

CITY COUNCIL
CITY OF NEW YORK

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TRANSCRIPT OF THE MINUTES

of the

COMMITTEE ON VETERANS
JOINTLY WITH THE
COMMITTEE ON AGING

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April 20, 2021
Start: 11:08 a.m.
Recess: 1:33 p.m.

HELD AT: Remote Hearing, Virtual Room 3

B E F O R E: Chaim M. Deutsch
Chairperson
Committee on Veterans

Margaret S. Chin
Committee on Aging

COUNCIL MEMBERS: Chaim M. Deutsch
Alicka Ampry-Samuel
Mathieu Eugene
Alan N. Maisel
Paul Vallone

Margaret S. Chin
Diana Ayala
Selvena N. Brooks-Powers
Chaim Deutsch
Ruben Diaz, Sr.
Mathieu Eugene
Mark Treyger
Paul Vallone

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

Ashton Stewart

Joe Vitti

Peter Kempner

Coco Culhane

Aumari Espinal
Senior Engagement Coordinator
Department of Veterans Services

Luella Byers
Assistant Commissioner
Bureau of Community Services
Department for the Aging

Vincent Garcia
Director, Intergovernmental and External
Affairs
Department of Veterans Services

Leo Asen

Ruth Stein

Ryan Foley

Margaret Gambaro

Steve Palmer

@

2 SERGEANT AT ARMS: Recording to the
3 computer all set.

4 SERGEANT AT ARMS: Recording to the cloud
5 all set.

6 SERGEANT AT ARMS: Backup is rolling.

7 SERGEANT AT ARMS: Thank you. Good
8 morning, and welcome to the New York City Council
9 remote hearing on Veterans jointly with the Committee
10 on Aging. At this time would all panelists please
11 turn on your videos. Thank you. To minimize
12 disruption, please place all electronic devices to
13 vibrate or silent mode. If you wish to submit
14 testimony you may do so at testimony@council.nyc.gov.
15 I repeat, testimony@council.nyc.gov. Chairs, we are
16 ready to begin.

17 CHAIRPERSON DEUTSCH: Thank you. Buenos
18 dias, everyone. My name is Council Member Chaim
19 Deutsch, chair of the Committee on Veterans, and I'd
20 like to welcome everyone to today's virtual join
21 hearing on supporting the city's aging veterans, held
22 by the New York City Council's Committee on Veterans
23 and the Committee on Aging. I would like to
24 acknowledge my colleague, Council Member Margaret
25 Chin, the chair of the New York City Council's

3 Committee on Aging. I would also like to thank the
4 Department of Veterans Services as well as the
5 Department for the Aging for attending today's
6 hearing. It has been a trying time as the city
7 reckons with and works to recover from the COVID-19
8 pandemic. Aside from the deaths and illness caused
9 by COVID-19, this past year has led to economic
10 hardship and isolation for many as we collectively
11 struggle with the global public health crisis, the
12 likes of which has not been observed in any of our
13 lifetimes. While much remains that we did not know
14 about the virus, we do know that COVID-19
15 disproportionately affects older individuals and
16 that's, that veteran experience higher rates of
17 social, physical, mental, and health ailments. As
18 such, veterans and particularly aging veterans are a
19 demographic that will likely need additional support
20 and services. Since the majority of the city's
21 estimated 200,000 veterans are seniors or are nearing
22 senior age, this hearing has been convened in order
23 to specifically consider and analyze the unique needs
24 and characteristics of the city's aging veterans. In
25 particular, the committee, the committee's hope to
learn more about the city's suite of services targeted

3 towards older veterans, how older veterans can and do
4 receive assistance from city agencies when they need
5 it. The extent of collaboration between the
6 Department for Veterans Services and Department for
7 Aging identify any gaps in services needed for this
8 demographic. As more of these programs are moved
9 online, we want to ensure that older veterans have
10 proper and adequate access to the benefits that are
11 owed and do not face unnecessary obstacles in
12 receiving these benefits. There are also specific
13 issues, ah, issue areas affecting older veterans that
14 the committee wants to discuss and hear about today.
15 Research shows that housing affordability and
16 homelessness continue to be an acute concern for
17 aging veterans, as more than half of the veterans
18 living in New York City's homeless shelters are older
19 adults. Older military veterans also have a high
20 level of need in relationship to physical and mental
21 well-being and increased isolation brought on by the
22 pandemic is likely to exacerbate these issues.
23 Finally, we want to learn from DVS and DFTA as well
24 as members of the public who have signed up to
25 testify any other outstanding issues that remain and
are not being fully addressed in regards to the aging

3 veterans population here in New York City. To that
4 end, today we'll be hearing Intro 1616-2019,
5 sponsored by Council Member Paul Vallone. Intro 1616
6 would add additional requirements to DVS annual's
7 report about the number of seniors DVS serves, and as
8 well as the number of increase received by DVS from
9 veterans regarding specific programs. So I would
10 also, I would like to acknowledge and welcome my
11 colleagues, ah, who have joined us here, and I'd like
12 to acknowledge, um, Alicka Ampry-Samuel, whose
13 husband is a veteran, Council Member Ruben Diaz,
14 Council Member Diana Ayala, Council Member Mathieu
15 Eugene, Council Member Alan Maisel. Um, I'm not sure
16 if I missed anyone. Let me take a look. Ah, I think
17 I got everyone. And, ah, I'd also like to thank my
18 staff, Joe Bello, my director of veterans affairs,
19 and I'd also like to thank, ah, central staff who
20 helped prepare for this hearing, Nuzat, ah, Bianca,
21 Kalima, and Thomas. And finally I would, ah,
22 especially like to thank the Committee on Aging,
23 Chair Margaret Chin, and all of her staff for
24 collaborating and working with us to prepared this
25 hearing today. Um, we're going to be hearing
testimony first from, um, some of the CBOs, um, in

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2 regards to, ah, what challenges they have regarding,
3 ah, our, um, aging veteran community, ah, before we
4 hear from our, ah, administration. So, um, I'd like
5 to ask the council to, ah, administer the oath.

6 COMMITTEE COUNSEL: Hi, good afternoon,
7 everyone. Thank you. My name is Bianca Vitale,
8 counsel to [inaudible].

9 CHAIRPERSON CHIN: Oh.

10 CHAIRPERSON DEUTSCH: Yeah, um...

11 CHAIRPERSON CHIN: Good morning, should
12 I...

13 CHAIRPERSON DEUTSCH: Yeah, um, I'm
14 sorry. Counsel?

15 COMMITTEE COUNSEL: Yes, I [inaudible].
16 I think we a little bit off script here.

17 COMMITTEE COUNSEL: Yes, yes.

18 COMMITTEE COUNSEL: I think that, um...

19 CHAIRPERSON DEUTSCH: This was, I was
20 just testing you out.

21 COMMITTEE COUNSEL: Chair Chin is gonna
22 give some opening remarks.

23 CHAIRPERSON DEUTSCH: Yeah, so, I'm
24 [laughs].

25

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2 COMMITTEE COUNSEL: No worries. I was
3 like, ah, OK, we'll jump right into it. I didn't
4 realize...

5 CHAIRPERSON DEUTSCH: [laughs] Testing
6 you out, just testing you out.

7 COMMITTEE COUNSEL: Yeah, you can turn it
8 over to Chair Chin for her opening remarks.

9 CHAIRPERSON DEUTSCH: [inaudible]. One
10 second, can I introduce my colleague?

11 COMMITTEE COUNSEL: Oh, sure. Go ahead.

12 CHAIRPERSON DEUTSCH: OK. We're not
13 gonna administer to oath to you, ah, Margaret.

14 CHAIRPERSON CHIN: [laughs]

15 COMMITTEE COUNSEL: Yes.

16 CHAIRPERSON DEUTSCH: So I, I would like
17 introduce my colleague, very vocal in, in, ah, in the
18 City Council, and please don't overshadow me, um,
19 this is a very relaxed hearing, ah, no controversy,
20 you know, so without further ado I'd like to
21 introduce my colleague, Council Member Margaret Chin.

22 CHAIRPERSON DEUTSCH: Good morning, Chair
23 Deutsch. Look, when we have the Aging Committee it's
24 always very lively, but cordial, right?

25 CHAIRPERSON DEUTSCH: Always, always.

3 CHAIRPERSON CHIN: Good morning. I'm
4 Council Member Margaret Chin, chair of the Committee
5 on Aging, and I would like to welcome you to today's
6 joint oversight hearing supporting New York City's
7 aging veteran population. I'd like to thank Chair
8 Deutsch for cochairing this important hearing with
9 me. During today's hearing we will be discussing a
10 population within our Aging Committee that does not
11 get talked about enough - senior veterans. According
12 to the Department of Veterans Services, DVS, there
13 are over 150,000 veterans living in New York City,
14 and of those veterans about one-third served in the
15 Vietnam War. About 17% served between 1990 and 2001.
16 This means that about 72% of the city's veterans are
17 age 55 or older. This is not an insignificant
18 population. Just as all of our seniors have unique
19 needs, senior veterans have, also have unique
20 challenges related to their experience as veterans.
21 This population tend to experience higher rate of
22 social, physical, mental, and health ailments.
23 Because of their service and experience, for example
24 seniors veterans often suffer from post-traumatic
25 stress disorder. The older these veterans get the
more likely is for their PTSD to reemerge. Often

3 this is because they have retired and no longer have
4 distractions to occupy their time, or because they
5 have more medical problem, um, the older they get,
6 which trigger their PTSD. Senior veterans also tend
7 to have higher rates of disability due to injuries
8 from services, from their service. Perhaps because
9 of all this senior veterans have lower workforce
10 participation rates and often they live on very
11 limited means, relying on Social Security and
12 Medicare. In fact, over half of the veterans living
13 in homeless shelters are older adults. This is a
14 population that needs special attention, but rarely
15 gets any. In fact, it does not seem the city even
16 serves this population specifically. Adult, although
17 DVS and DFTA have plenty of program to serve all
18 veterans and all seniors, it is not clear whether
19 they have any programming, resources, or initiative
20 that specifically look at senior veterans. It is
21 also not clear what data the agency collect on senior
22 veterans and their needs, or how the agency work
23 together to serve them. At this hearing we want to
24 hear from our senior veterans and senior veterans
25 organization. We want to know what challenges senior
veterans are facing. What has been their unique

3 needs during this pandemic? What services have they
4 been using and what services have been unhelpful to
5 them during this time? And from DVS and DFTA we want
6 more information. We want to know how you are
7 serving older veterans, what programs and resources
8 you are offering them, and how your agencies
9 communicate and are working together to make sure no
10 senior veterans falls through the cracks. I'd like
11 to thank the committee staff for their help in
12 putting together this hearing, our counsel, Nusat
13 Tadori, policy analyst Kalima Johnson, finance
14 analyst Daniel Hu, finance unit head Johina Sabora,
15 and my director of legislation, ah, Conor Irvin. And
16 I'd like to thank the other members of the committee
17 for joining us today. Ah, now I will turn it back to
18 Chair Deutsch. Thank you.

19 CHAIRPERSON DEUTSCH: Thank you, thank
20 you, Margaret. Very well said. Ah, I will now ask
21 our committee counsel, Bianca Vitale, to go over some
22 procedural items.

23 COMMITTEE COUNSEL: Perfect, you did
24 great. Hi, everyone. Um, thank you. My name is
25 Bianca Vitale and I am counsel to the Committee on
Veterans for the New York City Council. Before we

3 begin I want to remind everyone that you will be on
4 mute until you are called on to testify, when you
5 will be unmuted by the host. I will be calling on
6 panelists to testify. Please listen for your name to
7 be called. I will be periodically announcing who the
8 next panelist will be. For everyone testifying today
9 please note that there may be a few seconds of delay
10 before you are unmuted, and we thank you for your
11 patience. All hearing participants should submit
12 written testimony to testimony@council.nyc.gov. At
13 today's hearing the first panel will be
14 representatives from local veterans organizations,
15 followed by council member, um, questions. Then,
16 after the first panel, we hear from the
17 administrative, um, administration's representatives,
18 followed by council member questions, and then the
19 remaining panelists, um, will give some testimony.
20 During the hearing if council members would like to
21 ask a question please use the Zoom raise hand
22 function and I call on you in the order in which you
23 have raised your hands. I will now call on the first
24 panel. Testimony will be proved by Ashton Stewart,
25 Joe Vitti, Peter Kempner, Coco Culhane. I would like
to now welcome Ashton Stewart to testify. After Mr.

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2 Stewart, I will be calling on Joe Vitti, Peter
3 Kempner, and then Coco Culhane to testify. Ashton
4 Stewart?

5 ASHTON STEWART: Good morning. Thank you
6 so much, um, for having this hearing today and for
7 inviting SAGE and SAGEVets to participate. Um, Chair
8 Deutsch, happy belated birthday to you, sir.

9 CHAIRPERSON DEUTSCH: Thank you.

10 ASHTON STEWART: Um, and, ah, very nice
11 to meet you, Chair Chin.

12 CHAIRPERSON DEUTSCH: Just don't give out
13 my age, thank you.

14 ASHTON STEWART: Um, definitely we won't,
15 we'll respect that. Um, SAGEVets is a New York State
16 program, um, for older LGBT veterans and that started
17 in 2014 and I've been the program manager since May
18 of 2018. We're profoundly grateful for the support
19 from the City Council, um, and, ah, the Committee on
20 Veterans, ah, for helping us raise our, ah, profile
21 here and get a little bit more work done. Um,
22 speaking of access issues, I just want to start off
23 with a top issue that's a federal issue, the
24 Nationals Records Center, ah, where we get all of
25 the, ah, personnel files, um, from the Military

3 Members Service. It's been closed since March 2020.

4 The only thing that they're providing are DD214S,

5 which most often we don't need. We need the

6 resources to show, um, ah, history of disability

7 compensation claims, um, everything, um, you name it.

8 The only thing that we've been able to do is, ah,

9 help our veterans who already have a lot this

10 information already. So that is priority number one.

11 I know the New York State Division of Federal

12 Services has made it their federal priority as well.

13 Hopefully that will change soon. But in the meantime

14 we've been keeping ourselves very active and very

15 busy. Um, the access to these, ah, benefits is a

16 problem, but New York State is taking the leadership

17 in recognizing the fact that a lot of older LGBT

18 veterans served during the time when it was pre-

19 don't ask don't tell, when they still had anti LGBT

20 policies. A lot of them were discharged with OTH

21 discharges and that itself is a barrier to services

22 and access to, um, military benefits. So, um, the

23 Restoration of Honor Act, ah, was signed by the

24 governor, Governor Cuomo, last November. We were

25 involved with some, ah, some of that buildup. Um, we

worked with Senator, um, excuse, ah, Senator Brad

3 Hoylman, who was the original bill sponsor and
4 Assembly Member Didi Barrett to help some language,
5 because a lot of these veterans who were discharged
6 for their sexual orientation it was secondary issue
7 of why they were discharged. So we helped encourage
8 the legislature to include PTSD, TBI, and MST, along
9 with sexual orientation and gender identity in this
10 legislation. It's huge. This bill is getting so
11 much traction. New York State is serving as a model
12 for other states. Ah, I can tell you Colorado is
13 about to sign a similar bill. California modeled
14 their legislation after our legislation, which is in
15 committee at the moment, BB-325. Illinois State
16 reached out to us through Didi Barrett's office,
17 asking for more information about crafting similar
18 legislation. New Jersey has a bill. And I know this
19 because I am part of the Delaware Valley Veterans'
20 Consortium and I'm always talking about the
21 Restoration of Honor Act and how it's making
22 significant change and improvement to people's lives.
23 We had our first, ah, meritorious application, ah,
24 last year with Louis Miller, who not only has access
25 to New York State veteran benefits now, but he also
has validation for the discharge for being gay was

3 wrong. They, the State of New York has acknowledged
4 that, um, and we're trying to get him help, ah, to
5 get that discharged changed at the federal level.
6 All of this is a culmination to put pressure on the
7 federal government to make the change at that level,
8 which would take care of all of this nonsense, um,
9 and there is a bill that put together by Gillibrand
10 and Schatz called Restoration of Honor to Service
11 Members Act. So all of this work hopefully will
12 result in something positive in the near future. Um,
13 and we're also uncovering situations that a lot of
14 providers aren't aware for older LGBT veterans. Ah,
15 one such experience was a veteran who was being
16 discharged for being gay with an honorable discharge,
17 um, was five months shy of meeting the two-year
18 requirement for access the health care after the end
19 of his service. Um, and he because he was kicked out
20 for being gay we're working some providers who tried
21 to change the policy of the V.A. for cases such as
22 his. Um, he would benefit significantly from getting
23 some healthcare at the veterans' establishments, like
24 the V.A., who understand the veteran experience, and
25 we have not been able to help with that so far
because of the, this two-year requirement. Um, and

3 we couldn't do this without the support of the
4 council, um, so I just want to thank you so much. I
5 can go on and on about the Restoration of Honor Act.
6 I think you get the idea. But I'd be happy to add
7 context or answer questions [inaudible]. I submitted
8 my testimony. Thank you so much.

