposing] That's a
18	question for Emergency Management.
19	COUNCIL MEMBER DEUTSCH:if-if-if
20	you're going to say something, you need to back it
21	up.
22	ELI FRESQUEZ: I would say-well, let me.
23	COUNCIL MEMBER DEUTSCH: [interposing]
24	So, so if you tell me had

again, I-I don't know your particular district.

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COUNCIL MEMBER DEUTSCH: Alright.
ELI FRESQUEZ: I will say that literally
two weeks ago we had a community
COUNCIL MEMBER DEUTSCH: [interposing] Do
you have the number of how many outreach, and how
many—like what?
ELI FRESQUEZ: We were at a community
event in Staten Island two weeks ago. I speak with
the Emergency Management daily on community outreach.
COUNCIL MEMBER DEUTSCH: [interposing] So
you went to Stat-you went to Staten Island, you were
speaking to people in the surrounding areas? So, but
I still don't think you do enough outreach because
you can't answer the question in my district, and
that's why we need to legislate that there should be
more outreach and participation.
ELI FRESQUEZ: [interposing] That's not
part of the leg-that's not part of the legislation.
The legislation here asks for us to put information
about LSE to the utility companies on our website,
which we already do.

COUNCIL MEMBER DEUTSCH: And to do

outreach to people in neighborhood NORCS?

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2	ELI FRESQUEZ: That's a question for
3	DFTA, not for-that's not what's in the legislation.
4	CHAIRPERSON CHIN: Council Member
5	Deutsch, we have a few more panels. They don't have
6	the information that you need.
7	COUNCIL MEMBER DEUTSCH: I-I would like
8	to-I would like to
9	CHAIRPERSON CHIN: [interposing] I think
10	that we're asking the Mayor's Office who is here
11	today to set up a meeting with Council Member
12	Deutsch. Because as with every legislation, there's
13	got be discussions right? So, you know that he-
14	DEPUTY COMMISSIONER RESNICK:
15	[interposing] We're happy to meet with you. Happy to
16	talk about what we're doing and—and identify for you
17	where we're at.
18	COUNCIL MEMBER DEUTSCH: So, okay. I
19	would like to know-I would like to discuss offline
20	then how we could this legislation, how we could make
21	it work, and since you don't have the numbers, well
22	maybe we could have another hearing on this bill.
23	DEPUTY COMMISSIONER RESNICK: Uh-hm, yes.

COUNCIL MEMBER DEUTSCH: Thank you.

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CHAIRPERSON CHIN: Thank you. We've been joined by Council Member Vallone. Do you have any questions before I--? Okay. Alright, I'm going to talk about bed bugs since Council Member Dromm is not here. So, if there's a senior who has a bed bug problem if they call DFTA what kind of help would the senior get? I mean it seemed like from our testimony you kept focusing on the Department of Health.

DEPUTY COMMISSIONER RESNICK: Yes.

CHAIRPERSON CHIN: So-

DEPUTY COMMISSIONER RESNICK: And I have colleagues with me today from the Department of Health who might want to come up and join me. [door bangs] [background comments] Department of Health is the go-to place. As a matter of fact, we have unfortunately had to package up our own little bed bugs and bring them over there to have them identified so we know first hand how—how that works. So, maybe you could walk through a little bit of the protocol and what DOHMH does in terms of bed bugs and have them really the aid to day. (sic)

CHAIRPERSON CHIN: And also maybe—do you have any example of seniors calling DFTA when they

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2 have a bed bug infestation, and how DFTA help them 3 resolve that?

DEPUTY COMMISSIONER RESNICK: We, of course, line to the Department of Health and Mental Hygiene's information. We have our own information. We do outreach about what to do if you have bed bugs. We do get some calls, not many. Often times it's our most vulnerable seniors and they may become or already are part of Protective Services, and I know that they have helped in very-very special cases particularly of quarters. So, they tend to be unique and really sort of the most impaired or lacking in—in competency, and I do know that APS and our assigned Council project has gone into physically help or pay for remediation in extreme circumstances.

CHAIRPERSON CHIN: So, if a—a senior is under or has Adult Protective Services, then you're saying that they would have all the assistance that we talked about in the legislation? That they would have people who help them—

DEPUTY COMMISSIONER RESNICK: Yes.

CHAIRPERSON CHIN: --clean up and move
the furniture and make sure exterminators—but if they
don't have Adult Protective Service, if they still

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need assistance, how does DFTA coordinate with the

Department of Health to provide that assistance if a

senior calls you. ?

only had the resources to help in really exigent cases that are, you know, really emergencies, and other than that, people have to use their own resources, friends, neighbors, the for-profit companies that do the remediation who will do the moving and the lifting and whatever, you know, it takes in order to clean up an apartment.

CHAIRPERSON CHIN: I mean what about-DEPUTY COMMISSIONER RESNICK:

[interposing] It depends on what type of dwelling they're in. That's what makes this more complicated. If—if it's a NYCHA, if it's in, you know, a nursing home, and there are different regulations around different types of housing, supportive housing, et cetera. If it's in a hotel, if it's a tourist, if, you know, it's—to say every senior residing in the city of New York in any type of dwelling is, you know, above and beyond anything that we could manage and regardless of income.

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2 DEPUTY COMMISSIONER RESNICK:

3 [interposing] I think it might helpful if we hear
4 from DOHMH--

CHAIRPERSON CHIN: [interposing] Yes.

DEPUTY COMMISSIONER RESNICK: --what exactly one does if they think they have a bed bug situation.

CHAIRPERSON CHIN: That's right.

ANNA CAFFARELLI: Thank you very much for the opportunity to be here. My name is Anna Caffarrelli. I work with the Injury and Violence Prevention Program at the New York City Department of Health and Mental Hygiene, and I can give you an overview of how we handle this-this great concern, of course, about—about bed bugs in New York City. As—as Deputy Commissioner Resnick referred to in her testimony, our rule is mainly educational at the Department of Health and Mental Hygiene. We have a number of educational materials that describe myths and facts related to bed bugs and prevention strategies and mitigation strategy. Well, we do have a small enforcement role there if we need it with respect to some past management plan. We do not have a role in bed bug abatement, and—and I will also, you

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know, for our city team, of course, and I'll mention
that we have colleagues here from-from HPD, from
Housing, Preservation and Development. It was
mentioned that HPD handles complaints due to bed bugs
and also distributes educational material, and that
HPD also does not have a role in bed bug abatements
specifically. What I would like to offer, of course,
is that we can connect you to my colleagues at the
Health Department who are experts in the -the bed bug
realm, but that's not my particular background, but I
did want to give you that—that overview of the Health
Department role.

CHAIRPERSON CHIN: Well, that's why this legislation is so important. Nobody took care of the—the abatement part. It's sort of like if a senior or a person with disability needs help, where do they go?

DEPUTY COMMISSIONER RESNICK: Well, maybe now is good opportunity to call up HPD to talk about what the landlord responsibility is and the role that they play in enforcement. Thank you, Ed. Thank you. This is how we work together collaboratively as an interagency partnership.

Good morning.

2 CHAIRPERSON CHIN: I'm not convinced.

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MARIO FERRIGNO: Hi. I'm-I'm Mario Ferrigno and I'm the Assistant Commissioner for HPD's Division of Code Enforcement, and HPD is the agency charged with responding to 311 complaints and enforcing the Housing Maintenance Code with respect to maintenance conditions in resident, tenant occupied residential dwellings, and if we do receive a call regarding the bed bug point, we dispatch an inspector after first notifying the owner of the condition. If the owner does not correct the condition or if the tenant does not confirm to us that the owner has taken some steps to correct the condition, we will dispatch and inspector who if confirms the bed bug condition, who issued the violation. The violation is sent to the registered managing agent who is, in fact, responsible for the remediation of the condition. As you probably already know, we have—all of our inspectors are trained to identify and issue violations for bed bugs, and we also have K-9 Unit with two beagles who identify and they're teamed with an inspector to identify bed bugs.

However, once violations are issued and owners do not

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correct conditions as they're required to, they face potential litigation. They face potential civil penalties.

involved there where the tenant or the person who is suffering can be given some type of steps or procedures on how to get relief in the situation instead of just seeing a ticket being issued to the landlord? Should we send out a guide given to the senior saying these are the different services that are provided by the city. This is where you can find help. This is where—

MARIO FERRIGNO: [interposing] Our—our inspectors are also equipped with the Department of Health's Bed But Guide, which they do provide to tenants upon completion of their inspection for bed bugs. So that information is—is handed to the tenant.

