

**TESTIMONY FROM EXECUTIVE VICE PRESIDENT FOR COMMUNITY ENGAGEMENT AND  
PARTNERSHIPS SIDEYA SHERMAN  
SENIORS IN NYCHA HOUSING  
COMMITTEE ON PUBLIC HOUSING WITH THE COMMITTEE ON AGING  
TUESDAY, OCTOBER 24, 2017 – 10:00 AM  
16<sup>TH</sup> FLOOR COMMITTEE ROOM, 250 BROADWAY, NEW YORK, NY**

Chairs Ritchie Torres and Margaret Chin, members of the Committees on Public Housing and Aging, and other distinguished members of the City Council: good morning. I am Sideya Sherman, NYCHA's Executive Vice President for Community Engagement and Partnerships. Joining me today are Deborah Goddard, Executive Vice President (EVP) for Capital Projects and Acting EVP for Real Estate; Lillian Harris, Vice President for Tenancy Administration; as well as our partners at the Department for the Aging (DFTA). Thank you for this opportunity to discuss the Authority's work to provide the nearly 80,000 seniors living in our developments across the city with safe, supportive communities and access to quality services.

The challenges confronting public housing in America today are serious and significant, from aging infrastructure to the growing deficits brought on by decades of insufficient federal funding. Mayor de Blasio and Chair Olatoye developed a long-term strategic plan, *NextGeneration NYCHA*, out of the unwavering belief that this precious affordable housing resource for 1 in 14 New Yorkers must be preserved. With NextGen as our guide, we are providing safe, clean, and connected communities for all of our residents, including the seniors who are aging in place.

NYCHA is firmly committed to our seniors and believes that all New Yorkers deserve to age in place with dignity in their homes. As the anchors of their communities, seniors contribute to the strength and vitality of their neighborhoods. But due to a loss of \$3 billion in federal operating and capital funding over the last 15 years and a \$17 billion capital need, we must rethink the way we do our work and focus on our core responsibility to be a better landlord. As part of that focus, we've moved away from directly providing social services to

connecting residents to best-in-class services from the vast network of social service providers throughout the city.

## **A Supportive Environment for Seniors**

NYCHA helps our seniors thrive in a number of ways, from initiatives that positively impact all 80,000 seniors living in our developments to those that serve only our neediest residents. If you're a senior at NYCHA, you can benefit from physical improvements to our buildings, on-site services, connections to services, and age-friendly policies.

### *Building Improvements*

As a landlord, NYCHA continues to focus on improving our buildings to enhance residents' quality of life. As part of NextGen, we updated the architectural design guidelines for the rehabilitation of our buildings, taking into account age-friendly and accessible designs, as well as DFTA's *Age-Friendly NYC* report and HPD's guidelines for senior housing. Whenever the funding is available to upgrade our buildings, these standards will better support the safety, health, and comfort of residents, including their ability to age in place gracefully.

Guided by the new architectural standards, we are investing about \$4 million to make accessibility and age-friendly improvements at 89 developments, such as more comfortable seating areas on the grounds for seniors. The new LED exterior lighting that we're installing across the city makes it easier for everyone, including our seniors, to see. We are eager to get the funding necessary to complete more of these projects in the future.

These standards apply not only to rehabilitation projects but also to the development and preservation work we're doing. The new 100 percent affordable housing we're building for seniors, which I'll discuss later in my testimony, also

incorporates age-friendly designs, such as handrails throughout corridors, grab bars and emergency pull-cords in bathrooms, and accessible apartment designs.

All the building improvements and rehabilitation we're accomplishing through the Rental Assistance Demonstration program complies with all federal and local requirements that make it easier and safer for seniors to age in place.

Thanks in part to Council Member James Vacca's common-sense suggestion, we're piloting a live-in caretaker program at Boston Road Plaza, Middletown Plaza, and Twin Parks East. This means that someone is available around the clock to assist residents. This past week, we showed off this new initiative at Boston Road Plaza.

### *Services and Programs for Seniors*

NYCHA's newly reorganized Community Engagement and Partnerships department fulfills the NextGen goal of engaging residents and connecting them to best-in-class services. By engaging key populations, including seniors, and connecting them to critical health and social services from community-based organizations and other City agencies, seniors are supported as they age in place at NYCHA. We know we cannot do this alone – this is why we streamlined the ways that we partner with local providers, through our new “Zone Model.” And this fall we are surveying seniors to further identify the programs and services they seek.