9 CHAIRPERSON DEUTSCH: Thank you, Ashton.
10 I'd like to hear more, so maybe you'll come over to
11 my house for a barbeque one night.

12 ADAM STEWART: OK, I would love to. I'd
13 be honored.

14 COMMITTEE COUNSEL: Next I would like to
15 call up, thank you so much, um, Mr. Stewart. Ah, I
16 would like to call on Joe Vitti, and we'll definitely
17 have a period for, um, questions and answers. So
18 after this first panel, um, the chairs will
19 definitely have, um, a period of questions to ask.
20 That would be great. Joe Vitti, you're up next.

21 JOE VITTI: Sorry. Ah, good morning
22 Chair Deutsch, Chair Chin, and members of the New
23 York City Council Committee on Veterans and Committee
24 on Aging. My name is Joe Vitti. I'm the director of
25 the Visiting Nurse Service of New York's Veterans'
Program. I'm also a post 9/11 veteran who served in

3 the US Army as a military intelligence officer. Um,
4 I want to thank you for the opportunity to testify
5 about the hospice and home care services that the
6 Visiting Nurse Service of New York provides to our
7 aging veteran population. As the nation's largest
8 not-for-profit home- and community-based care
9 organization in the US for approximately 40,000
10 clients and patients, VSNY has always been there for
11 New York throughout its many of its biggest public
12 health and natural emergencies, including COVID-19.
13 Since March of 2020 VSNY has cared for more than 6000
14 COVID-positive New Yorkers throughout the five
15 boroughs. There are approximately 140,000 veterans
16 in New York City today, 71% of whom are older than 55
17 years old. Due to the health complexities of vets
18 and the complexities of the V.A. healthcare system
19 and the systemic poor health literacy among veterans,
20 many veterans never full access or utilize the
21 benefits that they need. As New York City's
22 veterans' population continues to age, it is becoming
23 even more important to make these services available
24 as well as provide community outreach so that they
25 know about their full V.A. benefits and community
health organizations within their, within their own

3 communities and neighborhoods. VSNY is, is the, VSNY
4 hospice is the largest home care and hospice provider
5 to veterans in New York State. Our hospice veterans'
6 program is a level 5 that it was awarded by the, ah,
7 Federal V.A. Health Administration and the National
8 Hospice and Palliative Care Organization as being a
9 leader that empowers hospice providers and
10 professionals to meet the unique needs of veterans
11 during end-of-life care, and our veterans' home
12 healthcare program tailors our high-quality home care
13 needs to the particular attention of veterans.
14 Together, our two departments in hospice and home
15 care have provided, have provided care in the
16 comforts in their own homes to 1580 veterans in 2020
17 alone. Ah, in our testimony we have our statistics
18 broken down by war era and their, and their
19 locations, ah, per boroughs, so please refer to that.
20 Um, on, on average our veterans, ah, our veterans
21 have, have eight to 10 chronic and terminal
22 conditions in contrast with our general patient
23 population that has three to four. Veterans' top
24 three conditions in hospice are heart failure, COPD,
25 and cancer. In our home care it's surgical
recoveries, medication managements, and cancer as

3 well. Both programs provide veterans and their
4 families with, with a skilled veteran liaison who
5 assist them with accessing the many benefits and
6 services available. Our staff, our staff is diverse
7 in ethnicity, gender, type of military service, which
8 helps us bring culturally competent care when
9 addressing veterans' issues. We've continued to
10 provide this care through COVID-19, both in person
11 and through telehealth outreach, and have conducted
12 virtual events in order to engage with community
13 organization and veteran service organizations
14 throughout. We also work with NYC Department of
15 Veterans Services and social service programs to
16 coordinate additional care benefits, such as Meals on
17 Wheels types of services. We welcome these
18 opportunities to grow and collaborate with DVS. Um,
19 in a recent example of how we assist our veterans,
20 ah, we, we recently had the privilege of a veteran
21 who had been diagnosed with terminal cancer. He and
22 his wife had no family or friend support and, and the
23 wife was, ah, needed help taking care of him that our
24 home care could no longer address due to the
25 complexity and the advanced, and how advanced his
cancer was. Ah, so due to his, the kind of health,

3 we connected him to the V.A. healthcare system, which
4 assigned him to a primary care physician and gave him
5 additional personal care hours through the V.A. home-
6 based primary care program, um, and we also helped
7 him secure copies of his discharge papers and correct
8 his social security number that he had forged when he
9 was younger in order to enlist earlier. Ah, he was
10 then admitted to our hospice program, where he and
11 his wife received ongoing compassionate support from
12 our expert hospice team, and he passed away
13 peacefully, ah, he passed away peacefully this past
14 February in the comfort of his own home. His wife,
15 if you refer to our testimony, ah, wrote a very
16 thankful and grateful letter to us, to us as well.
17 So VSNY's veterans program's mission is to improve
18 the lives of veterans with unmet healthcare need.
19 Ah, without access to needed support veterans are at
20 a greater risk for poor health outcomes. This
21 important initiative has allowed us to engage
22 veterans in discussions about their health goals
23 while providing support, guidance, and linkage to
24 appropriate services, benefits, and entitlements. I
25 want to thank you all today for this opportunity to

3 testify, and I'm available to address any further
4 questions. Thank you so much.

5 COMMITTEE COUNSEL: Thank you so much,
6 Mr. Vitti. I'm now gonna call on Peter Kempner to
7 give testimony.

8 CHAIRPERSON DEUTSCH: Yeah, I would like
9 to, um, should we, should we go to, ah, Council
10 Member Vallone, just to give his, ah?

11 COMMITTEE COUNSEL: Oh, yes, so sorry. I
12 don't, um, I'm not sure that Council Member Vallone
13 was going to give opening remarks, I mean, um,
14 remarks, or is he? Give me one second, Chair. I'm
15 sorry. I didn't, um, we didn't account for him
16 giving remarks about the legislation. Hold on one
17 second. Chair, can we just, ah, finish this first
18 panel...

19 CHAIRPERSON DEUTSCH: Yeah, sure.

20 COMMITTEE COUNSEL: ...because I
21 [inaudible]. Let's just finish up...

22 CHAIRPERSON DEUTSCH: Let's keep going,
23 all right.

24 COMMITTEE COUNSEL: ...the testimony of
25 the first panel and then, um, if we have to stop
questions and answers to, you know, to turn it over

3 to Council Member Vallone then we'll pivot. But
4 let's just, ah, Peter Kempner. You may begin.

5 PETER KEMPNER: Thank you, Council. Good
6 morning. My name is Peter Kempner and I'm the legal
7 director of the Volunteers of Legal Service, also
8 known as a VOLS, where I supervise our veteran's
9 initiative, ah, which is part of our elderly project.
10 Ah, thank you, Chair Chin and Chair Deutsch, for
11 holding this hearing, ah, that takes exactly in the
12 intersection of, of the populations that we serve in
13 our veteran's initiative. Ah, prior to, ah, the
14 COVID-19 outbreak we were able to see clients in
15 person at the Manhattan V.A. Hospital, but
16 unfortunately that's not long an option for us, and
17 so we have moved our services online and over the
18 phone to be able to serve elderly veterans in New
19 York City. And the core of the work that we do at
20 the veteran's initiative is to draft, ah, and execute
21 life planning documents, ah, for older veterans,
22 which includes last wills and testaments, powers of
23 attorney, healthcare proxies, living wills, and other
24 advanced records. As we all know, the COVID-19
25 crisis has truly ravaged our veteran community. Ah,
in January 2021 it was determined that more veterans

3 had died from COVID-19 than in both the Iraq and
4 Afghanistan conflicts combined. Ah, and, and, in
5 looking at who passed away from COVID-19 amongst the
6 veteran population it was shown that more than half
7 of those, ah, who had passed away were age 50 and
8 over. Um, and so truly the senior veterans are at
9 most, are at the most risk. And though locally we've
10 also seen the devastating impact of, of the pandemic
11 on our seniors, um, who have suffered 80% of COVID-
12 related deaths in New York City. And in our minds,
13 ah, this crisis has only reinforced the urgency and
14 the importance of planning for disability and for end
15 of life. Sadly, too few seniors have properly
16 planned for the future and we know that the New York
17 City veteran community is a graying one. Ah, these
18 veterans need, ah, to be able to plan so they're able
19 to age in the community with dignity and with
20 respect. Sadly, um, studies have shown that
21 veterans, like the population at large, have not
22 engaged in proper life planning. Ah, for example, a
23 2015 study showed that more than half of veterans
24 lacked advanced directives, and a 2017 study showed
25 that of, of 2500 veterans being treated for cancer,
81% don't have any advanced directives in place. And

3 we know that also in the New York City veteran
4 community, ah, are disproportionately people of
5 color. And, and, and it has also been shown that
6 people of color are less likely to engage in advanced
7 care planning. Many of the low-income, older
8 veterans that we serve think that they don't need to
9 have advanced directives in place, ah, because they
10 don't have the resources or the wealth to pass on to
11 the next generation. And frankly, they're wrong
12 about this. By engaging with effective life
13 planning, elderly and disabled veterans are more
14 likely to stay in their homes, ah, where they could
15 age in place with dignity and, and respect. For
16 example, a veteran who has executed a power of
17 attorney empowers their agent to be able to seek
18 government benefits, to pay for housing costs, ah, to
19 sign renewal leases, to apply for and recertify for
20 housing subsidies, and to deal with any issues that
21 might arise with their landlord or with their housing
22 provider. Landlords and market forces, as we know,
23 are increasingly pushing long-term tenants from their
24 housing, and so taking any action to stabilize
25 housing for veterans is more urgent than ever.
Healthcare proxies allow caregivers to make critical,

3 ah, medical decisions and seek appropriate care for
4 the veterans who entrusted them with this agency, and
5 without these tools in place older veterans might
6 find themselves in a nursing home, which in New York
7 City costs an average of \$150,000 per year. Veterans
8 on Medicaid and Medicare who live in their homes will
9 save taxpayers approximately \$1600 per month.

10 Effective life planning can also enable, ah, or also
11 keep disabled at home, elderly veterans from falling
12 into guardianship and other government investment.

13 Veterans should be given the opportunity to choose
14 someone they trust to handle their affairs and
15 guardianships also could be very costly to public
16 coffers due to legal fees, court examiners, and the
17 investments of adult protective services. Our hope
18 is that the oversight being conducted today by your
19 two committees, the reporting requirements that are
20 outlined in Intro 1616 will bring to light many of
21 the issues that older veterans in New York City face,
22 who operation between DVS and DFTA is one key to
23 meeting the need of older veterans, and we applaud
24 the recognition of this intersectionality that is
25 embodied in holding this joint hearing today. Thank

3 you for allowing us to submit this testimony and
4 supporting the needs for older veterans.

5 COMMITTEE COUNSEL: Thank you so much,
6 Mr. Kempner. Um, actually right now we're gonna turn
7 it over to Council Member Vallone to give some
8 remarks on Intro 1616 of 2018. And then we will
9 finish our panel and open it up for, ah, questions
10 and answer period. So we're gonna turn it over to
11 Council Member Vallone.

12 COUNCIL MEMBER VALLONE: There we go.
13 Thank you so much. Good morning, everyone. Ah, and
14 to the panel's it's a, now your words, honestly as
15 council members when we hear support, advice,
16 counsel, sage counsel such as yours, and then that
17 becomes the bill that we're talking about and it
18 grows with us, it makes everything that we've worked
19 on over the last eight years worth it. So Peter,
20 thank you for the and bringing up the important issue
21 about guardianships, because I might be one of the
22 only attorneys in the world that actually handle
23 guardianships in a past life and the difficulties
24 that anyone, especially our seniors and our veterans,
25 would have to navigate, um, is, is tremendous that
you brought it up. Ah, what I'd like to do is just

3 with this quick moment thank our great chairs Chin
4 and Deutsch. Um, Margaret and Chaim have, have been
5 stalwart leaders and have been an honor to work with
6 them from day one, especially bringing, ah, the bill
7 1610 for, for today, which, quickly, I would just
8 want to say, requires the Department of Veterans
9 Services to include in its annual report data about
10 the number of senior veterans DVS services, as well
11 as the number of increase received by DVS from
12 veterans regarding social service programs, such as
13 the SNAP and the New York State Veteran Property Tax
14 Exemption, affordability housing programs, such as
15 those run through the New York City Housing Authority
16 and the New York Department of Housing Preservation
17 and Development. Um, these data-driven bills, um,
18 even at the last hearing, when we asked some of the
19 most critical questions are, are still things that
20 are missing, ah, and as DVS has grown, we're excited
21 to see it grow, but these are key components that not
22 the groups that I hear today, but every veteran
23 deserve to know the numbers, and that's why this bill
24 is so important, especially with this pandemic, ah,
25 not only has it been tough of the city, but no
community has been hit harder than our seniors. So

3 today we look even further, not only to our seniors,
4 but those who have served this country and are now
5 looking to us for support and services. This is why
6 I drafted 1616 and this is a step ensuring we have a
7 clear understanding of the number of senior veterans
8 who are utilizing the available benefits and programs
9 the city has to offer, as well as reviewing, like
10 Peter and everyone [inaudible] our outreach efforts
11 so that no veteran is left behind. The timing
12 couldn't be more critical. So I want to thank
13 Speaker Johnson, Chairs Chin and Deutsch for allowing
14 the bill to be heard, and allowing me to, to jump in
15 at this moment. So God bless every one of you and
16 thank you.

17 COMMITTEE COUNSEL: Thank you so much,
18 Council Member Vallone. I'm now going turn it over
19 to our last panelist on the first panel, ah, Coco
20 Culhane.

21 COCO CULHANE: Thank you. Um, thank you
22 to Chair Deutsch and Chair Chin for the opportunity
23 to speak today. Um, I've submitted about 10 pages
24 of, ah, testimony that has all kinds of facts and
25 recommendations in terms of, um, what I think we need
to be doing. But I just wanted to highlight a few

3 things, basically that we're not doing anything, um,
4 sort of a city. Citywide there are no, ah, programs
5 that work on outreach for veteran, you know, senior
6 veterans and specifically those entitlements that
7 they've earned. I think Chair Chin pointed that out
8 in her opening statement and it's true. Um, if you
9 go on DFTA's website the word veteran isn't even
10 there, um, and given that that's, you know, a
11 sizeable portion of New York City seniors it should
12 be. Um, even, you'd think, even a link over to DVS.
13 Um, so I just also wanted to touch on, um, obviously
14 something everyone's talked about. Um, Pete was just
15 referring to the digital divide, that so many seniors
16 are not online, um, so we're all kind of talking
17 about moving our services online, but that's not
18 effective and, um, because so many seniors can't
19 access us, ah, that way. Um, and I wanted to, ah,
20 just provide an anecdote. Um, a couple of weeks ago
21 one of my, ah, attorneys and I went to a 90-year-old
22 Korean War veteran's house. Um, he was facing, ah,
23 he's been facing for many years eviction because of a
24 nuisance situation. So we went to help him to clean
25 it out. And we discovered, um, you know, we had done
the vet check, the admission vet check over the

3 summer. We had given the phone call, he said he was
4 fine. That wasn't true. Um, you know, he was living
5 with total just garbage everywhere. He was, it looks
6 like, surviving off of crackers that he had probably
7 taken, ah, from delis, diners, who knows. Um, you
8 know, he has a phone, it's not a smart phone. He
9 can't access anything. He used to rely on a senior
10 program at the Y near his house. He can no longer go
11 there. It's been closed for over a year, along with
12 all of the other senior centers. Um, and so, you
13 know, this is a perfect example of someone who is the
14 hardest hit, who is completely isolated. He has no
15 family. Um, and we went to get him set up. You
16 know, he had had food stamps. They got cut off. We
17 went to apply. Everything's online. Um, you know,
18 I'm trying to figure, well, I guess I'll put my email
19 in for it. Um, we did reach out thankfully, um, for
20 emergency grocery delivery, which was fantastic, ah,
21 for him. But this is just the perfect example,
22 right, where no matter what services we're all
23 providing, if we're not finding a way to reach those
24 individuals they are suffering. And, um, you know,
25 so many of our clients tell us the library is how
they got online and they can't do that anymore. Um,

3 and there's no one there. Even if they do have
4 access there's no one to help them figure it out,
5 whereas at the library there was, or at the senior
6 centers. So I think we really need to come together
7 as a community and figure out how do we reach these
8 people. It can't, you know, it can't just be fact
9 check alone. It can't just be DVS alone. It really,
10 it has to be a community effort, um, and that's
11 something that we're working on and [inaudible] plan
12 with collaboration with a few other agencies to try
13 to come up with something, because it's something
14 that we all need to work together on. It's not
15 something one [inaudible] attack. Um, and I just
16 wanted to point out two things. Ah, the Veteran's
17 Pension and Independence, which is a benefit, ah,
18 from the V.A. that is life-changing for a lot of
19 seniors, and then also that the American Rescue Plan,
20 um, just reinstated a very, very important benefit,
21 um, VRRP. Ah, it's Veterans Rapid Retraining
22 Program, and it's essentially like everyone who
23 doesn't qualify for the GI Bill, um, age 20 to 67,
24 can qualify. Um, they haven't issued the regulations
25 which was how this is going to be, ah, distributed
or, you know, how people can apply and all of that,

3 but it's coming and, um, it provides the same stipend
4 as the GI Bill and so and the main qualification,
5 aside from the that, is that you're unemployed due to
6 COVID. So, um, this is something that can help so
7 many New Yorkers, um, up to age 67. Um, but most
8 important also is just getting people into the V.A.
9 and the resources, and I think Joe mentioned that,
10 um, there's a Rand study that shows that the health
11 outcomes from the V.A., once you get something there,
12 are better in almost every category than most of the
13 major HMOs. Um, and, um, yeah, I will leave it at
14 that. Thank you for your time today.