COUNCIL MEMBER VALLONE: And where I'm going with this is my more important question is what if they determine is a condition beyond bed bugs that there's a dire living condition going on in the apartments and it's beyond the scope of the inspector to address. At what point with all this wonderful

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collaboration and coordination of agencies do we now start to focus on there's a larger problem for this person for the senior. They might have started with the bed bugs, but once you get entry doing guardianship work for my entire life, the minute you get access to an apartment of a home there's a clear concern that either the person can't take care of themselves, there's other health concerns in the problem. What's the next step between your office and now notifying DFTA, ASP, the Department of

MARIO FERRIGNO: Our agency works with

Adult Protective Services, and if our inspectors come

across a situation as you described they would make a

referral to Adult Protective Services.

Health, Department of Buildings?

COUNCIL MEMBER VALLONE: And how do we get—again, that's emphasized. So, from the moment that happens, how does the coordination begin between APS and DFTA, and the Department of Health? One stays a condition underlying that's more important than the bed bugs.

DEPUTY COMMISSIONER RESNICK: If it's aif it's a referral to APS we—they don't necessarily
refer back to us. We make referrals to them. I am

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aware and—and HRA is not here today, but they do help
with mediation, and do what's necessary in order to
eradicate the situation, and I mentioned earlier that
if we have case management clients that have very
serious situations, you know, we have some access to
emergency funds or we've had private funding where we
an help. So, really, you know—

COUNCIL MEMBER VALLONE: [interposing]

Perfect. So, that's what I said. So, you have that

case management system in place?

DEPUTY COMMISSIONER RESNICK: Yes.

all of a sudden something is flagged and someone has an existing case within DFTA, and now there's been an inspection through Department of Health, the Department of Buildings. Does any of that information get included into the existing case management or is it a separate incident and they don't get related?

DEPUTY COMMISSIONER RESNICK: I honestly don't know if we would know if you've issued a violation. I doubt it. We would know if there was a bed bug situation in—in the client's apartment, and a lot of that work is working with the landlord to make

sure they get in and—and remediate the problem. I

mean it is at their expense and the responsibility to

do that.

COUNCIL MEMBER VALLONE: No, I'm with
you. I'm just trying to dig deeper onto the next
step on how we can coordinate. We've done it with
Rikers, with detainees and inmates coming forward.
We keep their health record for whether it's
recidivism what's coming through so that the medical
department—there's always a file ongoing with a
particular person. So, if we were to open a case

file for someone it might be—I don't know if it's a simple as bed bugs, but that's the tip of the iceberg and now all of a sudden it turns out we have to open an entire fire for that senior that we could now coordinate and contain that person's records so, we can coordinate visitations whether it's APS, whether it's DFTA, whether is the Department of Health following up on the—

### DEPUTY COMMISSIONER RESNICK:

[interposing] I think we learned in preparing for this that when HPD issues a violation that they don't keep that data based on age. So, there's no way of

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2 them being able to say a senior has been, you know,
3 infected.

COUNCIL MEMBER VALLONE: Yes, so maybe-maybe we can do something.

MARIO FERRIGNO: [interposing] Yeah, well we—we don't—we don't know the age of these calls to 311 and we don't inquire with two exceptions, which are treated by the law, which is the child protection laws for the paint hazards and window guards. Other than in those two instances, we don't inquire about the age of the tenant.

COUNCIL MEMBER VALLONE: Well, I mean, the hardest part for us as—as legislators is often getting access to an apartment or a house or a building and here we have access. So, I'm wondering how to just utilize that opportunity if there's a person in need, or some type of future plan we can put together if something is witnessed. Obviously training. You know, the—the health inspector is coming for a different reason that the Building Department is going to address. I understand that, but the idea is to provide assistance to the senior or a person on a disability or a person in need, or often it's a parent taking care of an older child or

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visa versa, and this very fear in letting people into
that, that yours. It's something that we can talk
about at a future hearing with our chair, the
coordination of that data to provide really a global
plan when someone actually calls the city for
services and it might start with bed bugs. That's
the reason why something as simple as bed bug call,
but now all of a sudden we're getting into the heart
of what maybe it was the landlord completely just
blowing the situation having a bed go from tenant to
tenant to tenant. However, it might be something
else going on. So, maybe we can talk about.

DEPUTY COMMISSIONER RESNICK: I'm sure we could.

COUNCIL MEMBER VALLONE: Thank you, Chair.

CHAIRPERSON CHIN: I guess if the—if the call came into DFTA, most likely, I mean you would know whether it's a senior or not and then you could also like follow—up whether it's a case management agency, because one of the concerns that we've heard is that that's where homebound unit. Right, if they have attendants, how do you make sure that the DFTA contractors or the homecare worker enters the home of

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a client who has bed bugs. You know, if they don't then all of a sudden this homebound senior with a bed bug situation will not get any kind of help. So, that's-that's something that we-we want to make sure that there is serve there to help these seniors in need because all I hear about is enforcement and, you know, and then the Department of Health with all the quidelines where there's no real assistance to a senior who is going through that situation. There's a lot to do right? You have to clean all the laundry, and you've got put everything together and the furniture. I mean the senior in that situation is not going to be able to handle it, and that's when they cry out for help. I mean I'm not sure if Adult Protective Service is the only way to get them assistance. Is that what it is right now?

DEPUTY COMMISSIONER RESNICK: I'm not aware of other city services besides protective services, and a few cases that we've had either in case management or through our Assigned Counsel programs. You know, sometimes eviction is bed bug infestation becomes part of that whole process.

CHAIRPERSON CHIN: Well, that's something that—information that's a follow-up. We wanted to

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get some HRA in terms of like in case of the
situation with seniors and bed bugs, you know, how
does APS come in and do they provide the help and
assistance, and so we should get some information on
that. Is this for that? I think what we'll do is
since we have other panels of advocacy we wanted to
hear from the. So, I wanted to thank you all for
testifying, and we are going to send you all the
follow-up questions that we didn't get answers to,
and I hope that we will

DEPUTY COMMISSIONER RESNICK: A follow-up meeting?

CHAIRPERSON CHIN: Yeah, continue to follow up and then discuss how we can get the administration on board to support this legislation.

DEPUTY COMMISSIONER RESNICK: Thank you.

CHAIRPERSON CHIN: Thank you

DEPUTY COMMISSIONER RESNICK: Thank you.

[background comments, pause] The next panel Alexander
Riley, Volunteers of Legal Services Elderly Project.

Andrea Ciofani, Live on New York; Monica Krakowski
from JASA; [pause]

MONICA KRAKOWSKI: Yes, it's okay. Good morning. My name is Monica Krakowski. I'm the

Director of Legislative Affairs with JASA and I'd 2 3 like to thank Council Member Chin and members of the Aging Committee for the opportunity to testify today. 4 5 JASA's mission is sustain and enrich the lives of aging New Yorkers in their communities enabling them 6 7 to connect with people and places that give them meaning. JASA's programming promotes independence, 8 safety, wellness, community participation and enhanced quality of life for New York's older adults. 10 11 Our varied programs provide continuum of care to over 40,000 clients annually. I'll start with Intro 1185. 12 In the aftermath of recent hurricanes and power 13 14 outages across Houston, much of Florida and 15 surrounding area, and obviously what's going on 16 today, there's a heightened awareness of potentially devastating impacts of the most vulnerable members of 17 18 our communities. JASA commends the Council for 19 introducing 1185, which will require the New York 20 City Department for the Aging to provide information to households with uses of licensing and equipment in 21 individuals with a medical hardship on how to 2.2 2.3 register with the utility providing electrical service. Providing information to older adults at 24 25 senior centers and NORCs as well as having easily

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accessible information on the website, a New York
City website will expand the reach of the city and
hopefully help connect individuals with the
appropriate providers. Previous hearings on
emergency response and resiliency have address the
concerns of advocates as well as city agencies in
maintaining lists of individuals utilizing licensing
and equipment in case of emergency. Of significant
concern is how to keep such a database up to date and
accurate so not to leave the precious time and safety
of emergency responders.

for themselves by educating them on the steps to take in order to notify their utility companies while avoiding potential disclosure of private health related information to landlords. The responsibility of notifying the utility company rests with the individual in need of services, and I'll just—not as part of this but just the response to Council Member Deutsch, I agree that although we have plenty of information on Get Ready New York and all of those booklets that we give out and have them all the time and people have their go bags (sic) I don't see any reason not to have a standalone flyer information

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2 that highlights the need for people to registers.
3 It's just a-it's just easily-easily done.