15 COMMITTEE COUNSEL: Thank you so much,
16 Coco. I'm now gonna turn it over to Chair Deutsch,
17 um, who will be asking questions first. Ah,
18 panelists, please state unmuted if possible during
19 this question and answer period. Thank you. Chair
20 Deutsch, please begin.

21 CHAIRPERSON DEUTSCH: Thank you. Ah,
22 first I want to acknowledge, ah, some of my
23 colleagues who have joined. Ah, Council Member
24 Brooks-Powers, Council Member Treyger, and, ah, you
25 heard from Council Member Vallone before. Ah, thank
you. Um, so I don't have, I don't have any, ah, any

3 questions for our panelists. But what I just want to
4 say is that how important it is, like Council Member
5 Vallone mentioned how important it is that when, um,
6 members, not only of the City Council, members of the
7 public sees the, you know, how CBOs, how, um, not-
8 for-profits, how organizations are working together
9 serving our veteran population, the resources are
10 there and the people are there. The advocates are
11 there. And, um, you put in, you know, you put in so
12 much, um, with all your heart. You put in, you know,
13 our veteran population, not just our seniors, for,
14 for all of 220,000 veterans here in New York City.
15 And it's so good to see that no matter where you
16 turn, um, you could get help. A veteran can help,
17 but the obstacle is knowing where to turn, and that's
18 what this is all about is giving out that
19 information, letting people know, um, that there are
20 people out there who are not only willing to help,
21 who actually get the help to those and fight for
22 those veterans who are going through challenges and
23 obstacles, ah, you know, in their life. So I just
24 want to really thank, um, you know, everyone, not
25 only, not only those who testified, ah, Ashton, Joe,
Peter, Coco, and I want to thank all the advocates,

3 um, all the volunteers, all the people who, who are,
4 um, who are working for the better of our veteran
5 community for all that you do. Ah, this is probably
6 one of the most important things that, that we, um,
7 that we can do in life to serve our veterans for
8 those who put their lives on the line, ah, for our
9 country. So I just want to thank you all, and it was
10 so important to have, um, to have you testify
11 because, you know, when we have the administration
12 come up and testify first and then we hear from, ah,
13 from the advocates it's, it's not always hopeful. So
14 we want the administration to hear first-hand, um,
15 what the challenges are for the, the older adults in
16 veteran population. So I want to thank you all.

16 COMMITTEE COUNSEL: Great. Now I'm gonna
17 turn it over to Council Member, um, Margaret Chin, if
18 you have any questions for the panelists, Chair Chin?

19 CHAIRPERSON CHIN: Yeah, thank you. Ah,
20 I, yeah, I just really wanted to, um, thank this
21 panel, um, for your testimony and for your service
22 and, and all the great work that you do for our
23 seniors and, ah, older veterans. It's, it's really
24 heartwarming to hear that there are organization and
25 people out there who are doing this work, ah, to

3 support, um, the aging veterans and ask what we need
4 to do in the council is to make sure that resources
5 are available, ah, to organizations like yours, so
6 that you can continue to do the work, the great work
7 that you do, and to make sure that agencies are
8 working together. Ah, and it's just so important to
9 get the information out. It's, it's oftentimes it's
10 very sad to hear, you know, when someone come to our
11 office, you know, asking for help and it was like,
12 and it's also last minute, like they didn't know that
13 these services were available. Um, so I just wanted
14 to, ah, you know, thank all of you for your service.
15 Thank you.

16 CHAIRPERSON DEUTSCH: Thank you, ah,
17 thank you, Chair Chin. I, I just have a question,
18 actually, it's not one of the panelists, but I have a
19 question for, for Margaret, from the Intrepid. Is
20 that a live shot? It looks so tempting. I want to,
21 I want to run over there as soon as the hearing is
22 over.

23 COMMITTEE COUNSEL: I will now call on
24 council members in the order they have used the Zoom
25 hand raise function. If you would like to ask a
question and you have not yet used the Zoom raise

3 hand function, please do so now. Council members,
4 please keep your questions to five minutes. The
5 Sergeant at Arms will keep a timer and will let you
6 know when your time is up. You should begin once I
7 have called on you and the sergeant has announced
8 that you may begin. Seeing as there are no hands
9 raised, we are now going to move into our second
10 panel. I will now call on members of the
11 administration to testify. Testimony will be
12 provided by Amauri Espinal, Luella Byers,
13 additionally Vincent Garcia, director of
14 intergovernmental affairs, and [inaudible] DVS will
15 be available to answer questions. Before we begin I
16 will administer the oath. Aumari Espinal, Vincent
17 Garcia, and Luella Byers, I will call on each of you
18 individually for a response. Please raise your right
19 hands. Do you affirm to tell the truth, the whole
20 truth, and nothing but the truth before this
21 committee and to respond honestly to council member
22 questions? Mr. Espinal?

22 AUMARI ESPINAL: I do.

23 COMMITTEE COUNSEL: Mr. Garcia?

24 DIRECTOR GARCIA: I do.

3 COMMITTEE COUNSEL: Mrs. Byers? Louella
4 Byers I do.

5 COMMITTEE COUNSEL: Thank you. Mr.
6 Espinal, you may begin when ready.

7 AUMARI ESPINAL: Thank you, and good
8 morning to Chair Deutsch, Chair Chin, committee
9 members, and advocates. As we continue to fight this
10 pandemic I echo our commissioner's sentiments, the
11 mayor, and leaders like yourselves to stay safe, wear
12 a mask, and get vaccinated if you are eligible and
13 have not yet done so. I am Amauari Espinal and I'm
14 proud to service as a community services team leader
15 for New York City Department of Veterans Services. I
16 am joined today by Vincent Garcia, our director of
17 intergovernmental affairs, and ombudsman, and Louella
18 Byers, assistant commissioner, bureau of community
19 services at the Department for the Aging. I welcome
20 this opportunity to testify about the senior veteran
21 constituency, the programs and services we offer, and
22 our ongoing data collection efforts. Further, I
23 welcome the opportunity to discuss the proposed
24 legislation, Introduction 1616. New York City is
25 home to approximately 200,000 veterans, active-duty
service members, and reservists. Our nation begins

3 to shift, as our nation begins to shift from the most
4 prolonged conflict in its history and individuals
5 pursue other forms of service, the need to identify,
6 engage, and assist our population becomes even more
7 paramount. With this in mind, our agency began a
8 robust data collection effort in the summer of 2019.
9 Since then our agency has entered into or is
10 currently negotiating over 15 memoranda of
11 understandings, comprising of approximately 70,000
12 veteran constituency contacts. In working with the
13 V.A. alone, DVS has received access to the names,
14 addresses, and corresponding V.A. benefits codes,
15 roughly 30,000 individuals with a large number being
16 seniors. Through these efforts DVS has strengthened
17 and empowered our existing relationships with
18 government agencies while developing new ones. In
19 March 2020 DVS shifted its newsletter to occur
20 weekly, serving as a source of information for
21 veterans, advocates, and government officials. In
22 moving into a weekly report DVS increased the average
23 email open rate 50%, directly connecting with
24 constituents and providing a highlight of program and
25 services. Our other digital outreach tools shared
similar beneficial outcomes. During 2020 our agency

3 was able to double its number of Facebook posts,
4 reaching a total of 225,579 individuals, a 63%
5 increase compared to 2019. Similarly, the DVS
6 Twitter account and Instagram page saw increased
7 followers and interactions, leading us to expand the
8 DVS brand and [inaudible] familiarity with
9 constituents. However, our engagement with the
10 senior population exceeds digital outreach. To
11 better connect and understand the veteran
12 populations' immediate needs, DVS has developed
13 innovative ways to work smarter and better. While
14 DVS has always maintained close ties with DFTA. Our
15 commissioners have developed an ongoing relationship
16 with one another. Whether in person or in a virtual
17 setting, DFTA continues to connect with providers who
18 serve the general senior population. Throughout
19 several events DVS attended these meetings with DFTA,
20 providing an overview of our agency, the number of
21 programs and services we offer, and the agency's
22 contact information and social media handles. This
23 way a veteran or an individual on their behalf has
24 the appropriate contact information to reach our
25 agency and receive excellent service. As first
suggested by the council, DVS also began reaching out

3 to each of the prospective community boards. Since
4 starting this initiative in January, our agency is
5 now hosting a community board event, aggregated by
6 borough, and meeting each Thursday through the month
7 of April. Lastly, as highly in our previous
8 testimonies, during the start of the pandemic DVS
9 worked tirelessly to distribute approximately 38,000
10 face masks to veteran constituents and provided 22
11 micro grants to VSOs throughout the New York City
12 region. We are confident that our data collection
13 efforts will continue to capture more veterans
14 through these increasing touch points with the
15 community and therefore expand services. During our
16 last hearing we spoke about the VetConnectNYC
17 transition into an in-house platform. In
18 transitioning into this platform we carefully weighed
19 the concerns and issues raised by nonprofit partners,
20 the council, and constituents, while maintaining the
21 quality of services veterans became familiar with.
22 One central theme that arose from the council was
23 DVS's accessibility to data. Since the transition
24 into the Unite Us platform, DVS can better maintain
25 constituent data, highlight applicable services, and,
most importantly, gather the insight necessary as we

3 move into our new chapter as an agency. For example,
4 since our transition on October 1 approximately 20%
5 of all service requests are made by individuals who
6 are 60 and older, totalling 178 service requests.

7 According to our data, the top three service requests
8 for aging veterans are benefits navigation, housing
9 and shelter, and legal. Interestingly, since the
10 transition onto the Unite Us platform, service
11 providers in the network can identify any special
12 life support or services for niche populations such
13 as "veterans" and "seniors." Of the 114

14 organizations, 31 have listed seniors as a
15 specialized population. When combined with the 14
16 mental health partners we are confident that senior
17 veterans, like their younger counterparts, have
18 access to a wide range of services dedicated to
19 meeting their needs. Through the most troubling
20 times of the pandemic New Yorkers everywhere and
21 particularly seniors faced increasing levels of
22 isolation and a lack of connection and interaction.

23 We are proud to share that our mission VetCheck
24 Outreach Initiative is still ongoing. Although the
25 height of the pandemic is thankfully behind us, its
impacts will be felt for months and years to come.

3 That's why we firmly believe in continuing the effort
4 to make direct contact with our constituents. It's
5 imperative that they know they are not alone and that
6 there are resources available to help, especially for
7 our older veterans. To date, Mission VetCheck has
8 made 28,670 calls to veterans and their families with
9 a 23% engagement rate. The initiative has also
10 connected 869 veterans to information resources and
11 services. Mission VetCheck has also recently served
12 as a conduit for vaccine information as our
13 volunteers are equipped with helpful information from
14 both the city and the V.A.. Through the generous
15 services of the New York National Guard, more than
16 12,000 calls were placed during the darkest months of
17 April, May, and June 2020. Starting in July 2020 New
18 York Cares volunteers began supporting the project
19 and to date more than 400 of their volunteers have
20 supported Mission VetCheck. The New York Cares
21 volunteers who support this initiative have been
22 truly incredible. Some have been making calls to our
23 community every week since our partnership launched
24 in July because they realized how much of a
25 difference a simple supportive phone call can make in
someone's life. Over the course of two focus group

3 sessions we recently held, one volunteer expressed
4 how grateful the veteran was to hear from someone
5 looking to help. "I was praying that someone would
6 reach out to me and your call came just when I needed
7 it", expressed Kai, who has volunteered for the
8 project for the last few months. This veteran
9 articulates a feeling shared by so many others since
10 the onset of the pandemic. As Mission VetCheck
11 continues to make calls, reaching an ever-increasing
12 number of veterans, we are confident that our reach
13 will continue to expand and more veterans will
14 receive the services they've come to rely upon. One
15 of the most significant concerns facing New Yorkers
16 during the pandemic is food insecurity. To address
17 this need, DVS has partnered with GetFoodNYC to
18 ensure that our veteran population can access all of
19 the avenues through which the city provides food
20 assistance to New Yorkers. To support these efforts,
21 DVS coordinators receive training and certification
22 as GetFood authorized enrollers and are assisting
23 veterans in navigating this program's requirements to
24 get food. Veterans can independently or through one
25 of DVS coordinators, submit a food request once every
three days for two weeks of recurring orders. Since

3 the start of this program [inaudible] has assisted
4 552 individual veterans with gaining access to food.
5 Of these 552 requests, approximately 45% are seniors.
6 As the council was aware, our work to address food
7 insecurity goes well beyond GetFoodNYC. Since the
8 pandemic DVS has collaborated with Hello Fresh in
9 partnership with the state's Nourish New York
10 initiative. Through this collaboration DVS works
11 with various organizations to distribute 350 to 400
12 fresh food kits to veteran households per week.
13 Since this program's launch DVS has delivered 65,533
14 meal kits to veteran households, 24,000 in this year
15 alone. Further, in addition to the Hello Fresh
16 initiative, DVS has also actively engaged with the
17 Bronx Food Initiative to deliver meals to hungry
18 constituents. So in this collaboration DVS had
19 distributed 25,632 meals, ah, boxes to hungry New
20 York City veterans and over 9270 meal boxes this year
21 alone. As we continue developing internal problems
22 and initiatives DVS looks forward to collaborating
23 with outside organizations to combat food insecurity
24 facing our constituents. Veterans experiencing
25 homelessness is one of the foundational pillars of
this agency. Even during the pandemic, which DVS

3 understands has created greater housing insecurity,
4 DVS continues to house veterans to ensure that they
5 are in safe, secure housing. While our veteran peer
6 coordinators are no longer working in city shelters,
7 they continue their important work to house veterans,
8 albeit under different circumstances. For example,
9 house viewings and interviews shifted to virtual
10 modes and management companies opted to complete a
11 phone or video call interviews with potential veteran
12 applicants. If virtual options were not sufficient
13 our VPCs would safely conduct physical inspections of
14 the units, pick up and drop off documentation, and
15 assist with the veteran's move. Through these
16 efforts DVS has found notable success. Since the
17 start of the physical year we've housed 105 veterans,
18 33 of whom are seniors. Interestingly, when taking
19 into account those who are 55 and older, that number
20 increases to 56. This past November alone DVS staff
21 housed 29 individuals, our second highest monthly
22 total in the past three years. To achieve this goal
23 we've utilized existing programs such as CITYFEPS,
24 HUD-VASH, and VASH Continuum, providing our
25 constituency with various housing options. Further,
we've engaged and communicated with landlords to

3 expand the pool of housing options for our veterans.

4 When considering the specific needs of our older

5 population, DVS developed innovative methods to house

6 these veterans. Due to delays in obtaining documents

7 at the onset of the pandemic, DVS worked directly

8 with supporting veterans and obtaining documents. We

9 expanded our accessibility by accepting applications

10 via email, the online portal, and scheduling phone

11 calls to assist in their submission. And we work

12 hand in hand with other city agencies to coordinate

13 remote briefing calls to inform better, empower, and

14 assist our constituency in finalizing their

15 applications. When considering the three main

16 housing programs in CITYFEPS, HUD-VASH, and VASH

17 Continuum, senior veterans accounted for 50%, 33%,

18 and 14%, respectively. These metrics show that DVS

19 not only connects to and communicates with our aging

20 veteran population, but we ensure that they are

21 included and represent sizeable samples of our

22 programs. For example, take the story of Veteran M.

23 He is a 70-year-old US Navy veteran referred to DVS

24 by a partner agency for assistance locating housing

25 for himself, his partner, and his adult son. He

began working with the DVS VPC in June 2020. Due to

3 his medical conditions, Veteran M was seeking housing
4 that could accommodate both him and his partner's
5 limited mobility and in an area that would keep them
6 close to support systems. After seeking and viewing
7 several units that did not meet accessibility needs,
8 in January 2021 the veteran was able to move out with
9 his family to a unit in Staten Island. Since his
10 move out the VPC has been in touch. They were able
11 to secure furniture for their two-bedroom apartment,
12 and are settling into their new home. Or, take the
13 story of Veteran F. He is a 65-year-old army veteran
14 referred to DVS's HSS team in August 2020 for housing
15 assistance. Veteran F was chronically homeless at
16 the time of referral. After receiving the referral,
17 Veteran F was scheduled by DVS to interview for a
18 supportive housing unit in the Bronx to help his
19 transition from homelessness to housing. Veteran F
20 began the process with a virtual interview and
21 eventually moved out in November to his own newly
22 furnished studio apartment. As we continue to work
23 smarter, utilizing the number of resources available
24 to New York City veterans, such as CITYFEPS, HUD-
25 VASH, and VASH Continuum, we can assure that senior
veterans will continue to receive the care,

3 assistance, and engagement they've come to rely on.

4 It was only five short years ago that our agency
5 evolved from a mayoral office to a New York City
6 charter agency. In the first years of this agency
7 our staff was comprised of four dedicated employees
8 with the vision to expand, collect, and engage the
9 then 210,000 veterans who call New York City home.

10 Since then our agency has grown to approximately 40
11 employees, almost 70,000 veteran contacts, and a
12 newsletter and social media outreach that

13 exponentially expands from year to year. While we
14 believe that there is room for improvement to assist
15 our constituency, it is crucial to recognize how far
16 we've come, particularly how this small but mighty

17 group of civil servants have dedicated to helping
18 each New York City veteran and their family every
19 day. As we considered the proposed legislation, we

20 recognize the need to better track data across our
21 veteran population and expand our accessibility to
22 that data. As discussed earlier in the testimony,

23 our agency is doing just that. Since the summer of
24 2019 through our MOU initiatives and inspired by

25 Local Law 23, DVS has engaged our sister agencies to
receive contact information for veterans currently

3 receiving [inaudible] particularly with our city
4 services. In addition, DVS has acted on the goals
5 expressed in Intro 1616 through Executive Order 65.
6 Through EO 65 DVS has launched a community survey to
7 compile the demographics of our community and their
8 specific needs. DVS is still evaluating privacy
9 considerations and operational implications related
10 to the bill, but we stand committed to the intent of
11 this legislation and reassure the council we are
12 actively collecting relevant data of veterans across
13 New York City in creative ways and continue to grow
14 our veteran contact list. We look forward to
15 continued conversations with you on this important
16 issue. As we navigate the challenges presented by
17 the pandemic and beyond, DVS will continue to find
18 new ways to best collaborate with DFTA and all of our
19 fellow agencies to develop and provide quality
20 services and inform the New York City veteran
21 community, and information to the New York City
22 veteran community. We thank you for the opportunity
23 to testify on this matter and look forward to any
24 questions you or committee members may have.
25

3 COMMITTEE COUNSEL: Thank you so much,
4 Mr. Espinal, and we'll now turn it over to Ms. Byers.
5 You may begin.

6 ASSISTANT COMMISSIONER BYERS: DFTA is
7 here for Q&A.

8 COMMITTEE COUNSEL: Oh, you're not giving
9 testimony this afternoon?

10 ASSISTANT COMMISSIONER BYERS: No.

11 COMMITTEE COUNSEL: Oh, OK, all right.
12 So I will now turn it over to, um, Chair Deutsch, if
13 he has any, um, questions for this, the
14 administration. Chair Deutsch.

15 CHAIRPERSON DEUTSCH: Are we hearing, ah,
16 testimony from, ah, the Department of Aging?

17 COMMITTEE COUNSEL: Well, Ms. Byers is
18 the only, um, admin here from, from DFTA and said she
19 is available for questions.

20 CHAIRPERSON DEUTSCH: Oh, OK.

21 COMMITTEE COUNSEL: But no testimony.

22 CHAIRPERSON DEUTSCH: OK. All right.
23 Um, so, my first question is, this is to DVS. Ah,
24 how many veterans above the age of 60, ah, live in
25 New York City?

3 AMAURI ESPINAL: Ah, so currently, ah, we
4 do have a breakdown of that, Council Member. Ah, in
5 looking at the latest numbers, ah, ah, we do see
6 that, ah, approximately 70% of the population, ah, in
7 New York City, ah, are senior veterans.

8 CHAIRPERSON DEUTSCH: 70% of the
9 population as a whole or 70% of the population of
10 veterans?

11 AMAURI ESPINAL: Ah, so, so, right now
12 DVS is able to confirm that those who are 55 and
13 older account for approximately 71% of the New York
14 City veteran population.

15 CHAIRPERSON DEUTSCH: The city veteran
16 population. Um, how many, how many of these, um,
17 senior veterans are, are homeless?

18 AMAURI ESPINAL: So, ah, we, we were
19 attempting to get that information from HUD.
20 Unfortunately, HUD does not provide, ah, ages, ah,
21 for, ah, for their homeless population, Council
22 Member. Ah, they don't provide what they don't have.

23 CHAIRPERSON DEUTSCH: They have, they
24 have ages, right? They have to have ages.

25 AMAURI ESPINAL: Ah, they, they did not
disclose that information, Council Member, when,

3 when, ah, we did, ah, the research. We were not able
4 to, to, to look at that information from HUD
5 [inaudible].

6 CHAIRPERSON DEUTSCH: Do you know why?

7 AMAURI ESPINAL: Ah, I, I don't have an
8 exact reason, Council Member, but, ah, we are
9 actively, ah, pursuing that information in order, ah,
10 to utilize it, ah, to our best advantage.

11 CHAIRPERSON DEUTSCH: Um, so how, how is,
12 I don't understand. How is DVS pursuing that, if HUD
13 has the ages of homeless individuals, ah, wouldn't it
14 just be like an email requesting if they had the
15 information, ah, if they knew how many veterans, um,
16 are listed? Wouldn't that just be like an easy
17 number with today's technology just to respond? Is
18 it something that is, DVS is not concerned about,
19 that they don't, ah, like push hard to give that
20 information? Um, you have DVS that's an agency here
21 in New York City. Shouldn't it be the responsibility
22 of DVS to receive that information?

23 AMAURI ESPINAL: Ah, ah, of course,
24 Council Member, and it's certainly not that, that
25 we're not, ah, we don't care about that population.
Ah, I can have my colleague, Vincent Garcia, ah,

3 expand on the communication with HUD, ah, if you
4 would.

5 CHAIRPERSON DEUTSCH: Yeah, sure. Thank
6 you.

7 DIRECTOR GARCIA: Yeah, absolutely.
8 It's, um, it's definitely something that's ongoing.
9 I think it's being able to recognize if there's any
10 privacy concerns or, or other metrics in needing to
11 [inaudible] that data, Council Member. But what I
12 can assure you is one of two things. One that we are
13 actively working on them and thus collaborating with
14 our sister agencies in the event they're able to
15 provide the vet information themselves. But I think
16 second to that, as you know we spoke on those
17 [inaudible] initiatives, it's [inaudible] alternative
18 ways to better track that information on our housing
19 populations and see how best we can extrapolate that
20 data moving forward.

21 CHAIRPERSON DEUTSCH: Um, how, how long
22 has DVS been an agency here in New York City?

23 AMAURI ESPINAL: Ah, roughly, I believe
24 our birthday was April 5, ah, sir, so roughly about,
25 a little more than five years.

CHAIRPERSON DEUTSCH: I'm sorry?

3 AMAURI ESPINAL: A little more than five
4 years now.

5 CHAIRPERSON DEUTSCH: A little more than
6 five years. So in five years, um, DVS couldn't get,
7 um, General Counsel to let HUD know if they can give
8 that information to DVS?

9 AMAURI ESPINAL: Well, I, I think it's, I
10 think it's more so just being able to increases. As
11 you know, when you start with just four employees and
12 even increase the numbers throughout it's also being
13 able to increase those [inaudible] and those
14 communications with not just our city partners, but
15 fellow partners. So what I can say is that that's
16 something of paramount importance to us and we're
17 really looking forward to develop a new working
18 relationship with HUD so we can get that information
19 for you.

20 CHAIRPERSON DEUTSCH: Though isn't it,
21 isn't it like if you even have the city part of it,
22 at least we have some kind of numbers.

23 AMAURI ESPINAL: I'm sorry, can you
24 [inaudible]?

25 CHAIRPERSON DEUTSCH: Yeah, I just want,
I just want to tell, um, um, people testifying from

3 DVS, if you don't have an answer something just tell
4 me I don't have an answer or you're right, but don't,
5 don't give me excuses and tell me you're waiting for
6 General Counsel when it's, it's over five years, when
7 something could have been done. So let's get to the
8 facts. If you have an answer I'd like to hear the
9 answer. If I'm right, just tell me yes, you're
10 right, we need to do better, but don't give me an
11 answer that we, we're waiting for General Counsel, we
12 have to ask, because that is not an answer to me.

13 AMAURI ESPINAL: [inaudible].

14 CHAIRPERSON DEUTSCH: Ah, um, how many
15 senior veterans does DVS serve specifically?

16 AMAURI ESPINAL: Ah, so, are, are you
17 saying, Council Member, ah, in general or, ah, when
18 it comes to housing?

19 CHAIRPERSON DEUTSCH: In general.

20 AMAURI ESPINAL: OK. Ah, so currently we
21 are at a number of, ah, we have 178, ah, service
22 episodes for clients age 60 and over.

23 CHAIRPERSON DEUTSCH: 178, as in a
24 hundred and seventy eight? @
25

3 AMAURI ESPINAL: 178 service episodes, in
4 the, ah, the VetConnectNYC, ah, platform that we, ah,
5 disaggregated for, for age that were 60 and over.

6 CHAIRPERSON DEUTSCH: So out of 70% of a
7 senior, um, um, a veteran senior population out of
8 200,000 veterans, so you tell me 178 veterans, um,
9 over, over 60, 55, that DVS served?

10 AMAURI ESPINAL: Well, that, that, those
11 numbers are from, ah, October 1 through March 21 of
12 2021, Council Member.

13 CHAIRPERSON DEUTSCH: So what, what is
14 the previous year, for the full year?

15 AMAURI ESPINAL: Ah, give me one moment.
16 So we have, ah, 148, ah, for fiscal year 2021.

17 CHAIRPERSON DEUTSCH: 148 total?

18 AMAURI ESPINAL: For, for the fiscal
19 year, correct.

20 CHAIRPERSON DEUTSCH: So, OK. Ah, this,
21 this is why we have this joint hearing today between
22 DVS and DFTA, um, 'cause DFTA has information and
23 they have resources that could help seniors, ah,
24 senior veterans, and the numbers you've given me, do
25 you think those are, those numbers are good?

3 AMAURI ESPINAL: Well, Council Member,
4 we're, we're, we're always seeking to expand our, our
5 messaging and outreach.

6 CHAIRPERSON DEUTSCH: Yeah, but a
7 hundred, between 140 and 170, a 140 for a total year,
8 um, that's, that's totally like unacceptable because
9 how can you, you know, if you had 10,000 or 20,000 or
10 30,000, 'cause 70% are seniors, right? So you're
11 reading me from what, from Vet Connect?

12 AMAURI ESPINAL: Ah, that, that is
13 correct, Council Member.

14 CHAIRPERSON DEUTSCH: So um, that's still
15 [inaudible].

16 AMAURI ESPINAL: And I'm getting, I'm
17 getting an update, ah, Councilman. I have a, it's
18 1620 since the start of Vet Connect in, ah, fiscal
19 year 2019.

20 CHAIRPERSON DEUTSCH: Which is also a
21 very low number. Um, now you keep on saying and DVS,
22 you, in your testimony, that we have 200,000
23 veterans, right, 200,000 plus veterans. The numbers
24 keep on changing from 10 to 20, 200. Um, how many,
25 how many New York City veterans are there?

3 AMAURI ESPINAL: Ah, so currently,
4 Council Member, there are, ah, 149,000 veterans and,
5 ah...

6 CHAIRPERSON DEUTSCH: In your testimony
7 you said 200...

8 AMAURI ESPINAL: Excuse me, excuse me.
9 That's 151,000 veterans in New York City. Ah, in
10 addition to that there are approximately 49,000, ah,
11 active duty, ah, reserve, and national guard members
12 that are currently serving.

13 CHAIRPERSON DEUTSCH: OK, so, um, OK. So
14 we're talking about a population of about 200,000,
15 correct?

16 AMAURI ESPINAL: That is correct,
17 Councilman.

18 CHAIRPERSON DEUTSCH: And, ah, does DVS
19 represent 200,000 veterans, New York City veterans?

20 AMAURI ESPINAL: We, we strive to assist
21 any veterans that, that come to our agency for
22 assistance, Council Member, and, ah, we, we, you
23 know, we work with our sister city agencies as well
24 as our state and federal counterparts to, to address
25 those needs as, as best we can.

3 CHAIRPERSON DEUTSCH: In every testimony
4 I'm, I'm hearing about, ah, the 200,000 veterans that
5 DVS serves here in New York City and you, you
6 mentioned in your numbers of engagement and the rates
7 of engagement to veterans, um, what are those numbers
8 again, if you could repeat those numbers of
9 engagement that you read in your testimony and, um,
10 if you could just repeat that, that paragraph.

11 AMAURI ESPINAL: Ah, the one that I read
12 in testimony, Councilman?

13 CHAIRPERSON DEUTSCH: Yeah, right.

14 AMAURI ESPINAL: Yes, ah, if you'd allow
15 me one moment, please. Ah, Vincent, do you have
16 that, ah, those numbers, ah, readily available?

17 DIRECTOR GARCIA: Sure. I'll pull up the
18 numbers in particular you're looking for, Chair?

19 CHAIRPERSON DEUTSCH: I'm sorry?

20 DIRECTOR GARCIA: Ah, I'll just get, what
21 numbers in particular are you looking for?

22 CHAIRPERSON DEUTSCH: Well, you spoke
23 about the numbers of engagements, the engagement
24 rates?

25 DIRECTOR GARCIA: Oh, well, I, I believe
the number that, that you're referring to is, ah,

3 based on the number of service episodes that have
4 within VetConnect 20% of those are individuals that
5 we can, ah, in our platform signify that they are 60
6 and older. So of the VetConnect population that we
7 have, 20% are 60 and older [inaudible]. Is that what
8 you're referring to, Council Member?

9 CHAIRPERSON DEUTSCH: No, I'm, I'm
10 referring to the, the engagement, um, the engagement
11 rates that you mentioned before your testimony, if
12 you just look at your testimony. Um, you mentioned,
13 you mentioned...

14 DIRECTOR GARCIA: Yeah...I'm sorry.

15 CHAIRPERSON DEUTSCH: You mentioned new
16 outreach to veterans and their families.

17 DIRECTOR GARCIA: Um, the, the metrics
18 that I believe [inaudible] is that we currently is
19 we're, we're either negotiating or have roughly about
20 70,000 contact information forwarded [inaudible].
21 Then we have 20% of the service episodes are of
22 senior veterans and then with the Mission VetCheck we
23 have a 23% engagement rate.

24 CHAIRPERSON DEUTSCH: Repeat that again?

25 DIRECTOR GARCIA: Yes, sir. Ah, so based
on our, our [inaudible] and then [inaudible] from the

3 V.A. there's approximately 70,000 contacts that
4 we're, that we are receive or are working on. Ah,
5 then there's 20% of our service episodes within
6 VetConnect since October 1 since the transition.
7 That is, ah, ah, the senior population ages 60 and
8 older. And then in our Mission VetCheck initiative,
9 um, there is a 23% engagement rate from the calls
10 that we've made and those calls are 28,670. So that
11 28,670, ah, there's a 23% engagement rate from there.
12 And that has led to 869 service episodes.

13 CHAIRPERSON DEUTSCH: Just still
14 extremely low. Um, with respect to the community
15 survey, ah, issued by DVS, um, have the preliminary
16 numbers revealed any information about senior
17 veterans' needs during the pandemic?

18 AMAURI ESPINAL: So thank you for the
19 question, Council Member. We are still collecting
20 data as the survey was recently launched. Ah, we do,
21 ah, collect data on the service era in which the
22 veteran serves and, ah, there is an opportunity to
23 collect age, ah, afterwards. But, ah, we're still
24 waiting on collecting that information, ah, you know,
25 to a, a, ah, acceptable sample size. Um, the, the,

3 ah, survey is currently set to be available until
4 October 1 of this year.