4 Intro 189. As bed bugs have r

Intro 189. As bed bugs have made their way back into the spotlight in New York City, JASA has worked closely with staff and clients in trying to prevent and respond to outbreaks. Bed bug infestations can happen anywhere and people may unknowingly transfer them from place to place in their closed luggage and other things. Infestation can be small and isolated or more extensive and complex. Bed bugs cause a variety of negative physical health, mental health and economic consequences including various physical reactions to bites, and mental health implications for people living in infested homes, and time consuming and expensive control measures. JASA thinks that through Intro 189 the City Council makes clear the understanding of the particularly negative toll that bug infestations have on older adults, and aims to assist older adults in managing outbreaks in their JASA seeks to prevent mitigating and contain bed bugs and similar infestations in our offices, program sites and apartments. We've invested significantly in trainings and protective processes

for staff. Prevention is the most cost-effective 2 3 approach to managing bed bugs and can work in a wide 4 range of settings. Trainings include focus on being 5 respectful and sensitive to clients when asking about their home, and being vigilant in observation of any 6 7 risk. We also maintain resources online and access 8 for all staff. Despite preventative measures, outbreaks are inevitable with a client base of over 40,000 and approximately 1,000 staff members. 10 11 workers closely with a pest control company with 12 action plans including deployment of bed bugs, 13 missing dogs (sic) at JASA housing, center centers' 14 central offices and customized treatment plans 15 sometimes including removal of furniture, thermal heating and primate flash freeze treatments. 16 17 Unfortunately, bed bugs pose a significant challenge 18 for older adults, and treatment is costly, and to 19 that end, JASA welcomes any assistance the city is 20 able to provide, and that may mean as—as the Deputy 21 Commissioner mentioned, working with contractors. 2.2 Obviously, we're not the experts in moving furniture 2.3 and-and doing the actual getting rid of bed buts. But moving furniture and dealing with the intense 24 nature of actually readying apartments for 25

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2	extermination is—is very intense, and very
3	challenging for an adult Int 1684, JASA supports this
4	intro, which requires the Department for the Aging to
5	establish an interagency program coordinator position
6	to advise the commissioner on all city programs
7	relevant to aging. The Interagency Program
8	Coordinator would also be responsible for an annual
9	report to the New York City Council on aging program-
10	programs citywide. There are often programs and
11	services impacting older adults, which are
12	administered by city agencies other than the
13	Department for the Aging. Whether it's Human
14	Resources Administration, Department of Health and
15	Mental-Mental Health, the Department of Homeless
16	Services, Parks and Recreation, et cetera, it's
17	important to note that in a city as large as New York
18	City there's adequate coordination and reporting of
19	existing services. Int 1684 will complement the
20	already existing age-friendly NYC Partnership of the
21	Mayor's Office, New York City Council and New York
22	Academy of Medicine. And annual reports to the Mayor
23	and City Council will provide a clear picture of the
24	ways in which older adults are considered in city
25	planning and service coordination, and it will serve

ALEX RILEY: Okay, good morning. It's still in the morning. Good morning, Chairwoman Chin and Council Member Vallone, and thank you very much for the opportunity to speak this morning. So, I'm Alex Riley. I'm the Director of the Elderly Project with an organization called Volunteers of Legal Service. We're located down on Ward Street, walking distance from here. Just briefly, we run a series of small legal projects in a variety of areas of legal

The Elderly Project does two things: I run 2 practice. 3 legal clinics offering advice and referrals in a various—a variety of subject matters throughout 4 Manhattan and including one walking distance from here at-down on Gold Street, and I also work with 6 7 volunteer lawyers at partner law firms to obtain wills, powers of attorney, and advanced directors for 8 our clients. Prior to running this project, I was the staff attorney and the Legal Aid Society's 10 11 Brooklyn Office for the Aging for several years where I worked with a lot of clients with bed bug problems 12 13 and litigated cases involving this issue. So, I'm 14 very pleased that the committee is proposing this 15 legislation. First of all, I think that the-the 16 problem with bed bugs for seniors is—is a problem for 17 reasons other than simply that they are not able to 18 move large furniture as has been discussed before 19 remediation and eradication requires a lot of 20 additional steps from removing curtains to bagging 21 things and people with even insubstantial disabilities or lack of ability to do various things 2.2 2.3 and will be challenged in this regard. In addition, many of the-the seniors who have this problem of-of 24 bed bugs infestation are quite isolated. Earlier the 25

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- Deputy Commissioner of DFTA mentioned the prospect of friends and neighbors helping. Well, as we know, there are many isolated seniors in this city who have no friends and neighbors at all. So, that's—for many people that's not an option.
  - COUNCIL MEMBER VALLONE: [interposing] We all have friends and neighbors until we need a mattress moved and nobody picks up the phone.

    [laughs] Not being there.(sic)

ALEX RILEY: It's—that's an excellent point. Also, seniors and many people are often reluctant even to report the existence of bed bugs because there's a lot of misperception about whose responsibility it is to eradicate. Earlier the-the HPD representative pointed out correctly that it's the landlord's responsibility, but many seniors believe that it's their problem. They have to eradicate and they don't know how to do it so they don't tell anybody. This causes further problems, and the bed-the infestation gets worse, and in some cases the landlord will actually bring a holdover eviction action on the grounds that the-that the tenant deliberately omitted to-to alert anyone about this problem. So this thereby exage-exacerbates the

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problem, and finally, as was mentioned before, and may studies have show that clutter does increase the proclivity to clutter one's home. One's apartment does increase as one ages. So, the older the senior potentially the bigger the problem if there—if there is a bed bug infestation. So, we certain support this bill. I agree with DFTA, though, that perhaps the—the idea of having this apply to every conceivable home no matter how one defines that might be challenging, but certainly the-the majority of people I deal with they live in rental apartments, co-ops that sort of thing. Those people absolutely need help and that must I would say fall within the umbrella of senior's homes, and the-as the legislation describes it. A couple of other points I just-I wanted to make about the-the legislation-the way the legislation was drafted. The legislation says specifically that DFTA will assist with the movement of heavy objects, but as we know the problem families extends well beyond that. I mean, if an impaired senior needs help beyond just moving the I mean they have—there's lots of things that need to be done, and generally in my experience when APS gets involved, it's, you know, they're in

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they're in there to do more than just sort of helping to bag things. They'll-they'll do much more substantial work, which often involves what they call heavy duty cleaning, just getting rid of a lot of stuff, and that's what's not-that's not what's needed in any of these instances is a somewhat more careful approach. Also to the-to the discussion earlier about HPD's role in making authorities aware of this problem in individual instances, certainly when HPD is, it does show up in the apartment and inspects, finds a violation and place a violation for bed bugs, they can, DFTA and whoever else that many bed bug infestations are never reported to HPD or if they are reported to HPD, HPD there's telling how long it's going to take for an inspector to get there, if they're going to get into the apartment. So, I don't think that it's wise to rely solely on HPD to-to contact DFTA if, in fact, DFTA or whatever authority is going-going to be assisting. So, it-it occurs to me that there are other potential informers, so to speak, who could be mandated along the lines of a landlord's duty to inform a marshal of the presence of a-of an elderly person in an apartment prior to-to an eviction. Then the marshal is supposed to notify

2 Perhaps it would be required that if a landlord 3 or an exterminator is aware of a bed bug infestation 4 in an apartment with an elderly impaired person, then 5 the landlord or the exterminator should make a referral to DFTA or whatever authority is going to 6 7 handling the situation. And in terms of outreach, I mean there's been a lot of discussion of the 8 importance of outreach and education. Clearly this is critical in this case, and it occurred to me that 10 11 perhaps the Department of Finance with all of its 12 mailings and outreach to SCRIE and SCHE beneficiaries 13 could coordinate with DFTA in this regard, and so the last thing I wanted to say is that something I 14 15 learned in-in my litigation practice at Legal Aid was 16 that this issue is—this is a broader problem than 17 just with respect to bed bugs. I saw a lot of cases 18 where elderly people had housing code violations in 19 their apartment, but in order for those violations 20 to be corrected, large furniture needs to be moved 21 and these violations may have had absolutely nothing 2.2 to do with bed bugs. For example, repairing damaged 2.3 flooring, which posed a trip risk, a fall risk to the-to the seniors and typically landlords would say 24 25 well, you've got to move that furniture and the

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senior would say I can't and the landlord would say oh, well, it's too much of a liability for my people. We're not going to move it, and absolutely nothing would happen, and this—this is an issues that came up very frequently and there was no clear resolution to it. You—you really couldn't force the landlord to—to move these heavy objects, and there was no one else who was willing to do it. So, it would be great if at some point the committee could—could consider legislation that would offer this kind of service with respect specifically to heavy objects for any kind of housing violation—Housing Code violation that was impacted by this inability to move furniture. Thank you.