5 CHAIRPERSON DEUTSCH: Um, how does, how
6 does DVS, um, considering this, this important
7 hearing, how DVS and the Department of Aging are
8 working together, how does DVS and DFTA, ah, do work
9 to serve the senior population? You did mention that
10 you have a very close relationship, and that's not
11 what I heard at the last hearing when I questioned
12 them about the, the Department of Aging, um, what
13 their, how many conversations they have and what kind
14 of, um, partnership they have working together, our
15 senior population. So I'm, I'm asking you what is
16 DVS and DFTA, how do, how do they work together?

17 AMAURI ESPINAL: Ah, appreciate that
18 question, Council Member. So, ah, we at DVS strive
19 to maintain open working relationships with, with all
20 of our, ah, city counterparts. Ah, we, we do work
21 with DFTA if, ah, they have a, an issue that, if we
22 have a veteran with an issue that we cannot address
23 directly, ah, we do make referrals, ah, to DFTA.
24 They are in our, ah, VetConnect platform currently,
25 um, and we do make referrals for them for, for
different, um, needs, such as transportation, ah,

3 employment or vocational training for seniors, ah,
4 things of that nature.

5 CHAIRPERSON DEUTSCH: And how does it
6 work if Department of Aging, ah, receives a, um, an
7 inquiry about a, ah, veteran?

8 AMAURI ESPINAL: So we, ah, we
9 communicate with them what the need is that the
10 veteran has and, ah...

11 CHAIRPERSON DEUTSCH: Do they send you
12 those referrals? You're sending referrals back and
13 forth? How does it work?

14 AMAURI ESPINAL: Ah, we do the referrals.
15 We, we do work, ah, on a case by case basis, ah,
16 when, ah, we do need any assistance I'll reach out,
17 yes.

18 CHAIRPERSON DEUTSCH: How do they reach
19 out? Um, how do they reach out to, ah, to DVS when
20 they need assistance? Do they go on the portal? Do
21 they...

22 AMAURI ESPINAL: So, so, ah, we can, we
23 can, ah, make a referral within the VetConnect
24 platform, ah, as a courtesy. You know, typically
25 there is a phone call or email that [inaudible].

3 CHAIRPERSON DEUTSCH: You know what the
4 number is like for, for the year 2020 of how many
5 referrals, ah, DVS, ah, sent over to, ah, how, how
6 many referrals DFTA sent over to DVS?

7 AMAURI ESPINAL: Ah, I do not have that
8 data right now, ah, Council Member. We are going to
9 share that, ah, once we can collect that and get back
10 to you.

11 CHAIRPERSON DEUTSCH: Ah, is there a, ah,
12 a liaison to DFTA? Um, is there a veteran, ah,
13 liaison to Department of Aging?

14 AMAURI ESPINAL: So, yes. Ah, again, our
15 commissioners have, have been in constant
16 communication, um, and I'll let our IGA, ah, speak on
17 that, if, if he has anything to add to that.

18 DIRECTOR GARCIA: Yeah, ah, the, the
19 answer is yes, ah, Council Member. There is a
20 veteran liaison under Local Law 42, ah, but the other
21 thing is that there's a number of touch points
22 between ourselves and the counterparts. So for
23 ourself being the IGA director I'm in constant
24 communication with my IGA counterpart at DFTA. And
25 then sometimes that's how we share information.
That's how sometimes referrals make [inaudible].

3 CHAIRPERSON DEUTSCH: Um, you don't have
4 an estimate of how many referrals you may think you
5 had in 2020?

6 DIRECTOR GARCIA: Ah, unfortunately, at
7 this time, no, sir. But we'll be more than happy to
8 circle back and get back to you with that number. I
9 want to make sure that we give you the most
10 appropriate number.

11 CHAIRPERSON DEUTSCH: Um, do you feel
12 that there is, um, that we need to do better between
13 the cooperation between DFTA and, and DVS?

14 DIRECTOR GARCIA: I think there's always
15 room to improve. I mean, at the end of the day, you
16 know, what, what we're able to do is, you know, we
17 [inaudible] we get better and we increase the
18 [inaudible]. There's always different things that we
19 can always improve. I mean, hearing the advocates
20 speak, you know, they spoke about [inaudible], but
21 also a lot of room for improvement. So I would say
22 yes, um, there's always room for improvement. That's
23 what we strive to do.

24 CHAIRPERSON DEUTSCH: You mentioned, can
25 you just talk about a few, a few ways that you feel
that we could improve the relationship and the

3 information, um, that we share between the Department
4 of Aging and DVS?

5 DIRECTOR GARCIA: Um, yeah, absolutely.

6 I will, ah, I'm, I'm happy to start that off and then

7 I can, um, you know, transition over to my

8 counterpart at DFTA and see if there is anything else

9 that she would like to add. But I, I think really

10 just, um, you know, collaboration on certain

11 information and collaboration as, as we are doing for

12 this hearing I think before on the number of programs

13 that may be accessible for senior veterans, for

14 example. And it's really just having the [inaudible]

15 to get out. You know, there's a lot of wonderful

16 things that I think DFTA is doing and DVS is doing

17 and the city is doing as a whole. It's how can we

18 make sure that this information, um, is there for

19 [inaudible] so they're well aware of it and they know

20 where to go and how to find.

21 CHAIRPERSON DEUTSCH: [inaudible].

22 DIRECTOR GARCIA: And then I'll pass it

23 off over to my counterpart at DFTA.

24 ASSISTANT COMMISSIONER BYERS: I would

25 say, ah, DFTA works very closely with all our

colleagues at sister agencies. We do similar, um,

3 outreach to, um, Department of Veterans Services by
4 staying up to date on any concerns that our veterans
5 have. I think over the past year, especially during
6 this pandemic, I think our relationship has
7 strengthened. Our commissioner has monthly meetings
8 with our providers. These are borough-wide meetings.
9 And we have had the commissioner of DVS attend these
10 meetings, where he can interact director with our
11 providers and let them know which resources and
12 benefits are available, ah, to their veterans
13 population. So we thought that was a great link of
14 having our providers who are on the ground, who
15 provide the direct services, being in touch with DVS
16 and the DVS commissioner, and wants the contact
17 information and how to reach out to DVS. We also
18 reach out to DVS through our intergov office, so if
19 there's anything that we need we will let our
20 intergov person know and they will reach out.

21 CHAIRPERSON DEUTSCH: Thank you. Yeah,
22 I, I would just think that if we, if there was a
23 close partnership there would be testimony from, from
24 the Department of Aging, right? Because you would
25 have probably like, ah, 10 pages, like Coco, who
testified before on how both agencies do work

3 together. Um, so this is just, you know, I, you
4 know, Department of Aging has a great chair, who is
5 very vocal and holds the, the agency accountable.
6 But when you come in a hearing, when you come to, ah,
7 a DVS hearing and you don't have testimony of how you
8 work closely together, how you give that information
9 over, then that doesn't show that you do work
10 together. It's just like, to me it's lip service.
11 Um, we all know, ah, first I want to ask how many
12 homebound, ah, veterans are there in New York City?

12 AMAURI ESPINAL: So, ah, Council Member,
13 we are, we are tracking the, ah, number of veterans
14 in, in the city as a whole. Ah, unfortunately we
15 don't have the number of homebound, ah, veterans
16 currently. Ah, we are working, ah, to track down
17 that information as well.

18 CHAIRPERSON DEUTSCH: You did mention at
19 the beginning of your testimony that, um, people
20 should stay safe, they should wear a mask, they
21 should get vaccinated. You know, we do have, um,
22 vaccinations for homebound seniors. And how you, how
23 you talking about people should get vaccinated and
24 especially our, our senior population who's been hit
25 very hard, and then when I ask you a question about

3 how many homebound seniors when we do have the
4 services here in New York City to vaccinate homebound
5 seniors and you don't have that number, so how are
6 homebound veteran seniors supposed to remain safe if
7 DVS doesn't have that number and we can't get them
8 vaccinated, and we're well, we're well a year over
9 the, when, since the pandemic started?

10 AMAURI ESPINAL: I, I appreciate that,
11 that question, Council Member, and it's, it's
12 something that we've, um, been collaborating with,
13 with, with the New York [inaudible] V.A. Um, as you
14 well know, we held a town hall, ah, on, on the
15 vaccine, ah, process. Ah, we inform, ah, you know,
16 anyone that comes our way on, ah, all avenues of
17 receiving a vaccination and, and, you know, we do
18 understand that, ah, that in the veteran, within the
19 veteran community, ah, word, ah, information does
20 travel by word of mouth. So, ah, we, we are, we are
21 trying to, to do both virtual and in-person outreach
22 as, as best as we can.

23 CHAIRPERSON DEUTSCH: You know, word of
24 mouth is very good. But the whole purpose of DVS is
25 to disseminate the information, to get the
information out, and we did speak about at the

3 beginning of the hearing how, you know, with the work
4 of all the advocates, ah, it's so important because
5 it's all about getting the word out, not waiting for
6 phone calls. Now what you just mentioned is we're
7 waiting, we're waiting for calls, you know, for
8 people to inquire about the vaccination. But it's
9 DVS's job to reach out and get a hold of those
10 homebound seniors to make sure they get vaccinated.
11 So that, that answer is totally unacceptable to me
12 because you need to get out there and most of the
13 senior population, not everyone has, um, technology.
14 They don't have, they don't have computers. And so
15 you don't have a plan. There's, there's like no plan
16 and we're ready in, in the end of April, and you
17 really have no way to, you have no way of knowing,
18 um, you know, if we could, ah, vaccinate the senior
19 veteran population because you don't have that
20 information. So what are your plans moving forward
21 now that you don't have that information in order to
22 get, ah, um, to do more outreach and to make sure
23 they all get vaccinated?

24 AMAURI ESPINAL: So I, I will say,
25 Council Member, that, ah, you know, I will say again
that we have been doing outreach in person with, ah,

2 various American Legion and VFW posts, ah, which tend
3 to have a majority of senior members, ah, as well as
4 different, ah, community board, ah, veteran
5 committees, ah, in person as well to, to get the word
6 out, ah...

7 CHAIRPERSON DEUTSCH: That's [inaudible]
8 70% of the veteran population, the seniors, so, and
9 you just mentioned, ah, three or four, ah,
10 organizations, not-for-profits, how you get the
11 information out. So that's still 70% of the veteran
12 population are, are seniors, right?

13 AMAURI ESPINAL: That's correct.

14 CHAIRPERSON DEUTSCH: So is that enough,
15 the work you're doing, is that enough or do you, um,
16 have other plans now that it's a concern, um, to
17 reach out to the homebound and the senior population
18 to make sure they get vaccinated.

19 AMAURI ESPINAL: So, ah, we're always
20 looking to expand and amplify, ah, amplify our, our
21 messaging and, ah, and outreach...

22 CHAIRPERSON DEUTSCH: [inaudible] DVS is
23 always looking to expand. But at the end of the day,
24 what are you gonna do to expand it?

25 AMAURI ESPINAL: Well, we would, ah...

3 CHAIRPERSON DEUTSCH: What is it? You,
4 you need to have a plan, right? Um, you know, it's
5 not just about talking about how we need to do
6 better, how we need to expand, how we need to do more
7 outreach. But how is DVS going to do that moving
8 forward?

9 AMAURI ESPINAL: So, ah...

10 CHAIRPERSON DEUTSCH: Do you have a plan?
11 Do you have a, a plan of, what are your plans? We'd
12 like to know.

13 AMAURI ESPINAL: So, so, we, we would
14 plan to, to, ah, ask DFTA for assistance with, ah,
15 outreaching to, to their senior population. We, we,
16 we are aware that some, ah, senior, ah, senior
17 beliefs do overlap with veteran benefits, ah, so we
18 would love to collaborate and coordinate with, with
19 them and, and any other, ah, community partners, ah,
20 you know, and able to, in order to get us to that
21 point.

22 CHAIRPERSON DEUTSCH: That's, that's very
23 good. That's a plan. Um, and that's why we're here
24 today. Um, so I appreciate that. Um, all right.
25 I'm, I'm gonna give over, um, I'm gonna give it over

3 to my colleague, um, Chair Chin, to ask some
4 questions.

5 CHAIRPERSON CHIN: Thank you, Chair
6 Deutsch. Ah, thank you for your question. It just
7 really shows that we have a lot of a work to do, that
8 the agencies are not working as closely as we really
9 want it. Um, I have a couple of questions for DVS.
10 Do you contract, ah, with service provider,
11 nonprofits, ah, to provide, um, to provide
12 assistance, um, to veterans?

13 AMAURI ESPINAL: Ah, so...

14 CHAIRPERSON CHIN: And especially to
15 senior veterans?

16 AMAURI ESPINAL: So, so, thank you for
17 that question, Council Member. So we do have, ah, we
18 do have partners within the Vet Connect platform that
19 do provide, ah, services specifically to seniors.
20 Um, and as far as contracts go I would, ah, allow my
21 colleague, Vincent Garcia, to expand on that, if he
22 would.

23 DIRECTOR GARCIA: Yeah, absolutely. I
24 think, um, to answer your question, um, ah,
25 Chairwoman, is that, um, the, excuse me, the
contracts that we have right now, some of them are

3 still ongoing, but the ones that have [inaudible] are
4 really through, ah, Vet Connect and Unite Us
5 platform, which really work with nonprofit providers.
6 If the question is contracts in like a monetary sense
7 with a for-profit business or something like that,
8 that deals with these communities, um, that's not
9 necessarily something that, ah, DVS is [inaudible]
10 because of our size, um, has, but I can also open the
11 floor to DFTA if they would like to discuss any of
12 the contracts they may have their focus on their
13 senior population and what those look like.

14 CHAIRPERSON CHIN: Before DFTA, ah, so
15 you use the Vet Connect, so there are how many, how
16 many nonprofit organization, um, do you contract
17 with?

18 DIRECTOR GARCIA: Yes, ma'am.

19 CHAIRPERSON CHIN: That works with the,
20 ah, the Vet Connect?

21 DIRECTOR GARCIA: Of course, yes. So
22 there are roughly a total of 114 service providers on
23 the Vet Connect platform. I think one thing that's
24 important is that all the, ah, platform providers
25 that jump onto the Vet Connect platform are not there
for monetary gain. They're really there to get the

3 connect with the constituency to provide those
4 services that they have. So of those 114, I believe
5 our last count was 31, ah, focused specifically on
6 the senior population or that is a population that
7 they specialize in.

8 CHAIRPERSON CHIN: So do you fund those,
9 the, those organizations?

10 DIRECTOR GARCIA: We do not, ma'am.
11 Those organizations have different, ah, [inaudible]
12 for funds to which they go through. We actually just
13 serve as a conduit to essentially connect the
14 individual with the provider and then handle all the
15 background information [inaudible] as well as amplify
16 those messages and the information to ensure our
17 constituency is [inaudible] vetted services
18 providers, um, ah, that assist in the nonprofit world
19 for whatever, um, services that they [inaudible].

20 COUNCILPERSON CHIN: Hmm, interesting.
21 That's, that's like a total different, total
22 different model, um, you know, DFTA has, you know,
23 senior centers and case management and, and so the
24 group that testified earlier, um, like the SAGE group
25 and [inaudible] you do not provide any funding or

3 any, ah, you don't have any contract with them for
4 the services that they do?

5 DIRECTOR GARCIA: That is correct. So
6 those, those organizations that testified previously
7 are organizations that are on the Vet Connect
8 platform, so for example if there's something that a
9 veteran is seeking that they offer, you know, we, we
10 connect the two together, um, but there are some
11 additional contracts that we have, ah, that may
12 connect to some of those providers on there, but
13 those have not been launched, um, as of yet.

14 CHAIRPERSON CHIN: So when you talked
15 about, you mentioned a couple of the organizations
16 that you work with to do outreach, like, um, all the
17 American Legion, ah, chapters. How many, in total
18 how many of those, ah, veteran organizations did you
19 reach out to?

20 DIRECTOR GARCIA: Well, I can say that, I
21 can get you the exact number. I'm happy to follow up
22 on that. But I can say that we reached out to every
23 single organization because we reached out to them
24 also to improve within the VSO micro grant program
25 that we talked about in the testimony as well as face
mask, ah, distribution. So we reached out to every

3 single partner in the five boroughs and then we
4 maintain those open communications to let them know
5 about the VSO micro grant program, but also included
6 with them our newsletter and just general outreach.
7 If they know a veteran that's in their [inaudible],
8 send them over to us, or if there's anything that we
9 can provide is them [inaudible] to do so.

10 CHAIRPERSON CHIN: So do you also
11 coordinate with, um, Department of Homeless Services?
12 Do they work with you to let you know how many, ah,
13 veterans are in their homeless facility and of how
14 many of those are seniors? Do you get those
15 statistics from them?

16 DIRECTOR GARCIA: Ah, I, I believe that
17 we most definitely can get the statistics from DHS.
18 But I could say that we do work with them in regards
19 to housing, um, homeless veterans as a whole. Um, I
20 know [inaudible] as well as some internal dialogue
21 whenever we're housing an individual and see what
22 stock is available out there for vacant units and
23 everything else like that. So there's a
24 communication [inaudible].

25 CHAIRPERSON CHIN: But do they actively
or do you actively get that information from them in

3 terms of like the homeless, you know, homeless
4 veterans, um, that are in their shelter system and
5 how [inaudible] our seniors? Do you get that report
6 from them, from them?

7 DIRECTOR GARCIA: Um, we should. I can
8 circle back to make sure specifically for the senior
9 bucket in that population. I know there are reports,
10 ah, that are provided to us that we're able to check
11 on a regular basis. I can circle back with you, um,
12 about the, the senior veteran population as a whole.
13 What I would also like to add is that EO, ah,
14 executive order 65 I already spoke about in the
15 testimony, um, and its parameters may actually be
16 able to alleviate a lot of those concerns, 'cause it
17 will require that interagency, ah, connection in
18 provide that data directly to DVS.

19 CHAIRPERSON CHIN: Yeah, and, and that's
20 what's, yeah, that's what important. So that's how,
21 because the interagency connection and working
22 together is so important, because if they let you
23 know, ah, in terms of the, the number of veterans
24 that are, I mean, these are the veterans that you can
25 help directly, ah, to make sure working together with
DHS, get them housing or the support services that

3 they need, or, or to make sure that DHS is taking
4 care of these, ah, homeless veteran, right? I mean,
5 that's why the, the, ah, interconnection, working
6 together is so important. And the same thing with
7 DFTA. Um, the, I guess the question, um, to you,
8 Assistant Commissioner, is that like DFTA have all
9 these providers, for our senior centers, for our
10 home-delivered meal program, case management. Are we
11 collecting data, ah, in terms of our, ah, the, the
12 consumers, our veteran? Are we collecting that data?

13 ASSISTANT COMMISSIONER BYERS: Ah, um, we
14 are pleased to say that about 5% of our population
15 are veterans, and those are the ones who identify as
16 veterans, because we do ask for information, but if
17 they do not identify then we wouldn't have that
18 information, but for the ones who did there's about
19 5% of our older adults who participated in, in DFTA
20 services.

21 CHAIRPERSON CHIN: So how do this group
22 of senior veteran, how do they find out services that
23 the Department of Veterans Service provide, I mean,
24 in terms of the two agency working together. I mean,
25 you got the number, um, you know who these senior,
ah, veterans are. So how do you connect them to

3 Department of Veterans Services so they know that
4 they can access all these benefits that they're
5 entitled to?

6 ASSISTANT COMMISSIONER BYERS: As I
7 mentioned earlier...

8 CHAIRPERSON CHIN: Or how is, yeah.

9 ASSISTANT COMMISSIONER BYERS: As I
10 mentioned earlier, um, during this pandemic, and it's
11 [inaudible] especially since trying to build on this
12 relationship we have had our providers meet with the
13 commissioner of DVS to tell them about our services,
14 to tell them where to get resources so that in their
15 own neighborhood where there are veterans who have a
16 need are provided to know where to reach and how to
17 reach out to access these services.

18 CHAIRPERSON CHIN: Yeah, so we, I guess
19 we're, as, ah, Chair Deutsch talked about, we would
20 like to know in terms of how many referrals are
21 provided. Like the question that Chair Deutsch asked
22 about homeless, I mean, ah, homebound veteran. Ah, I
23 think we should be able to get that number from the
24 home-delivered meal program, for example. Right?
25 That's the program that service, ah, homebound
seniors and within that population I mean we can

3 identify, um, the number of veterans with that
4 information can be given to DVS, ah, to do the
5 vaccine or provide other services that they need,
6 right? If they have this valuable information, yeah.

7 AMAURI ESPINAL: If, if, if I may. And
8 if I may, Council Member, um, you know, I appreciate
9 the question. Of course, we, we always try to gather
10 information for as many veterans as we can. Ah, but,
11 you know, I would be remiss if I didn't bring up,
12 bring up an issue is that, um, there are many
13 veterans out there that do not, ah, identify as
14 veterans or, or do not wish to identify as veterans,
15 um, for, for a number of different reasons. Um, they
16 may not know that they qualify as a veteran. Um,
17 some with, ah, less than honorable discharges may not
18 feel that they're entitled to veteran benefits, those
19 that were, um, charged or unfavorable, ah,
20 characterizations, ah, may not feel that, that
21 they're entitled to that. So it is an issue, um,
22 that, that, that we are aware of and, and thus one of
23 the main, ah, focus of this community survey is to
24 really to inform the veteran community that there are
25 services available to them, ah, regardless of length
of service, ah, service error, discharge

3 characterization, any, any demographic, ah, that a
4 veteran falls under in the City of New York there,
5 there are services available to them. So that is
6 something that, that we are actively, ah, working on,
7 um, getting, getting to the crux of.

8 CHAIRPERSON CHIN: So there's providers
9 and DFTA [inaudible] know that, I mean, are they,
10 like, information like that that's, that's given out
11 so people know that how would they qualify as a
12 veteran or as a veteran, um, no matter that these
13 services are available, 'cause DFTA also has a very,
14 ah, large caregiver program. So if the veteran might
15 not want to identify themselves, like their family
16 members or their, um, the people who, you know, take
17 care of them, that information is also valuable, in
18 terms of getting the, the caregivers, ah, to
19 understand what services are available, um, to
20 veteran.

21 ASSISTANT COMMISSIONER BYERS: Right, and
22 DFTA, DFTA provide a wide range of services and it's
23 all open to veterans and all older New Yorkers, 60 or
24 over. So our providers who are providing case
25 management, as you say, caregiver, any of those
services, they know where to access the service. So

3 if someone comes in and they identify as being a
4 veteran they will get that service. And even if
5 someone just comes in, I'm 60 and older, whatever
6 services are available in DFTA is available to that
7 person.

8 DIRECTOR GARCIA: Yeah. I, I think also
9 as a, as a [inaudible] point, ah, Chairwoman, is that
10 with EO65 one of the things that's also added is that
11 the number of city forms are out there, of intake
12 forms for, for the varying agencies, there's gonna be
13 two questions that are added, essentially figuring
14 out whether this individual served and the capacity
15 of their service. So while those forms are still
16 voluntary it gives, ah, questions to forms that may
17 not be there to really capture that veteran
18 population. So to your point what is the, the
19 individual veteran themselves feels comfortable
20 filling out this form or it's a caregiver on their
21 behalf, this is another means through which we can
22 track this information and also track that caregiver
23 status to be able to, to, you know, provide these
24 benefits and information to our constituency. But
25 EO65 is another one of those means that we're able to

3 identify this issue and hopefully [inaudible] this
4 matter to find a solution to it.

5 CHAIRPERSON CHIN: How large is DVS?

6 DIRECTOR GARCIA: As in [inaudible]?

7 CHAIRPERSON CHIN: I mean, how many, how
8 many staff do you have?

9 DIRECTOR GARCIA: I believe the total
10 staff number is 39 and we're authorized for 44. So
11 if you look at that as a number for that compared to
12 like constituency it's roughly one to I believe, um,
13 somewhere around, ah, 14,000 or so. So like one
14 employee handles about 14,000 individuals
15 [inaudible].

16 CHAIRPERSON CHIN: OK. I know that, ah,
17 Chair Deutsch, right, the council fought for this
18 agency. I remember the, the legislation that was
19 introduced to establish the department for veteran
20 services. So I think that additional resources need
21 to be, um, allocated and DFTA, I mean, ah, DVS should
22 also have resources to contract with, um, CBO service
23 provider to assist you, ah, to, to help out, out
24 veterans and our senior veterans. Um, I mean, that's
25 our fault, when we fought for this agency. So I
think that, um, that is something that we, we have

3 to, um, make sure that you have the resources, ah, to
4 do the work, um, that you do, um, because this is an
5 important population that has been ignored and we
6 gotta make sure that, ah, we have the resources to do
7 that.

8 DIRECTOR GARCIA: Yeah, absolutely, and
9 we're, we're, we're definitely grateful for that as
10 well as to, ah, you know, Chairman Deutsch's, um,
11 giving assistance and advocacy on their behalf. Um,
12 and it's something that we're, we're most definitely
13 looking into because it's something that, um, you
14 know, we'll potentially be in the future DVS and
15 something that we care about greatly and [inaudible]
16 as you know, both myself and [inaudible] our veterans
17 and, and our individuals that served, so we're, we're
18 well aware of understanding like, you know, there's
19 many of us that are out there and, and we want to
20 make sure that we touch, ah, that constituency and
21 those family members of ours.

22 CHAIRPERSON CHIN: Yeah, and I guess my
23 last question is that we talked about the, um, you
24 know, the, ah, digital divide and, ah, the lack of
25 technology, um, for the veterans and for the senior.
So going forward how, how can, ah, DVS and DFTA work

3 together to make sure that seniors, senior veterans,
4 ah, have access to computers and training so that
5 they can take advantage of all the programs that are
6 online, um, that providers like senior centers are
7 providing or to be able to sign up for programs and
8 benefits. So are you guys pushing for, um, you know,
9 tablets for, um, seniors and, and Wi-Fi, broadband?

10 AMAURI ESPINAL: I'm happy to, I'm happy
11 to hear DFTA's, ah, you know, ah, points on this.
12 But, ah, you know, we do have, ah, access for any
13 veteran or a family member into the Vet Connect
14 platform through telephone as well. Um, so they,
15 they will receive the same services, ah, as if they,
16 ah, applied online for an assistance request.

17 COUNCIL MEMBER CHIN: But helping, but
18 helping like the, the veterans, especially the
19 seniors, like to get the equipment, you know, to
20 have, to be able to have a, a tablet, an iPad that
21 they can go online and, and really participate in a
22 lot of the services that DFTA provide. Um, right?
23 The DFTA senior center, they've been doing, providing
24 a lot of great virtual program, exercise program,
25 lectures, so how are the two agency coordinating to

3 make sure that our senior veterans also can take
4 advantage of this opportunity?

5 AMAURI ESPINAL: Sure. Ah, I'd like to
6 open the floor to, to DFTA if they want to elaborate
7 on that.

8 ASSISTANT COMMISSIONER BYERS: Um, thank
9 you for that question. Um, so as you said that we
10 have a lot of program online and we have been working
11 on getting equipment, equipment that has been one of
12 the largest challenges, whether it's iPads or phone
13 or stuff. Our providers have been really innovative
14 in trying to make sure that there are programs that
15 are available both through the iPad and both on the
16 phone, and it's something that we have not given up.
17 We're pursuing all avenue to be able to acquire, um,
18 iPads or, or other equipment for our seniors. Um,
19 we, ah, we have a few things in the work that I can't
20 really, um, speak about right now. As soon as we do
21 it we'll let you know our plan. But I just want you
22 to know that it's something that we discuss on a
23 daily basis. It's something that we also reach out
24 and trying to find the resources to be able to do
25 this.

3 CHAIRPERSON CHIN: Well, I mean, we just
4 want to make sure that both agencies, um, are working
5 together on that, to make sure that our, you know,
6 older veterans, um, get the services that they need.
7 Ah, and finally I think that with, besides the iPads
8 and, ah, and broadband, um, I just think that in this
9 budget process that, um, that DVS should talk with
10 Chair Deutsch to make sure that you have adequate
11 funding and we're working together with, ah, DFTA on
12 that, and recently the mayor announced a community
13 care plan. I think within that plan we have to make
14 sure that our older veterans are included in that
15 plan because we're talking about expanding, ah, more
16 senior centers and, and more NORC program. And
17 finally, ah, the question to DFTA. When is our
18 senior centers gonna be reopening, safely? When,
19 when? There's a lot of seniors and I'm sure veteran
20 seniors, ah, are gonna be, you know, are asking us
21 that question.

22 ASSISTANT COMMISSIONER BYERS: It's a,
23 and I'm sure you've heard this before also, the
24 safety of our older New Yorkers are a top priority in
25 reopening. And any decision on reopening will be
guided by, um, the safety, the common safety of us.

3 In saying that, we are working on plans so that as
4 soon as we get the word that it's deemed safe to
5 reopen the senior centers we can then start be
6 getting onboard have our senior centers open. We
7 also got the green light to pilot a program that
8 would allow us to reengage the, the, um, providers
9 back into the meal process. So we're hoping to be
10 able to bring these things online soon and we speak
11 to DOHMH on a daily basis. We are in constant
12 contact with them and as soon as we receive that
13 guidance we will reopen the senior centers.

14 CHAIRPERSON CHIN: I mean, we have
15 reopened our schools, and restaurants are open.
16 There is really no excuse why our senior centers are
17 not open. Um, really no excuse. And seniors, you
18 know, that's their lifeline. That's where they
19 socialize with their friend, they can utilize the
20 computer, ah, get involved in the program. It will
21 help, I mean, a lot of them isolated, ah, their
22 mental wellness is a very big concern. Um, I just
23 don't understand why just dragging so long. Right,
24 Chair Deutsch? I mean, it's like everyone, I mean,
25 the providers are prepared. We just have to make
sure they have the resources. But I hope that we get

3 the center open soon before the summer while we're in
4 spring.

5 ASSISTANT COMMISSIONER BYERS: Ah, we
6 will continue to be guided by the, um, the science.
7 We also want to let you know, we have been, our
8 providers have been engaged with the seniors. We
9 have a full classes that are online where there is,
10 um, educational...

11 CHAIRPERSON CHIN: We know that. We know
12 that. They're doing great job. But we need to...

13 CHAIRPERSON DEUTSCH: If we're waiting,
14 if we're waiting for science it won't be for another
15 two years.

16 CHAIRPERSON CHIN: I know. I mean, we
17 opened our schools, right?

18 ASSISTANT COMMISSIONER BYERS: That is...
19 no one wants the centers to be reopened more than us.
20 But we have to wait for the guidance to do that.

21 CHAIRPERSON DEUTSCH: Vaccination,
22 vaccinations.

23 CHAIRPERSON CHIN: Yeah.

24 ASSISTANT COMMISSIONER BYERS: And we
25 are...

CHAIRPERSON CHIN: I mean...

3 ASSISTANT COMMISSIONER BYERS: ...doing a
4 huge outreach in order to get as many New Yorkers,
5 including the older ones, adults, we have
6 vaccinations that are going on in our NYCHA senior
7 centers and community centers. We have our CBOs also
8 are set up to be schedulers. We have vaccines set
9 aside for seniors. So we are doing a lot of
10 outreach. We have made thousands of call, our
11 providers made thousands of calls on a daily basis,
12 so we are doing the outreach and hopefully we will be
13 able to get everyone to get vaccinated. That's our
14 goal and that's what our, one of our priorities are.
15 We have been pushing that and working on a daily
16 basis to get our seniors vaccinated.

17 CHAIRPERSON CHIN: So we just hope to see
18 our center, you know, open as soon as possible. I
19 mean, the seniors, you know, want those delicious
20 lunch that they miss. Get Food is not good enough
21 [laughs]. Thank you. I'll turn it back to Council
22 Member Deutsch.

23 CHAIRPERSON DEUTSCH: Thanks very much.
24 Thanks, ah, ah, Chair Chin. I just, let me, I just
25 want to get this straight. So Department of Aging,
when you have, when you have your intake and you

3 identify the seniors you know which seniors are
4 veterans? You have that information?

5 ASSISTANT COMMISSIONER BYERS: If they,
6 yeah, if they self identify we know that.

7 CHAIRPERSON DEUTSCH: On the form, is it
8 listed on the form?

9 ASSISTANT COMMISSIONER BYERS: It's part
10 of our intake assessments on our clients.

11 CHAIRPERSON DEUTSCH: Do you know what
12 the number is of how many, how many seniors, how many
13 senior veterans you have?

14 ASSISTANT COMMISSIONER BYERS: Right now
15 about 5%, just over 5% of our seniors, um, identify
16 as veterans.

17 CHAIRPERSON DEUTSCH: Do you know what
18 number that is, like what the numbers of how many
19 people?

20 ASSISTANT COMMISSIONER BYERS: Ah, I
21 don't have that number in front of me, but we can get
22 back to you.

23 CHAIRPERSON DEUTSCH: 5% of how much, of
24 how many?
25

3 ASSISTANT COMMISSIONER BYERS: 5% of
4 about, I think it's roughly 200,000. We'll get back
5 to you on that.

6 CHAIRPERSON DEUTSCH: So approximately
7 200,000, 5% of approximately 200,000?

8 ASSISTANT COMMISSIONER BYERS: I don't
9 have that number in front of me, so I don't want to
10 commit it to that, so we'll get back to you on the
11 number and the percentage. But it's 5% of the
12 [inaudible].