Good morning.

COUNCIL MEMBER VALLONE: Good morning.

ANDREA CIAFRANI: I'm Andrea Cianfrani.

I'm the Director of Public Policy at Live On New
York. We would like to publicly thank Mayor de Blasio
and the Administration as well as the DFTA
Commissioner Donna Corrado for recognizing the value
of investing in senior services in the FY18 Senior—
Year of the Senior budget, which added a historic \$23
million in baselined funding to community based

services that serve older adults as well as funding 2 3 for the Council, and we would also very especially like t recognize the efforts of Councilwoman Chin and 4 5 Council Member Vallone and the Aging Committee as well as all senior or all the City Council for your 6 7 strong and very vocal and sustained leadership 8 throughout this year of the senior, which we look forward to continuing to do. I'm just going to commend briefly on two of the bills being considered 10 11 here today. So, I'll just jump right into that, 12 Intro 1684. Live On New York supports this 13 legislation. As we age, we build an incredible 14 amount of momentum and older New Yorkers across the 15 five boroughs are using this momentum to power up the 16 economy, the political system and our communities. 17 Many older New Yorkers remain the anchors in their 18 neighborhoods and families providing invaluable 19 volunteerism, caregiving and activism recognizing and 20 bringing this momentum of older New Yorkers to the 21 forefront will continue to take a very coordinated effort by all agencies in all parts of the city. 2.2 2.3 doing so, New York City will gain this energy of older adults going forward, and truly make this a 24 city for all. Core to our mission to make New York a 25

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better place to age, Live On New York advocates that when policy and community development ideas are being discussed, when policy decisions are being made, whether it be about a neighborhood rezoning, the development of a new community space, neighborhood safety, service delivery for benefits or business development, stakeholders and decision makers must take in the perspective of how those relate to older We recognize the leader-leadership at the-at adults. DFTA under Commissioner Corrado as a strong voice for aging services and older adults. In addition, we support the ideas to the agencies being accountable and reporting on how they are also meaningfully serving the needs of older adults through their programs, resources and services. This could be anything to ensuring that they understand basic-basic things like that agencies might need to consider when they're holding public forums that seniors might be more apt to attend if it was during the day versus later in the evening. And also, another example is with-with neighborhood rezonings ensuring that discussion also focuses on the needs and supports in that proposed rezoning as it relates to seniors and in addition to schools and business development and

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job opportunities. So, these are some-some areas that we think are really useful to be addressed through this legislation because it's not only the services that agencies are offering, but it's also how those agencies look at how they offered their services to older adults and making sure they'rethey're taking in the perspective of those-those offerings. We also strongly advocate that the city makes continued investments in DFTA's overall infrastructure so the agency will have increased resources to serve the New York City's growing older adult population as we move forward. We also believe that this legislation and understanding the work of these agencies and how they-they are doing assistance delivery will help us understand as a city how, if there's any needs and gaps and help us plan through the budget for those needs going forward. 1684 would also strongly bolter the important work currently underway by the New York Academy of Medicine through the Age Friendly Commission, specifically those initiatives that were outlined in the recently report that was released in August. For these reasons, Live On New York strongly supports 1684. I'll also just briefly comment on 189, the bed bug legislation.

We're not taking a position at this time, but as both 2 3 Molly and Alex mentioned as well as other testimony 4 that was presented here today, it's a very complicated issue and—and we do believe that it's 5 important to address the needs of seniors and taking 6 7 into account all the complexities that happen with these situations. We are also in all of our work 8 constantly focusing on the needs of the isolated and those who do not have community supports, and that do 10 11 rely on the services of the city, for example through 12 the Case Management system we can help serve older 13 adults. Concern again with this legislation is that 14 it is not, it does not come with funding attached to 15 it in the legislation. So, we would want to make 16 sure again, echoing Molly's comments, it's an 17 expensive and complicated process that there be 18 funding that would be considered if-if this is 19 something—an idea that's looked at because it's a 20 very complicated situation, and again, we don't want 21 that responsibility to fall on community based 2.2 agencies when they're not equipped to do so both 2.3 financially and in other ways. The other, I will add again, to the 1684, the previous legislation that we 24 would say the same thing is that because of the 25

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complexity and the needs of addressing seniors in the city, we would want to make sure that that position is crated through this legislation would be fully and strongly supported financially by the city so that that position can do the incredible lot of work that will be asked, and will be needed. So, again, we thank you for the opportunity and also wanted to recognize that at the senior center has been the incredible work that member agencies such as JASA and many other do on a daily basis to serve older—older New Yorkers. So, thank you.

CHAIRPERSON CHIN: Thank you very much for your testimony and for some of your suggestions. So, this way we will have, you know, more backup as we negotiate with the administration on this legislation. So, thank you for being here today. Than you.

COUNCIL MEMBER VALLONE: And just real quick, I think what we determine when we have hearings like this is that there isn't a clear plan in place, and that's one of the ways to get to all of us and the advocates because as we all are concerned. So, something as simple as a bed bug question turns into a larger question, and then agencies will bring

in other people up to the table and saying I think
it's this person, I think it's that person, and
that's not a plan. So, legislation gets the question
on the table. Funding will come the more we get
advocates and more council members, and that adds the
stream roll until June comes, but if we don't start
it now and have our great Chair advocate the things
like this, we won't get there. So, I-I clearly see
the need for a coordinated effort to start this
process to make sure we don't lose seniors in the
world when we have an inspector come and three's no
follow up. When you have a landlord who says I can't
do it, and you have a tenant or a senior who says I
don't know who to call, and we have all these great
city agencies saying maybe it's this one, maybe it's
that one. So, we need to come up with a better plan.
So thank you.

CHAIRPERSON CHIN: Thank you. [pause]

Okay, I apologize if I pronounce your name wrong but

I can't read that handwriting that well. Sophia

Randall from Medgar Evers College. [background

comments] Oh, okay. Frances Mc Murray from Our—our

Children. Louisa Cabrillo (sp?) from Fortune

- Is—is that your name? No. [background comments] Oh,
  you're over there. Okay. [pause] You're going to be
  on the—you're going to be on the next panel.
- 5 [background comments, pause] Are you going to start?
- 6 FEMALE SPEAKER: I'm not going to start.
- 7 CHAIRPERSON CHIN: Oh, okay who's going
- 8 to start?
- 9 MALE SPEAKER: Ladies first. [laughter]
- 10 FRANCES MC MURRAY: My name is Frances
- 11 McMurray.
- 12 CHAIRPERSON CHIN: Please press the mic
- 13 and make sure the button is on.
- 14 FRANCES MC MURRAY: It's on.
- 15 CHAIRPERSON CHIN: Okay.
- 16 FRANCES MC MURRAY: My name is France
- 17 McMurray, and I'm formerly incarcerated being
- 18  $\parallel$  released only last year at the age of 62. There
- 19 | isn't anybody in the world that has never asked for a
- 20 second chance. No one, and never more important than
- 21 somebody that is being released. However, coupled
- 22 | with being released, is the fear of reentering
- 23 | society being unable to navigate without the proper
- 24 resources, housing, employment, education anything
- 25 | that is needed for the reentry into society, and we

2 just need more help in that area. I work with our 3 children. I was very fortunate that I obtained with 4 our children and employment with our children. However, I do witness a lot of people especially 5 older people they're having the difficulty in 6 7 getting-getting the skills, or they don't have the 8 skills needed to obtain employment. They can't find housing. They don't have family or friends that can help them. They've been ostracized or disowned by 10 11 their families because of shame on you, mom, how dare 12 you get into trouble. So, we can't house everybody. 13 We can't help everybody, but somebody has got to help 14 with that change and to-and to provide help. 15 it's-it's scary. There's terror on behalf of the 16 person coming out of prison because if you don't have 17 a plan before you reach that gate, it's too late. 18 You're going to run around like a chicken without 19 your head because you're so busy trying to find 20 housing. You're terrified you're never going to find 21 a job because you have the stigma of having a 2.2 conviction next to your name or state ID number, and 2.3 you end up returning to old familiar people, places and things, which helps keep the recidivism rate high 24 because you had no other choices, and I see a lot of 25

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2 people that never had the choice growing up so they
3 know any differently, and I'd lie to see that change.

CHAIRPERSON CHIN: [off mic] Definitely.

VIRGIL CABEER: Good morning. My name is Virgil Cabeer, and I was released June 16, 2016 after doing five--

CHAIRPERSON CHIN: [interposing] Can you put the mic closer.

VIRGIL CABEER: Yes. I was release June 16, 2016 after doing 507 months, which comes out to 42 years and 3 months, and I have almost tripled my sentence. I started out at 15 to life, and most individuals who do long prison sentences no matter what people think, they have no idea what they're going out into the world to experience. Due to the fact that certain prison rules and restrictions don't let you deal with a computer. You don't have Bluetooth. You don't have certain electronic surveillance equipment. You don't have certain Medicare and Medicare practices. So, when you go out, the first thing I experienced was seeing people talking to theirselves in the street, which made me think everybody was crazy because we don't have Bluetooth in jail. And upon seeing that, I aid what

2 have I been sentenced to, and when you see new 3 technology, or you see buildings where your house 4 used to be, and you see new money(sic) going into the bathroom and the sinks come on by theirself. 5 electronics, all the musical equipment and stuff like 6 7 that. It's overwhelming. When you have people who 8 have spent a great deal of time in the penitentiary, educating theirselves to be released to a society that won't accept them, what do you do? Well, a lot 10 11 of the seniors we automatically start looking after 12 youth because if you don't protect the youth, you 13 will have no future. Myself and others like me we 14 have dedicated our lives to wanting try to save some 15 of the kids now, to save them. I tell people that I helped destroy the community that I was in 40 16 17 something years ago, and I no longer am the same 18 person. When I went to jail, I was 33. I'm 76 now 19 and whatever I did I can't change that, but I want to 20 be-be remembers as well as many other seniors for the 21 good that we do now. If-if-if the society doesn't 2.2 utilize us to help straighten out the conditions, 2.3 then society is going on a path of failure. The same manner in which you advertise for people down on Wall 24 Street who are retired executives and utilize their 25

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experience. You should utilize the seniors who come out of jail for the same reason. We know what to do. We have lived it. One of the mistakes that society makes is I nickname it the West Point Syndrome. you send a person to college to go and come out a second lieutenant to go and fight a war where they have never been as opposed that soldier who became a sergeant who was in the trenches for years. You can't keep making the same mistake and thinking that you're going to solve the solution. Utilize those people who have spent their time in jail that have tried to save your youth to try to ensure that you have a better future because if you don't save the kids, you got no future. You don't have it. turn want to help, but we can't give all the time. We never filled out any paperwork before. We don't know it's about HRA or SSI or anything else like that because we weren't exposed to it until we were instantly put on the street. When we are put on the street, what do we see? A whole new world, a world which didn't exist when we were incarcerated. only thing that closely resembles being in touch with reality is looking on the television, and that's fantasy. The reality of it is the most hurtful thing

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that I've seen since I've been home is seeing individuals meaning anyone that's sleeping in the streets. Because when I look at them, I say that could be me, and I'm thankful that the Fortune Society and many others like them accepted us and helped us because we're here, but don't waste our talent. We can help you clear up this mess because it's a mess. You might not see it, but if you've never been to jail, you don't know what it's like to be in there. You have no idea other than what somebody told you. Live it for-for a year, and see what it's like. One of thing I advocated many years ago, I said you send every kid that's reached a certain age use the scare straight tactic. Let them go to jail for a year not on the real side but as a training, you would save a lot of going back to jail. But without that the gang, the peer pressure, the drugs, the things that attract people, they're going to fall into that spot as well, and they're going to get sucked up, and if you don't save the kids like I said, you're not saving the future. You're making your job harder because right now, you, yeah but youyou're not going to enjoy seeing your grandchildren or your great grandchildren being sentenced to a time

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when you won't even be around to visit in the future because you're going to be dead. I had three children. I lost one, but I saved two. I saved two. My daughter became a CO and my son he—he made it. I lost one child and I got a grandchild, and she came to see me and she's alright, but I would love to help all mothers and fathers not see their kids going to jail to be sentenced. The north is much better than the south because they execute them down south. They execute them. They don't—they don't take no—they don't take no—no sharks, as we say, and I think you

 $\label{eq:CHAIRPERSON CHIN: Thank you for being} % \begin{center} \begin{center$ 

for letting me talk, and I appreciate it.

FERNANDO MARTINEZ: I want to also thank
my colleague for sharing his story. It's a story
that we often hear at the Osborne Association. My
name is Fernando Martinez and I am the Fulton Project
Director, and I'm speaking on behalf of Laura Rone
(sic) who is the Program Manager for the Elder
Reentry Initiative at the Osborne Association. The
testimony that I'm about to provide is our testimony
as the Program Manager. For two years the Elder
Reentry Initiative with support from the Osborne and

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City Council HA (sic) funding and Council Member Gibson's fund for Senior Services along with several foundations that has provided geriatric assessment and discharger planning services to incarcerated older adults prior to their release. And then comprehensive case management services post release in New York City. These services are for returning citizens individualize age appropriate care to ensure a successful reintegration into our communities. you all have heard from other speakers such as my colleague next to me or my two colleagues, and in the testimony submitted by Tanya Krupat, who is here today, Director of Osborne's Center for Justice, the questions she raised older adults are the fast growing demographic in prison. Yet, to our knowledge we're operating perhaps the only program in the nation that serves the transitional needs of aging people in both jail and prison setting, and provides a continuity of care from pre-release to one year post-release. The programs operates in Rikers Island-Rikers Island jail and three New York City --New York State prisons as well as five-as well as in the five boroughs of New York City, as you may be aware, that due to Osborne's request to the City

2 Council for the past two years to fund this work. 3 Since many others before me today have spoken on the 4 challenges associated with incarcerated older adults, I am going to speak to Osborne's unique experience on the front lines of working with this older 6 7 incarcerated population. Osborne's Elder Reentry Initiative initially focused on seniors released from 8 incarceration after 10 or more years in New York State prisons. That has since expanded to include 10 11 older people being released from Rikers Island jails. 12 The populations are quite dissimilar as Rikers Island 13 participants often have chronic substance abuse 14 issues and they address mental health concerns and 15 extensive periods of homelessness. They find 16 themselves mired in cycles of detention, homelessness 17 drug related crime and re-arrest. Our participants 18 with ten or more years of incarceration, however, 19 face distinctly different challenges. In both cases, 20 we begin with a geriatric assessment that is 21 especially modified for the incarcerated. Their 2.2 struggles with crime and sobriety lie decades behind 2.3 them but their age creates a new barrier. They face the world that has changed dramatically since their 24 25 arrest: Cell phones, WiFi, touch screens, Metro

2 They answer their apps. All of these are 3 foreign to them. Key family members have died or 4 moved away and their aging bodies often cannot work in a job sector they left behind decades ago. Because it is hard to image what entry-what reentry 6 7 looks like for someone incarcerated 20, 30 or 40 8 years, I would like to share the story of one of our participants, Tyson, who we met at the prison gate and escorted home on the day of his release. 10 11 story begins months prior to his release when I met 12 with Tyson to begin finalizing his release plans. 13 had been granted release after his sixth Parole Board 14 hearing, and after 35 years of incarceration. Tyson 15 was awash with emotion. When I approach Tyson in the 16 prison waiting area, he had been crying for 20-24 17 hours since he'd been notified about his parole 18 decision leaving him with red swollen eyes. In our 19 prior sessions, he had expressed what he had-that he 20 had-was depressed, anxious and lonely, and was so 21 grateful that he would soon be released living with his mother in freedom. His mother's health was 2.2 2.3 declining and he was thrilled to be able to go home to her and to care for her and spend time with her. 24 Release day was overwhelming for Tyson at 61 years 25

old and 35 incarcerated, he didn't know how to buckle 2 3 a seat belt, how to turn on a cell phone or how to 4 operate a touch screen. When he held money in his hands for the first time in 35 years, he asked me if it was real money because the colors and type face, 6 7 pictures, textures had all changed. He said the only 8 thing he recognized about it was the small. He said he'll get used to using Monopoly money. Several times in initial hours of freedom, Tyson broke down in 10 11 tears overcome with emotion. Tyson brought almost 12 nothing with him when he left prison. He had give 13 most of his things away to his incarcerated peers. He wanted to shed everything about prison life as 14 15 quickly as possible, the prison ID, the release 16 clothes, the soap smell. So we took him to a store 17 to get a few essentials like a razor and socks, and 18 you we experience people with extensive time behind 19 bars make so few decisions for many years that their 20 decision making muscles atrophy, and shopping can be 21 overwhelming for many of them. Tyson was no 2.2 different. When it came time to pick out new boxer 2.3 shorts, Tyson was completely flamuxed. (sic) paralyzed and unable to make a decision though the 24 choices were limited to just two options: Plaid or 25