13 CHAIRPERSON DEUTSCH: 5% of whatever
14 numbers you have.

15 ASSISTANT COMMISSIONER BYERS: Yes.

16 CHAIRPERSON DEUTSCH: Now does, does, ah,
17 DVS have those, have those numbers? Or you don't
18 know?

19 DIRECTOR GARCIA: Of the, the numbers
20 that, that DFTA's referring to?

21 CHAIRPERSON DEUTSCH: Yeah.

22 DIRECTOR GARCIA: Um, I believe we can,
23 um, we may do a search for [inaudible]. We would
24 defer to DFTA what those numbers...

25 CHAIRPERSON DEUTSCH: Um, no, my question
is, no, I'm not asking you for the numbers. I'm

3 asking that the 5% that DFTA just mentioned of
4 veterans, senior veterans, does DVS have that, that
5 same information, have that information of the 5%?

6 DIRECTOR GARCIA: Yes, we're, we're aware
7 that, ah, DFTA, that 5% of the population [inaudible]
8 are, are senior veterans. What we'll also have is
9 that...

10 CHAIRPERSON DEUTSCH: No, no, my question
11 is do you have that information of who those, who
12 those senior veterans are?

13 DIRECTOR GARCIA: Who those senior
14 residents directly are? No, we don't have the
15 personal information for that, for that 5% group.

16 CHAIRPERSON DEUTSCH: Why is that?
17 That's what this whole thing is about. That's my
18 question. That's what this whole hearing is about.

19 DIRECTOR GARCIA: Well, the, the issue
20 would be is, it's, a veteran, ah, I believe there may
21 be a different number of legal implications, but that
22 veteran would have to willingly disclose that
23 information to DFTA and then add in the extra...

24 CHAIRPERSON DEUTSCH: [inaudible], ah,
25 the assistant commissioner just mentioned that they
self identify. They self identify to the Department

3 of Aging if they're a veteran and she just mentioned
4 that 5% of the total number are veterans, senior
5 veterans.

6 DIRECTOR GARCIA: Hmm.

7 CHAIRPERSON DEUTSCH: So my question to
8 you is do you have those same, those names who, ah,
9 DFTA just mentioned the 5%. Does DVS have that,
10 those people in the database as part of your senior
11 veterans?

12 DIRECTOR GARCIA: No. They would,
13 there...

14 CHAIRPERSON DEUTSCH: Why not? That's...

15 DIRECTOR GARCIA: Ah, I think, to, to
16 answer your question, Chair...

17 CHAIRPERSON DEUTSCH: Now if you can tell
18 me it's a legal issue, it's five years until, more
19 than five years since DFTA was, ah, um, the agency
20 was implemented, right? It doesn't take five years
21 to ask a legal question.

22 DIRECTOR GARCIA: Sure, but I, I would, I
23 would not to steer you away, Council Member, and
24 provide something that would be incorrect.

25 CHAIRPERSON DEUTSCH: I understand.

3 DIRECTOR GARCIA: So I think [inaudible]
4 what that may be and why that rationale, that reason
5 is. But I would guess that despite the fact that
6 that veteran is providing that information to DFTA,
7 so for example if I said, hey, DFTA, you can my
8 information, I think it would be an extra step for me
9 to then say as that, as a senior veteran, hey, DFTA,
10 you can now give this information to DVS or another
11 city agency, and I think that is where the, where the
12 issue may lie.

13 CHAIRPERSON DEUTSCH: So let's talk about
14 the mayor's, the mayor's, um, the Mayor de Blasio
15 issue and Executive Order, ah, Executive Order 65, on
16 March 8, which among other things, causing city
17 agencies to increase outreach to veterans and develop
18 a veteran indicator question on all intake forms.
19 Are you familiar with that?

20 DIRECTOR GARCIA: Yes, sir.

21 CHAIRPERSON DEUTSCH: Now what happens
22 when the agencies, um, you know, increase their
23 outreach to veterans and, ah, and veterans reach out
24 to all these agencies. What happens with that
25 information?

3 DIRECTOR GARCIA: That information is
4 then maintained by that respective agency and it is
5 provided to DVS I believe no later than October 15 of
6 each year.

7 CHAIRPERSON DEUTSCH: So all that
8 information comes to DVS?

9 DIRECTOR GARCIA: Ah, well, yes. The,
10 the information will come to DVS. That data
11 [inaudible] but we'll have to...

12 CHAIRPERSON DEUTSCH: Oh, if, if all the
13 other agencies are supposed to be doing outreach to
14 develop a, ah, a veteran indicator, people to reach
15 out to these agencies and then that information goes
16 to DVS, right, so why can't DVS get that information
17 from DFTA, the 5% that they have? I mean, shouldn't
18 that be part of this whole, um, executive order, um,
19 what the purpose is of this executive order?

20 DIRECTOR GARCIA: Well, I'm, I'm more
21 than to, to verify, like, you know, those, those
22 intricate data forms and circle back with you, Chair.
23 But I, I think, once again, that that issue may come
24 about, it's just that private concern about second
25 step, you know, for veterans self identify to an
agency there's still that extra step of saying, hey,

2 you can now share my personal information with
3 another agency, or throughout the city government
4 experience. And I think that I would need to circle
5 back on what those concerns may be and then obviously
6 provide that to you and the council.

7 CHAIRPERSON DEUTSCH: OK. Can you also,
8 ah, provide it to Chair Chin when you have that
9 information?

10 DIRECTOR GARCIA: Absolutely.

11 CHAIRPERSON CHIN: Also, I just got
12 numbers from, ah, committee staff that in, ah, FY22
13 there's 243,000, ah, senior, senior participating in
14 DFTA service, and then in FY21 is 181. So you're
15 talking about 9000 seniors, ah, senior vet, this
16 year, and 12,000 last year. So those are the
17 information that DFTA could be giving to DVS for you
18 to do outreach to them, ah, to see if they got all
19 the, the services that they're entitled to.

20 DIRECTOR GARCIA: Yeah, I...

21 CHAIRPERSON DEUTSCH: That's why, um,
22 Chair Chin, that's why I always say one agency
23 doesn't know what the other agency is doing.

24 CHAIRPERSON CHIN: I mean, like, we have,
25 they have the statistics and they have the numbers,

3 so it really would be very helpful, ah, to DVS to get
4 this information and, and really reach out directly
5 to the seniors, ah, veterans.

6 AMAURI ESPINAL: Yeah, of course. You
7 know, our goal at DVS is to, is to be as transparent
8 as possible, ah, with data sharing and, and we are
9 still waiting on responses from respective agencies
10 to, to try to, um, obtain that data and work with it.

11 CHAIRPERSON DEUTSCH: All right, so
12 you'll get back to us. Um, do we know how many
13 veterans may have, ah, passed away during COVID? Do
14 we have any of those number, if, if any?

15 DIRECTOR GARCIA: Ah, we do, Chair. I,
16 what I, the, the numbers that we can provide to our
17 information is that there have been, ah, 255 veterans
18 who have passed away. But that's according to the
19 V.A.'s, ah, statistics. So that will be ones that
20 the V.A. is tracking that's publicly released.

21 CHAIRPERSON DEUTSCH: So does, DVS
22 doesn't have like a relationship with, um, the
23 medical examiner to find out how many, how many, um,
24 how many from that number was, resides here in New
25 York City?

3 DIRECTOR GARCIA: Ah, we can, we can
4 definitely circle back. We do have a relation with
5 the, with the medical examiner. If I recall
6 correctly, on the death certificates themselves
7 usually it's box 15, it signifies whether an
8 individual served in the armed forces and, obviously,
9 you know, a survivor would have to check that box off
10 for the deceased. Um, so we can definitely circle
11 back to see. But, um, you know, veterans pass away,
12 I think veterans passing away from COVID would be two
13 separate buckets that we'll have to figure out.

14 CHAIRPERSON DEUTSCH: Yeah, because I',
15 I'm, again, ah, I'd like to have, I'd like to see
16 those numbers, but also, um, I don't want you to do
17 it for me, you know. I want you to do be because DVS
18 should have those numbers and, you know, that's why I
19 keep on bringing it up. It's important to get, ah,
20 those veterans vaccinated.

21 DIRECTOR GARCIA: Yeah, absolutely, sir.
22 We, we understand that completely. And, you know,
23 we're always prepared for [inaudible] things as well.

24 CHAIRPERSON DEUTSCH: Now, um, when, when
25 a veteran reaches out to DVS, what is usually the

3 turnarounds, um, ah, the timeline of when they reach
4 out to you and when they receive services?

5 AMAURI ESPINAL: So if it's a non-
6 emergency situation, ah, which most of them are,
7 Council Member, ah, typically it takes about, ah, two
8 to three days, ah, if not sooner, for one of our
9 staff to reach out to them.

10 CHAIRPERSON DEUTSCH: What's considered
11 an emergency?

12 AMAURI ESPINAL: Ah, if they have a
13 mental health crisis.

14 CHAIRPERSON DEUTSCH: Ah, that's, ah,
15 911, yeah, that would be a 911 call.

16 AMAURI ESPINAL: Yes.

17 CHAIRPERSON DEUTSCH: Um, OK. So they,
18 OK. Now you mentioned that, ah, if someone reaches
19 out to the Department of Aging then the Department of
20 Aging would, um, reach out to DVS, um, you know, to
21 give out, to give some cases, um, to, to, for
22 veterans to receive the services. What is the, the
23 timeline when, from when a veteran, you did say that
24 you did, you do get calls from the Department of
25 Aging, so when a veteran calls, reaches out to the
Department of Aging and then comes to DVS, what is

3 the timeline of that case to, for that veteran to
4 receive services?

5 AMAURI ESPINAL: So, so, again, Council
6 Member, if it's not a, ah, an emergency situation...

7 CHAIRPERSON DEUTSCH: Emergency is 911.

8 AMAURI ESPINAL: OK, so typically, you
9 know, no more than two or three days, if not sooner.

10 CHAIRPERSON DEUTSCH: How do you know
11 that?

12 AMAURI ESPINAL: How do we know that?

13 CHAIRPERSON DEUTSCH: Yeah, how do you
14 know it's two, three days? So if someone reaches, if
15 a veteran reaches out to DVS, I mean to the
16 Department of Aging, it could sit by the Department
17 of Aging for two, three days.

18 AMAURI ESPINAL: Ah, you're saying before
19 they refer it to DVS?

20 CHAIRPERSON DEUTSCH: Yeah, right.

21 AMAURI ESPINAL: OK. That, that I don't
22 know, Council Member. Ah, I would, I would, ah,
23 defer to DFTA if they have any information on that.

24 CHAIRPERSON DEUTSCH: No, I don't to
25 defer to DFTA 'cause I want, it's DVS's job to make
sure that if someone does reach out to another agency

3 and then it gets referred to the department, to DVS,
4 so it's not DFTA's job, it would be DVS's job to make
5 sure that, that those services get expedited and that
6 a veteran doesn't have to wait one week, two weeks,
7 one month, 'cause if, if there is, ah, um, a long
8 turnaround, ah, for that veteran to receive services
9 then there has to be a better system, ah, between DVS
10 and other agencies of when they get referrals, when
11 referrals are sent over to DVS.

12 AMAURI ESPINAL: So we just have to, ah,
13 absolutely, Council Member. We strive to address
14 our, ah, you know, our assistance request as soon as
15 we receive them. Um, you know, it, it could be that
16 a phone call is made right, right after the referral
17 is made.

18 CHAIRPERSON DEUTSCH: Yeah, but...

19 AMAURI ESPINAL: Um, so unfortunately...

20 CHAIRPERSON DEUTSCH: Yeah, but shouldn't
21 we know how long it takes? Like if you receive an
22 email from, from DFTA, um, if you would just ask, OK,
23 when did you get this, and then as DVS, as an agency,
24 your job is to make life easier for the veterans,
25 right? So you need to think out of the box, right,
not just when you receive that information. I'll

3 give you an example. Someone called my office up.
4 Um, they wanted to apply for SNAP. So my staff comes
5 over to me and said we took care of it. Um, they,
6 they will be approved in 10 days from now. So I
7 asked my staff member what are they doing, did you
8 ask them what that family is doing for the next 10
9 days? Um, then she told me no. So I said, well,
10 let's make the phone call now. Sure enough, there
11 was nothing, they had no food for the next ten days.
12 So we had to provide them, ah, from, from our own
13 pockets to buy them food for those 10 days. Now, if
14 someone reaches out to the Department of Aging and
15 they make a referral to DVS, right, and emergency is
16 911, but in any other case you still want to know and
17 analyze and, and it's, it's good information to know
18 of how long that has been sitting with Department of
19 Aging or any agency, when did that get to you, and
20 then your response is usually, you said, two, three
21 days. So that information you have already. If,
22 once you get that information it's two to three days.
23 But we need to make sure that if there's an issue of
24 that information getting to DVS how can we do better
25 to make sure that a veteran doesn't have to wait a
week or two weeks depending on how long that

3 information was sitting by another agency, ah, such
4 as Department of Aging.

5 AMAURI ESPINAL: OK, yeah, I understand
6 your concern, ah, Council Member, and, and that's
7 something that, ah, you know, we would certainly like
8 to, to capture, um, moving forward, ah, because, you
9 know, it is, it can get discouraging for a veteran
10 when they're reaching out and they're kind of getting
11 bounced around. I completely understand your concern
12 and, um, that's something that we can work on moving
13 forward.

14 CHAIRPERSON DEUTSCH: So I think we're
15 gonna end right here unless, ah, Chair Chin has any
16 other questions. No. So I, I want to thank, um,
17 DVS. I want to thank Vincent, ah, Amauri, and, ah,
18 Louella, I hope I got your name right, um, ah, for
19 testifying for being here today. So I want to thank
20 you all for all the work you do on behalf of the
21 veterans and our seniors, and I want to give Margaret
22 an opportunity to thank you as well. I'm sure she
23 wants to thank everyone before we hear from our next
24 panel.

25 CHAIRPERSON CHIN: Yeah, just want to,
26 yeah, thank the, all of you for testifying and I

3 hope, ah, to build a stronger relationship between
4 DFTA and, ah, DVS to make sure that our senior and
5 especially our veteran seniors are getting the
6 services they need. So, thank you.

7 CHAIRPERSON DEUTSCH: Thank you very
8 much.

9 COMMITTEE COUNSEL: Thank you. I will
10 now call on council members. We're going to open up
11 for a brief question and answer period. So I'm going
12 to call on council members who have their hand raised
13 feature in Zoom. Um, if you have any, you know, if
14 council members have questions for the administration
15 now would be the time to raise your hand in Zoom.
16 Um, I don't see any hands raised. All right. So
17 we'll move on to our, our last panel. Um, we will
18 now turn to Ryan Graham, Leo Asen, Ruth Stein, Ryan
19 Foley, and Margaret Gambaro. I'm sorry if I said
20 your last name wrong. Um, after I call your name a
21 member of our staff will unmute you. Again, there
22 may be a few seconds of delay before you are unmute,
23 and we thank you in advance for your patience. Ah,
24 please wait for a brief moment. The Sergeant at Arms
25 will announce the start time, ah, before you begin
your testimony. Again, for council members who have

2 any questions for a particular panelist, ah, please
3 use your raise hand function in Zoom. I will call on
4 you after the panel has completed their testimony in
5 the order in which you raise your hand. OK. I would
6 like to now welcome Ryan Graham to testify. After
7 Ryan Graham I will be calling on Leo Asen, thereafter
8 Ruth Stein, followed by Ryan Foley, and last Margaret
9 Gambaro. Ah, Ryan Graham, you may begin.

10 SERGEANT AT ARMS: Time starts now.

11 COMMITTEE COUNSEL: OK, I think Ryan is
12 not on this call. Um, we may come back to him if he
13 pops up back again. So we'll just move on to our
14 next panelist, Leo Asen. Are you available? Yes, he
15 is. OK.

16 SERGEANT AT ARMS: Time starts now.

17 LEO ASEN: Good afternoon, Chairs Deutsch
18 and Chin, and members of the committees on veterans
19 and aging. My name is Leo Asen. I am a volunteer
20 and president of AARP New York, representing 750,000
21 members of the 50-plus community in New York City.
22 I'm also a veteran. Thank you for providing me with
23 the opportunity to testify today. AARP New York
24 fully supports Intro 1616, in order to improve
25 reporting of senior veterans as well as reporting of

3 social services with affordable housing programs for
4 veterans. However, for many veterans it can be hard
5 to find the right information on benefits and
6 services earned through serving in the military in
7 order to mention any other benefits depending on
8 socioeconomic status. We know accessing benefits is
9 a challenge across the board. Having the Department of
10 Veterans' Services collect data on inquiries by
11 veterans will help the city understand the actual
12 needs and demand for critical services, and help
13 connect veterans to the appropriate agencies who
14 deliver them. It's particularly important that we
15 make every effort to meet the needs of senior
16 veterans right now when older New Yorkers have
17 disproportionately suffered the effects of COVID-19.
18 As the city begins to recover, senior services are
19 crucial to address issues that have been exacerbated
20 by the pandemic, especially with regards to food
21 insecurity, social isolation, health care, and other
22 related social services. For these reasons and more,
23 AARP New York fully supports Intro 1616 in order to
24 improve reporting on senior veterans and reporting on
25 social services and affordable housing programs for

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2 veterans. Thank you for your time and for the
3 opportunity to testify today.