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solid. [coughing] When he couldn't decide after several minutes of thinking, we flipped a coin, grabbed the associated pack of underwear and kept shopping. Minutes later he took me aside, Miss Laura, can I please get the other boxers. In prison we'rewe aren't allowed to wear stripes. So, I'd like to get the plaid instead. Of course, we went straight back and exchanged the solids for the plaid, but the moment struck solidly. Tyson's recovery and reentry were going to be grueling for him if the plaid/solid decision was so paralyzing. Beyond that, he was going to have to figure out who he was a human without the yoke of incarceration on his shoulders. Was he stripes or was he a solid man? Would he always pick up the not-prison choice or would he be able to recover, reestablish his own identify and truly be free? I'm happy to report that at the fouralmost four months being released, Tyson was-has recovered his ability to make decisions and he's living a purposeful, pro-social life. He helps his mother with her daily living needs. He is actively looking for work. He's still working on mastering technology while he embraces the challenge. He found his laugh again and his anxiety, depression and

2 loneliness seem obliterated. Tyson' success is 3 typical of our-of our participants. We have-we have 4 had only on participant rearrested. Our 5 comprehensive adaptive care management means that each participant receives compassion assistance 6 7 tailored to her or his needs. However, Osborne's 8 Elder Reentry Initiative serves only a small fraction of the seniors released from New York City jails and New York State prisons every year. So, most 10 11 reentering seniors do not have someone to help them learn how to use a Metro Card, a seat belt or a touch 12 13 screen. They do not have transitional housing, medical appointments or relapse prevention services 14 15 in place prior to release. Instead, they often are 16 lost and alone. Released back to the homelessness, 17 mental-mental illness and substance use that led to 18 them-that led to them to incarceration in the first place. Almost as—although Osborne is currently 19 20 redeveloping the Fulton Correctional Facility in the 21 Bronx to provide transitional housing that will prioritize older adults, the demand is far greater 2.2 2.3 than the question as we were able to go after what remains. I would like-reentering adults are 24 prioritized for senior and supportive permanent 25

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today.

housing. For all these reasons and more, we endorse

Council Member Dromm's proposal to crate a temporary

task force to address post-incarceration reentry for

older adults. Thank you for the opportunity to speak

7 CHAIRPERSON CHIN: [off mic] Thank you.

LAURA WHITEHORN: Okay. Good afternoon.

I think now it is. My name is Laura Whitehorn. I am representing the Release Aging People in Prison, RAPP, and I am formerly incarcerated. I had the good fortune largely because of my privilege in the society. So, was a person who had family and friends who were able to take care of me when I got out of prison, and I want to take us for a minute out of this hearing room. We had a press conference this morning, which was a lot of people, and a lot of formerly incarcerated people and their families and lot of support for 1616 and we really appreciate that it's being brought up. And we appreciate that it's coming out of the Aging Committee because just to-a little show and tell. So, one of our submissions today is the book: Aging in Prison and Reducing Elder Incarceration and Promoting Public Safety. That

began I don't know 2012 or '13. We can never

2 remember because we were planning it because we saw the exponential rise of the number of elders in 3 4 prison across the country and the statistic in-in New York is that since 2000 the overall prison population in New York fell by about 27% whereas the population 6 7 of people 50 and older went up by 98%, and this is 8 largely something that is not the concern of the City It's because our state agencies, the parole Council. boards they're not letting people go, and because of 10 11 the massive rise of the thinking that you have to 12 keep people in prison, people don't get a second 13 change. So, that also, though, creates a context to this hearing because if there are 2.3 million in 14 15 prison in the United States and all of those people 16 have families, then anything that affects the 17 incarcerated and formerly incarcerated population, 18 affects everyone in the community as well. So, this 19 booklet began when started to work on RAPP, we were 20 asked by people where are people going to go? So, we 21 contacted the Department for the Aging to discuss 2.2 this, and they had never thought about incarcerated 2.3 elders as part of their population, and immediately they saw how important that was, and with DFTA and 24 the Osborne Association, and RAPP and some other 25

groups, we set up the Aging Reentry Task Force, which 2 3 worked for about a year and a half to do a study of 4 the issues facing elders coming back into the community, and created a case management plan, which 5 is in the back of this book, which is part of what 6 7 Fernando was talking about, about the Elderly Reentry 8 Initiative is being practiced, and it is the only one or maybe there is one other there, but I'm not sure. I think it's the only one in the country that is 10 11 dealing with reentry needs of older people. That tells us that this task force is needed here. I-we 12 also have in our submission a report from the State 13 Comptroller, Thomas DiNapoli about the crisis 14 15 emerging in prison, which also talks about the need 16 for looking at release, more release mechanisms for 17 older people, and that means that we need more 18 reentry. I would also just point out when I got out of prison, because I was in prison during the height 19 20 of the AIDs epidemic, I did and Farid Mujahid, I had 21 Farid, my co-founder of RAPP. He did, too, AIDS 2.2 education and counseling in prison. We used to speak 2.3 for opioid inhibitors. It's before any of the good medication, and so when I came out I worked for about 24 12 years at Paz Magazine, a magazine for people with 25

HIV, and we studied the issue of people with HIV 2 3 getting out of prison, and how over the years 4 programs were developed to institute continuity of care and how those programs that were designed solely 5 for people with HIV then influenced how reentry was 6 7 done for other populations. And so we feel that the 8 1616 is so important because whatever we figure out among us, and it is people who've been there who have to be very much part of leading this process, will 10 11 then affect issues of homelessness for people who aren't formerly incarcerated and it will affect how 12 13 housing programs are set up for all kinds of vulnerable populations. So, we think that's really 14 15 important. I wanted to say something about-which I couldn't hear totally, but I think the Mayor's Office 16 17 was-was saying that they are doing all kind of 18 reentry work, and that this is not necessary, but I 19 think that I don't want to use the word ridiculous, 20 but I think that what we've heard, and what we will 21 hear from other people is that there is not-it's not 2.2 just that we could always do more. Like what's being 2.3 talked about with DFTA. So, it's that there is just not enough, and that it hasn't been modeled with the 24 25 expertise of the formerly incarcerated. So, RAPP

2 which is contacted all the time. We were a tiny 3 bunch of people, but were contacted from all over the 4 country and around the world because we're people who said this is a problem, and the solution is to let 5 people out and create good reentry, and the Mayor's 6 7 Office did not reach out to us. I don't know if they 8 reached out to any of the other groups doing this So, I just want to end by saying that this issue of elder reentry is one which we appreciate the 10 11 City Council getting behind. We do think that 12 there's one change that we need to make or a few, but the one I'm going to talk about to the-the 13 14 legislation as it's written is that I think there's 15 room, and it's mandated to have one formerly incarcerated person. We think there should be at 16 17 least three if not more, and that's partly because we 18 don't want to a token. We want-like when talk if we 19 talk about what it's like for you to get out of the 20 state and me to get out of the feds, we'll come up 21 with a different-we'll end up with something different than we started with. If we talk as a 2.2 2.3 woman and a man getting out, we'll talk about things that are-we'll end up with different answers than we 24 started out with. So we would urge that—that the 25

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City Council recognize that the expertise of the
people who have been there, not just because we have
the experience, but because we understand what the
problems are. We understand what the emotional
effect are because we've lived-not just because we've
lived through them, but because we've conquered tem,
and that's what this—what I think is so important
that 1616 is that we'll recognize that not only are
the people closest to the problem closest to the
solution, but that those of us who have survived this
and have overcome it have some really good ideas and
spirit to put into this problem that we have to
solve. So, thank you very much. [applause]

Thank you. Thank you so much for your testimony, and we will, you know, push for us on this legislation for all the things that you have testified. It's such a great need. I mean the—one question that I have I mean from the—the Mayor's Office of Criminal Justice, you know, their testimony that they have this strategy it involves the creation of the New York City Diversion and Reentry Council. Were any one of your organizations contacted for that? [pause]

James Royale from Brooklyn Defenders

- 2 Service and Theresa Montini from the Brookdale Center
- 3 on Hunter-in Hunter College. [pause] You may begin.
- 4 | Sarah, do you want to start? [pause]
- 5 ROSALIE CUTTING: Is this on? Oh, okay.
- 6 Good morning, Madam Chair and distinguished panel.
- 7 I'm sorry for the confusion. I must have filled out
- 8 | my form wrong. [laughs] It's nothing unusual. I'm a
- 9 formerly incarcerated woman who as you know-
- 10 CHAIRPERSON CHIN: [interposing] Can you
- 11 | identify yourself first, you name?
- 12 ROSALIE CUTTING: Oh, my name is Rosalie
- 13 | Cutting. I served 27 years in the State facility and
- 14 | I was released at the age of 70. I was released on a
- de novo hearing. I was representing by Morningside
- 16 | Heights Legal Services and two Columbia students
- 17 represented me and won the argument with the Supreme
- 18 | Court Justice who honored all the points, and it set
- 19 | a precedent for those that follow me. It was-I
- 20 really am passionate about the reintegration process
- 21 | for the formerly incarcerated and those to be
- 22 | release. I think one human right is to have a safe
- 23 appropriate place to lay one's head when one is
- 24 returned from prison into the community. It's not
- 25 asking a lot. It's nothing luxurious. It's just

2 that safe place. I'm responsible for the crime I 3 committed. I would never try to justify it and each 4 step I take I think about my victim and my victim's Those of us that have been incarcerated for family. a number of years, we have learned a lot about 6 ourselves and our potential, and we pick up the 7 8 responsibility and step forward and stand for the responsibility for what one has done. I made bad choices and that's how I ended up there. So, I'm not 10 11 blaming anyone but myself. I want to make that 12 perfectly. I think when-when I was release, when I 13 first got from the Parole Board after that special 14 dinner with a hearing, you know, almost three years 15 ago now, I was just elated that instead of being 16 denied parole, I was granted parole. So, in 17 preparation for that, all my-my plans for release 18 kind of fell apart, which is not unusual, but friends 19 of mine for almost four years stepped up to the plate 20 and welcomed me into their home. So, they were the 21 ones that welcomed me at the gate. Upon leaving the 2.2 facility I remember all the women cheering, and I 2.3 went-walked through the gates after 27 years with officer that had kind of done time with all of us, 24 and I remember turning around and hearing those 25

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voices and then looking down the hill at my friends picking me up blinking Oh, my gosh, what do I do now? Inside I could navigate. I developed programs with the college, mentored women who were searching for their own potential and searching for themselves who they are and where they are going. They're just and burned, and for the women, and I know for the men it's-it's totally different from us and our needs, but for women it was bonding with their families. work for the Family Reunion and DMV and the Puppy Program, and everything that was possible it positive inside me encouraged my sisters inside to move ahead because they had permission now to do it. While that seems a little bit strange, it is for women who have been beaten down most of their lives. That's not a justification in anyway as to why they were incarcerated, but they just felt that way because of choices they made and what they were faced with. during the time and then and-and being released after 27 years I ended up at Costco. That was overwhelming The technology, the web didn't come in until 1994 was my understanding and we have done computers inside and I worked on those computers. It was nothing what I was prepared for coming out.

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prices on milk when I went into the system was 98 cents a gallon, and coming out what is it, \$5 or \$6 a gallon. So, I was faced with handling money. I was also faced with housing, which is a big thing for those who were formerly incarcerated coming back into their communities because no one wanted to rent to me because of my past. Employment was the same way. We have block the box, but they can look, they can pull you up in a computer and while they won't state that that is the reason they will not hire you, you don't get employment. I was blessed with friends that step forward and I did volunteer work for an architect in Queens. So, I kind of started learning about all those necessities with the computer and locking the grid in New York City. I'm from upstate so I had to master the subway. I also-this sounds kind of crazy. After 27 years going into a public lavatory and—and panicking because there was nothing to flush the toilet, somebody screamed out "walk away". So, I walked away and kept walking like for 10 minutes because I couldn't believe it would flush itself, but those are part of the ridiculous things from some people, but for me it was a big thing and at 70 years old I was facing 71, and then-and then it was what am

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I going to do. I'm not-I'm tenacious so I thought well, you know, I'm-I'm not going to feel bad about all this. I'm going to stand back up like my dad always told me, who was a veteran. (sic) Get on your feet and move ahead. So, that's what I did. I went to Fortune Society. While there's many agencies out that are helpful, Fortune Society assisted me all the way to my employment at Black Veterans. I learned my computer skills. I picked it up, and Ms. Wendy McClinton, who was a former veteran herself and CEO of Black Veterans was a homeless person, totally understood those needs and gave me that second chance, and that's all we're asking for is second So, I totally stand behind the whole movement especially RAPP because they are positive force and I believe, I would hope anyway with the respect I have for our Mayor and the Council Members that they would step up and support the release of elderly people in prison to be released and for those formerly incarcerated the support they need when they are release because it was a real struggle without friends and family. I can't imagine being out all by myself at my age and being successful. It-it's justit's really difficult and I'm not saying feel sorry

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for me because that is not the way it is. I'm not a

victim and I'm a real strong woman who stood up, and

I'm standing up for the rights of those that are

still waiting to be released. Thank you so much for

allowing me to speak.

CHAIRPERSON CHIN: Thank you.

SOPHIA BANDELLI: Hello. My name is Sophia Bandelli. I work with the RAPP organization. I'm very pleased and proud to be involved with RAPP, which I think is high or near the leader of this movement. I'm also retired from Medgar Evers College, CUNY and my testimony references my 34 years of experience at Medgar Evers College where I served not only as a classroom instructor in the humanities, but also Director of the college's pioneering campus base Center for Women's Development. The center earned the reputation as a social justice organization promoting not only gender equity, but informally providing a space for peopled released for New York State prisons to visit or support and information. Because my loved one Evan Quinada (sp?) was and still is incarcerated, I have deep knowledge of incarceration issues as well as higher education. Thus, the returning formerly incarcerated found a

2 welcoming and knowledgeable person-persons in our 3 center. Four of these people who returned: Marvin 4 Calvin, Melvin Thompson, Chris Brunson and Freddy Sutton, each had been sentenced early in their lives. Each had done long bids over 20 years, each had 6 exemplary institutional records when they were 7 8 paroled to the community, the Brooklyn community. Each of these men had experienced health issues as they grew older in prison. Upon their release, the 10 substandard prison medical-medical care exacerbated 11 12 these illnesses. Each of these four men spent hours 13 in my office as we discussed life outside and their 14 options and the collateral consequences of 15 incarceration. Each of these four men died shortly 16 after release. Two had had housing problems 17 including stints in shelter. The others had not. 18 Research has estimated the years that prison adds to 19 one's chronological age. Thus, my friends were in the 20 older adult category, and because we live in a youth 21 focused society, the issues facing older persons are 2.2 usually marginalized. This is one reason 1616, the 2.3 Care Act is so very important. Just establishing this task force to examine issues related to post-24 incarceration sends a powerful message that this 25

## COMMITTEE ON AGING

2	cohort the marginalized within the marginalized
3	should be recognized. The absence of the older
4	formerly incarcerated individual on civic and
5	community based and city organizations is frankly
6	deplorable. How the lives of all citizens matter
7	when this group is so overlooked legislatively
8	including the community boards. Medgar Eves College
9	and RAPP hosted a symposium several months ago on
10	this issue. To Medgar's credit, the Administration
11	expressed interest in becoming more and involved
12	through research and direct action. Specifically the
13	nursing and social work departments are ready to
14	contribute to the work of that and the Care task
15	force when it's established. Medgar Evers has a
16	history of compassion and assistance with the
17	formerly incarcerated, and cleaning out my files I
18	found this record from March 1993. We had a forum on
19	the great Fanny Lou Hamer and at that time we
20	advertised for a community based coalition to discuss
21	criminal justice issues entitled Changing the
22	Criminal Justice System Through Community
23	Empowerment. The forum was held Saturday, April 3,
24	1993. I was a speaker along with the formerly
25	incarcerated brother Asala Gibson. That's almost a

quarter of a century ago. We are still-I mean just
to establish this task force is major and so we thank
you, Commissioner—Commissioner, you should be
Commissioner. We thank you Councilperson [laughs]
for your leadership as well as Dromm. So this is
the-my friends who are now ancestors: Freddy, Chris,
Melvin and Marvin, you know, they would applaud
today's events and they would talk about this is one
of the positive collateral consequences that here a
city agency is taking notice. More of the City
Council people should get on board with this, and
that is our job at RAPP to make sure that that
happens, but at least this is the beginning and to
have the task force dedicated to older returning
people from prison, is a really, really great leap
forward. Thank you very much.