4 COMMITTEE COUNSEL: Thank you so much.
5 Ah, Ruth Stein, you may begin.

6 SERGEANT AT ARMS: Time starts now.

7 RUTH STEIN: Thank you. Um, I'm
8 wondering if Ryan Foley from, ah, NYLAG as well can
9 go before me, please.

10 COMMITTEE COUNSEL: I'm sorry, you want
11 me to unmute Ryan as well? You're going to, you're
12 giving testimony together? Sure.

13 RUTH STEIN: Yes, thank you.

14 COMMITTEE COUNSEL: Awesome.

15 SERGEANT AT ARMS: Time starts now.

16 RYAN FOLEY: Thank you, can you hear me?

17 Ah, Chair Deutsch, Chair Chin, council members and
18 staff, good afternoon and thank you for this
19 opportunity to speak about supporting New York City's
20 aging veteran population. My name is Ryan Foley and
21 I am the supervising attorney from the veterans'
22 practice at New York Legal Assistance Group's public
23 benefits unit and I lead NYLAG's council-funded
24 community-based legal services for veterans'
25 initiative work. I am joined today by my colleague,

3 Ruth Stein, who is a senior staff attorney in our
4 legal health units veterans' initiative, where she
5 staffs our older veterans' legal clinic. I would
6 like to briefly discuss NYLAG's work on behalf of
7 veterans, including the impact of COVID-19 before
8 handing it over to Ruth to speak about her clinic and
9 the importance of increased data reporting by the
10 Department of Veterans Services. In 2020 NYLAG
11 assisted more than 800 veterans, 53% of whom are age
12 60 or older. The issues presented by the older
13 veteran population are wide-ranging, but often
14 concern essential human needs, such as housing,
15 income, and health care, including advanced planning
16 and long-term care. COVID-19 has been devastating
17 for the older veteran population. We have
18 experienced significant shifts in terms of intake
19 flow and reported legal issues for our older
20 veterans. Early on it was a struggle to reach and
21 connect to older veterans. Our clients, who are used
22 to seeing us in the community at different veteran
23 sites, as well as the V.A., suddenly lost that
24 connection and the technology innovations we used to
25 connect with younger veterans were simply not as
effective with the older population. It took the

3 creation of new hotlines, campaigns with our partners
4 to make sure our older veterans knew we were still
5 there at their side. NYLAG is grateful to the City
6 of New York for its investment in legal services for
7 veterans, which is critical to the work we do on
8 behalf of the older veteran community, and we are
9 delighted to receive funding from New York City's
10 Department of Veterans Services to assist veterans,
11 including older veterans who require discharge
12 upgrades because they cannot access benefits due to
13 their less than honorable discharges. Still,
14 services for veterans have not been spared from
15 budget cuts and continued and expanding funding for
16 veterans' legal services...

17 SERGEANT AT ARMS: Time expired.

18 RYAN FOLEY: ...must remain a priority. I
19 would now like to turn it over to my colleague, Ruth.

20 SERGEANT AT ARMS: Time starts now.

21 RUTH STEIN: Thank you. My name is Ruth
22 Stein and I work in legal health, NYLAG's medical
23 legal partnership, which staffs legal clinics at the
24 Manhattan and Bronx V.A. medical centers. Due to the
25 instability of private funding resources we were
forced to close our older veterans' [inaudible]

3 clinic in July 2019 and have only recently been able
4 to reopen. This clinic is dedicated specifically to
5 elderly low-income V.A. patients whose physical
6 and/or mental health issues, which often stem from
7 their military service, are compounded by the impacts
8 of again. These veterans deal with complex
9 intersecting legal issues that affect our health. A
10 veteran recently diagnosed with dementia may require
11 advanced planning, but also a [inaudible] trust in
12 anticipation of home care needs and to ensure the
13 rent is paid on time. We may need to fight predatory
14 debt collections to help the veteran to afford
15 essential expenses. A veteran may require help with
16 unexpected interactions between varying government
17 benefits, such as when the onset of Social Security
18 creates a V.A. pension overpayment. Our older
19 veterans' legal clinic works at these intersections
20 in V.A. benefits, Social Security, housing, family
21 wealth and similar issues, and advanced planning,
22 utilizing the expertise of NYLAG's 300-plus
23 attorneys, paralegals, and financial counselors to
24 comprehensively address veterans' civil legal needs.
25 Over the past year, which has been especially
devastating for the vulnerable veteran community we

3 serve, this ability of maximized resources on behalf
4 of New York City veterans has never been more
5 important. Tracking inquiries by aging veterans for
6 the essential services provided by New York City from
7 housing to Medicaid to income support is crucial in
8 examining the full scope of these problems and
9 determining where needs are still not being met.
10 NYLAG fully supports Council Member Vallone's bill to
11 amend Local Law 44 of 2019, requiring data on senior
12 veterans to be included in DVS's annual report. It
13 encourages further collaboration between DVS and
14 other NYC agencies serving the veteran population.
15 It is more important than ever...

16 SERGEANT AT ARMS: Time expired.

17 RUTH STEIN: ...to ensure we are, thank
18 you.

19 CHAIRPERSON DEUTSCH: You finished
20 [inaudible] five more?

21 RUTH STEIN: Oh, no, that's OK.

22 CHAIRPERSON DEUTSCH: Yeah, go ahead.
23 You were [inaudible], you must have been a good
24 student.

25 RUTH STEIN: OK, thank you so much. Um,
it's now more important than ever to ensure that we

3 are meeting that needs of our aging veterans because
4 military-related disabilities and trauma often place
5 them in a more vulnerable position than the general
6 New York City aging population and we thank these
7 committees for highlighting this issue and for the
8 continued support of the work NYLAG does to help our
9 older veterans. Thank you for the opportunity to
10 testify today. We look forward to engaging in
11 further discussions about serving our veteran
12 community and improving their access to critical
13 legal services and medical resources. Thank you.

14 CHAIRPERSON DEUTSCH: Thank you.

15 COMMITTEE COUNSEL: Thank you so much,
16 Ruth Stein. I will now call on Margaret Gambaro.

17 SERGEANT AT ARMS: Time starts now.

18 MARGARET GAMBARO: Hello. My name is
19 Margaret Gambaro and I am the manager of Access
20 Initiatives at Intrepid Sea, Air, and Space Museum.
21 In this position I have the pleasure of planning and
22 conducting the museum's programs for former and
23 current service members and their loved ones. I do
24 want to take a moment to acknowledge the generous
25 financial and advisory support of the City Council
Committee on Veterans. I want to thank Chair Deutsch

3 and the committee members and staff for your ongoing
4 efforts to connect veterans with one another and with
5 cultural resources like the Intrepid Museum. At the
6 Intrepid Museum our mission is promote awareness and
7 understanding of history, science, and service in
8 order to honor our heroes, educate the public, and
9 inspire our youth. The museum has a long history of
10 supporting aging veterans through volunteer services
11 and supporting Intrepid's former crew member
12 association. In 2015 we began military family
13 programs which not only invited service members to
14 bring their children to the museum, but also older
15 veterans to bring their grandchildren and other
16 family members. Around the same time we began
17 Intrepid After Hours, which is for current and former
18 service members only. The program brings together
19 service members of different branches, ranks, and
20 generation in ways they may not otherwise. We
21 acknowledge that many aging veterans are not as lucky
22 to have loved ones bring them to Intrepid Museum or
23 be able to make the trip. With that in mind, we
24 began Vet Video Chats. Through Vet Video Chat we
25 virtual connect with veterans' facilities, including
retirement homes, all over the country and bring the

2 museum to them. At the beginning of the pandemic we
3 knew it was important for the Intrepid, for the
4 museum...

5 SERGEANT AT ARMS: Time expired.

6 MARGARET GAMBARO: ...our veterans'
7 programs. I have two more sentences, is that OK?

8 COMMITTEE COUNSEL: Sure, go ahead.

9 MARGARET GAMBARO: OK, cool. Um, it was
10 important for the museum to keep our veteran's
11 programs going. We immediately transitioned Intrepid
12 After Hours and Intrepid Book Club to a virtual
13 format. The Intrepid Museum continues to give aging
14 veterans a place to connect with one another and
15 service members of other generations, providing a
16 platform to come together, learn about something new,
17 and share their stories. Thank you.

18 COMMITTEE COUNSEL: Five sentences,
19 Margaret.

20 MARGARET GAMBARO: Thank you so much. I
21 actual...

22 CHAIRPERSON DEUTSCH: Yeah, I just, I
23 want to thank, I just want to make a comment. I want
24 to thank, um, the Intrepid. Every year, each year,
25 we have hundreds, unfortunately not during the

2 pandemic, we have hundreds of veterans that we have a
3 trip, um, going to the Intrepid and they enjoy a
4 beautiful day out there. So I want to give a shout-
5 out to Intrepid and if you haven't been there you
6 should really, ah, um, visit.

7 COMMITTEE COUNSEL: Thank you, Chair
8 Deutsch. We have a last panelist, Steve Palmer.
9 Steve, you may begin.

10 SERGEANT AT ARMS: Time starts now.

11 STEVE PALMER: Can you hear me? OK.

12 Good afternoon. Good afternoon, Chair Deutsch and
13 Chair Chin, and fellow City Council members. Thank
14 you for giving me the opportunity to testify. My
15 name is Steve Palmer. I'm 59 years old. I'm a
16 Marine Corps veteran. I want to speak to you today
17 about the charges I experienced at the League of
18 Active Duty and how I got the help I needed, and
19 needed to live, to live in New York, now [inaudible]
20 ADC Corps and proud to renew. I began serving my
21 country with the Marines in 1980, right after high
22 school. I quickly achieved the rank of private first
23 class once I completed boot camp. I served as a
24 demolition specialist at a base in California and did
25 as a guard at a nuclear naval weapons station in

3 South Carolina. During my term of service I was
4 promoted to sergeant and received a Marine Corps
5 conduct medallion, good conduct medallion. But after
6 six years as a marine I developed a chronic leg
7 program and had to be honorably discharged. I had
8 trouble adjusting to society. The Marine Corps was
9 all I had known for my entire adult life. I tried to
10 reenlist but my health issues made it physically
11 impossible. I was depressed, directionless, and felt
12 like I had been rejected from the only job where I
13 would fit in. I started drinking, using drugs, and
14 ended up in homeless. I spent time in and out
15 psychiatrist wards and lost touch with my family.
16 But when I learned about Project Renew, a counselor
17 in a drop-in center told me that he could help me
18 find a place and stay and provide treatment. So
19 after I started living in Project Renew Third Street
20 Men's Shelter. I had been to other shelters but the
21 facility service on Third Street was better than any
22 I had ever encountered. I received medical, medical
23 and, um, mental care there, plus substance use
24 treatment abuse program, recovery, and outpatient
25 clinics within the shelter. I started to live life
on my own terms again. While at Third Street I

3 learned about the Homeless Now program, one of the
4 Project Renew's permanent housing programs which help
5 people like on their own in apartments throughout the
6 city, while continuing to provide case managers and
7 counselors in groups through the program. I was able
8 to move out on Third Street into my own home
9 apartment in Brooklyn, and have now been striving
10 with and holding down for over 17 years. Today I'm
11 doing drug-free, alcohol-free, serve, and receive on
12 a regular basis material to help me navigate the
13 challenges I, I still take to my, I still talk to my
14 psychiatrist every day, for 24 hours, if I need her.
15 I'm now in a case where I can give back to people
16 whom I'm struggling like, who struggle like me once I
17 did, active with my church during outreach
18 [inaudible], people helping them find housing, hot
19 meals, even sometimes getting to help them. I'm also
20 able to stay connected with my daughter and family
21 and grandchildren. I am truly blessed to know that I
22 would be there for them while in [inaudible]. Take,
23 thanks Project Renewal I will be 60 years old years,
24 60 years old, I'm still going strong. I'm here to
25 support, and support into the 1616, which will help
elected officials and general public come to a deeper

3 understanding of the [inaudible] and social safety
4 that various faces veterans is needing. In addition,
5 I'd like to ask, ah, I'll ask the City Council to
6 expend funding of veterans like me to a, an active
7 life coach homeless program serve for veterans with a
8 critical source of support from Project Renewal.
9 Thank you for this opportunity to testify.

10 CHAIRPERSON DEUTSCH: Thank you. Thank
11 you, Steve. Ah, Project Renewal, what they do,
12 wonderful work, and your testimony was really, um,
13 something very, very, I was inspired by just
14 listening to what you went through and you're here
15 today testifying, um, at the hearing. So I want to
16 thank you for your service, God bless you, God bless
17 your family, and, um, and your story should be told
18 to, you know, everyone, people should know the
19 obstacles that you went through, the challenges you
20 went through as a veteran and where you are today.
21 So thank you so much. Thanks for sharing that story.
22 Thank you.

23 COMMITTEE COUNSEL: Thank you, Steve.
24 That was really impassioned testimony. I will now
25 turn it over to Chair Deutsch for questions, if you
have any, and Chair Deutsch, after your questions if

3 you want to pass it along to Chair Chin, and then
4 we'll open it up to the rest of the council members.

5 CHAIRPERSON DEUTSCH: Yeah, I think I'm
6 good. I just want to thank everyone once again, ah,
7 everyone who joined the panel, um, and, ah, God bless
8 you all. God bless the United States of America.
9 God bless our veterans and God bless all those who
10 continue to serve in our military, protecting our
11 wonderful country. And I'll give this over to Chair
12 Chin.

13 CHAIRPERSON CHIN: Thank you. I also
14 wanted to really thank this panel, ah, for your great
15 work for veterans. Um, my husband is having a music
16 lesson with a student [laughs]. Ah, I mean, I'm so
17 glad to hear the testimony from Mr. Palmer, that we
18 do have good organization out there that are helping,
19 you know, our veterans and our homeless veteran, and
20 we need more programs like that. Ah, I do have one
21 question for, um, Ryan, ah, from NYLAG. Is your
22 program, ah, legal services for veteran, is that
23 funded by, ah, the Department of Veterans Services or
24 by the City Council?

25 RYAN FOLEY: Our program is currently
funded by City Council. Um, we are working with DVS

3 currently on funding that will be specific to
4 discharge upgrades.

5 CHAIRPERSON CHIN: OK, yeah, I just
6 wanted to clarify that, because DVS earlier said that
7 they don't, ah, have any contracts with, ah,
8 organizations. So hopefully in their future they
9 will be able to have more resources, so they could,
10 you know, contract organization like yours and
11 Project Renewals and, and others to, ah, provide, ah,
12 a service. So Margaret from the Intrepid Museum, do
13 you also use the public access channel, ah, to
14 promote your program, because not everybody has, ah,
15 internet services, right, but they all have,
16 everybody have a, a television set, ah, so do you
17 utilize the public access channel?

18 MARGARET GAMBARO: Um, so far, no, we do
19 not right. Um, right now it is just, um, online.
20 But luckily we have just reopened. Um, we are open
21 Thursday through Sunday and we hope to bring back,
22 um, our in-person programming as soon as we can.

23 CHAIRPERSON DEUTSCH: Margaret, if you
24 have to go, um, if you have some constituents that
25 want to join a show, arrange an F16, if you want.

2 CHAIRPERSON CHIN: Great. I mean, my
3 grand, my maternal grandfather was a World War II
4 veteran and, I, we just fought hard to get, you
5 know, Chinese American veteran recognized, um, for
6 their contribution in World War II. So, ah,
7 definitely I'm sure the, the local American Legion
8 group would, would love to, ah, do a visit. So I
9 will [inaudible].

10 MARGARET GAMBARO: Yes, definitely.

11 CHAIRPERSON CHIN: Ah, I guess for, for,
12 if Department of DVS is still here, ah, Vincent, I
13 see that you're here, that I think that the public,
14 ah, the city's public access channel is something
15 that we really should look at utilizing to get
16 information out and also provide programming, because
17 not everybody have computers or smart phones, but
18 most likely everybody have a television set, ah, the
19 TV, so that's a resource I think we should definitely
20 utilize. Ah, but thank you again to everyone, ah,
21 for your service and for coming to testify today.
22 Thank you, Chair Deutsch.

23 CHAIRPERSON DEUTSCH: Thank you, thank
24 you. So I think we're done.

3 COMMITTEE COUNSEL: I've opened this up
4 to council question. Hold on one second, Chair,
5 sorry. I just want to see if there are any
6 questions. Um, there doesn't seem like any so I'll
7 turn it back to you.

8 CHAIRPERSON DEUTSCH: Thank you very
9 much. And this hearing is now adjourned. Thank you
10 all.

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C E R T I F I C A T E

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



Date June 24, 2021