CHAIRPERSON CHIN: Thank you. [applause]

JAMES ROYALL: You definitely deserve

some applause. Hello, hello, do you hear me? Good

afternoon. Thank you Sophia and that was very nice.

SOPHIA BANDELLI: Thanks for that.

JAMES ROYALL: Yes. Good afternoon. My name is James Royall and I'm Reentry Specialist BDS, Brooklyn Defender Services, and before I begin, I

just want to thank the City Council. I'd like to 2 3 thank Chairperson Chin and-and the Committee on 4 Aging, and I would like to particularly thank, although he stepped out, Council Member Dromm, the 5 bill's sponsor for giving me the opportunity to 6 7 testify on Intro No. 1616. At the Brooklyn Defender 8 Services, we strongly support the establishment of a task force for older adults. Those are investors returned to society and offers-and we also offer that 10 11 application to strengthen this task force and this 12 legislation. More than 10,000 people age 50 or older 13 are currently incarcerated in New York according to 14 the latest available data and excusably this number 15 is rising. Advocates are pushing and influencing 16 Governor Cuomo and Legislature to adopt reforms that 17 would allow for many incarcerated older adults who 18 have the lowest recidivism rates to be released. 19 by this proposed task force, New York City can be an 20 alley in the parole reform, with resources in place 21 to help individuals successfully return. Currently, 2.2 there's legislative programs that actually address 2.3 these problems, and services for older New Yorkers across the city and a growing network of financial 24 resources, but very little overlap between those two. 25

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One organization that truly gets it right we heard from today was the Fortune Society. We know the Osborne Association is on board with the new facility that they are establishing in Fulton, and however the—the issues and the providers is—is far more than what we know. We need more than just one or two providers to address this particular issue of older adults returning to our society as citizens. We at BDS we have four recommendations to strengthen this legislation, and one additional recommendation from the advanced—that's in advance, excuse me. We had one additional recommendation to offer in advance for the task force.

First the task force should remain in place for at least five years to be able to monitor the implementation of the recommendations that they made in its forthcoming report and hold policymakers accountable with additional progress reports.

Second, BDS believes that at least half of its members should have close personal experience with incarceration either through their own incarceration or that of a family member. The agency officials and academics sought to the task force in the current bill languish had a variety of valuable

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expertise and they should make-and make any and all data and information available to the task force as the bill requires for them to do so, but those who have lived through the challenges of reentry should be on the front lines of identifying the solutions We heard from a couple of individuals tonight that spoke that-that some-or many individuals that's older adults that's older 50 years old they have the tendency of educating themselves or rehabilitating themselves once they are incarcerated. Of course, the state prisons does have basic programs for rehabilitation, but that's what they are. They are basic. Beyond that, the first two or three years of incarceration those programs are no longer available to older adults, everybody that has basically resolved that issue. There's more rehabilitation to be done, and most people do it themselves. These are the individuals, though, that have the ability to help with the recidivism rate. These are the-these are the individuals that have the ability to help with the-with the juvenile and the youth and the recidivism rate that is so high among that group.

Such—the third, the third recommendation

that we would have to attach was to also include at

least one provider of affordable housing and one 2 3 provider by-provider of supportive housing. 4 clients' experiences affirm the reality that stable housing is the key to successful reentry. Yet, 58% 5 of older adults, which is about 1,600 of them were 6 7 homeless upon release and really 1,200 went directly to a homeless shelter, and as we heard from releasing 8 aging people in prison, those statistics came from They have done the research. Such unstable 10 11 housing can disrupt medication, the therapy resumes 12 and hearings. It would impose additional unnecessary restrictions like curfews and add to the overall 13 14 volatility and stress of being poor in New York City 15 and subject to widespread discrimination in 16 employment and in elsewhere. Lastly, the bill should 17 be-should require that the task force is flirting 18 unique challenges of reentry for people because they 19 get a sex offense especially older adults, and made 20 recommendations to the state regarding the movement 21 and residency restrictions for this population. 2.2 While there are substantial political challenges 2.3 associated with the system, this population with reentry public safety, reforms and fairness demands 24 be consideration of years of policy that ultimately 25

is no linked with positive outcomes or increased 2 3 public safety. The restrictions should include the 4 seller and the server generally prohibits—the restriction included in the Section Reform Act (SIRA) 5 and Essentially Funded Restoration Act generally 6 7 prohibits defendants from knowingly answering any areas within a thousand feet of schools or facilities 8 primarily used by people under the age of 18. In short, they do nothing to prevent sex offenses from 10 11 occurring and, in fact, it can increase risk of reoffending by preventing effective individuals from 12 13 obtaining stable housing, employment access and 14 treatment and even Mandatory Parole Office 15 appointments. This has a direct impact on New York 16 City government, which is required by court order to 17 provide shelter and often fail to do so while 18 complying with these restrictions. Likewise, the 19 state prison system requires a home address to 20 release an individual to parole, but often fails to 21 identify a viable and compliant one. The shocking 2.2 thing, though, is that people in state prisons are 2.3 sometimes held beyond the end of their sentence until a solid (sic) compliance residence is found. BDS has 24 25 successfully litigated to remove some sort of

2 restrictions for -- [background comments]. 3 excuse me. New York City-so, the shocking thing, 4 though, is that people in state prisons are sometimes 5 held beyond their sentence until solid (sic) compliance residence is found. BDS has successfully 6 7 litigated—has successfully litigated to remove these sort of restrictions for one client, but broader 8 reform is still urgently needed. Reentry is not about the crime of prediction, which is the one thing that 10 11 cannot be changed, but rather the rehabilitation and 12 reintegration are the individual. Reentry is a 13 process of leaving the correctional facility, and the 14 state locale of custody and return to society. Once 15 this task force has been established, BDS will have 16 additional recommendations for members. One area in 17 need of urgent reform that we will highlight and that is critical to our clients and their families is 18 19 prison visiting. Maintaining tight support networks 20 while incarcerated can be both very difficult and 21 extremely beneficial for people on both sides of the 2.2 prison walls. The biggest challenge to maintaining 2.3 these that much is a direct result of choices made by policymakers. They need the placement of prisons in 24 25 the region of the state [pause]. New York State used

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to mitigate this problem by offering free visiting buses to families and they should be installed as soon as possible. Legislation to do just that is pending in Albany and the Council should—owes Governor Cuomo legislation to include it in the State Budget this coming session. Substantial resource has shown that the system visitation is one of the primary drivers of rehabilitation and protection against recidivism. It is well worth the investment. So, I thank you for considering comments. I look forward to working with the Council to support the creating of this task force and to ensure that it is effective. Thank you.

CHAIRPERSON CHIN: Thank you very much for your testimony, your personal experience and your support for this legislation in terms of setting up this task force. We will look forward to continue to work with you to make sure this happens because right now we heard from the Administration. The support is not there yet, but by working together and navigating together and working together with the bill's sponsor Council Member Dromm he will—will make sure that he gets all the information from the testimony today because he's chairing the—the committee hearing next

1 COMMITTEE ON AGING 129 door, and we will work with you to make sure that the 2 3 legislation is past, and thank you so much for your recommendations and that's the negotiation, you know, 4 5 process that will go on within legislation. SOPHIA BANDELLI: Thank you. 6 7 CHAIRPERSON CHIN: And thank you for 8 being here today. 9 SOPHIA BANDELLI: Thank you so much. JAMES ROYALL: Oh, you're welcome. 10 11 CHAIRPERSON CHIN: Is there anyone else 12 that would like to testify that had not filled out a 13 form. No. Well, once again I want to thank everyone who testified today, and we look forward to working 14 15 with you to get all this legislation passed. 16 SOPHIA BANDELLI: Thank you. 17 CHAIRPERSON CHIN: Thank you. [background comments] [gavel] The hearing is 18 19 adjourned. 20 21 22

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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 September 28, 2017