At our 78 seniors-only buildings and 12 NORCs (retirement communities that are naturally occurring), seniors and their caregivers are supported with on-site and nearby assistance. This includes one-on-one counseling as well as recreational and cultural opportunities from DFTA and many other providers. At the 10 NORC programs sponsored by DFTA, homebound and non-homebound seniors are connected to services and get help with accessing public benefits and improving their health.

For instance, the HUD-funded Senior Resident Advisor & Service Coordinator Program provides on-site assistance to seniors in need, to help them live safely and independently in their homes. Under the supervision of licensed social workers, Senior Resident Advisors organize volunteer “floor captains” who make daily contact with other seniors on their floor.

Partnership is key to serving our seniors. NYCHA works with dedicated providers across the city to meet their needs. For example, socially isolated or homebound seniors in all five boroughs receive regular home visits through Henry Street Settlement’s Senior Companion Program. Senior Companions are healthy, older adults who help their fellow seniors live independently, by helping them go shopping, go to doctors’ appointments or other activities, and obtain services such as Access-A-Ride and Meals on Wheels. Most important, perhaps, is the friendship the companions provide.

DFTA’s Grandparent Resource Center provides assistance, resources, and supportive services to seniors who are raising young relatives at the 15 NYCHA developments that are the focus of the Mayor’s Action Plan for Neighborhood Safety. Nearly one thousand seniors and their caregivers have attended workshops on community safety, mental health awareness, senior scams, nutrition, falls prevention, and child and elder abuse.

We partner with an innovative organization, Older Adults Technology Services (known as OATS), which is helping seniors use and make the most out of the latest technology. Through this partnership, seniors at Queensbridge Houses take classes on computer literacy, digital photography, financial management, social media, and health and fitness. Participants use technology not only to learn and grow but also to communicate and socialize with friends and family. This fall, we expanded the partnership to four new sites: the Jefferson, Melrose Mott Haven, Red Hook, and Stapleton senior centers. Three sites offer classes in multiple languages to meet the needs of NYCHA’s diverse population of seniors.

The 111 senior centers at NYCHA, including the 96 senior centers and senior social clubs sponsored by DFTA, provide a range of recreational, health, and cultural activities, services, and resources that enhance the lives of NYCHA residents and other seniors in the community. On any given day, seniors participate in free exercise classes, discussion groups, or blood pressure screenings. At DFTA-funded senior centers, older New Yorkers can get free meals, counseling on social services, or assistance with benefits. Regardless of where they live, every NYCHA senior has access to a program on-site or within their community.

Last week, we launched new services for seniors at our UPACA development. Presbyterian Senior Services' (PSS) Circle of Care program provides seniors a helping hand, whether it's assistance with transportation, buying and preparing food, paying bills, getting vital benefits and entitlements, doing household chores, or other daily needs. Circle of Care also provides caregivers with guidance, training resources, and interpretation services. PSS will talk more about the good work they're doing in their testimony today.

This month, we're also conducting resource fairs for seniors and hosting Domestic Violence Awareness Month events for seniors in every borough. We organize the domestic violence awareness conferences every year to inform seniors about the signs of abuse and where they can get help.

Additionally, we're providing new ways for residents to access health services. In collaboration with Harlem Health Advocacy Partners, we launched the largest-ever NYCHA-based community health worker initiative, which helps residents in five East and Central Harlem developments improve their health through health coaching and healthcare navigation services. In the past three years, nearly 400 seniors established specific health goals and received individual and group services. The program is led by the City's Department of Health and Mental

Hygiene in partnership with NYCHA, the Community Service Society, and the NYU-CUNY Prevention Research Center.

### *Policies That Support Seniors*

We want to make sure seniors have all the support they need from medical professionals and caregivers. For that reason, we will grant temporary permission for caregivers to join a household or other reasonable accommodations, based on the circumstances. Providing a transfer to a larger apartment with an extra bedroom for a caregiver can be a challenge, however, because of the limited number of vacant apartments available. The turnover rate at NYCHA is less than 2.7 percent, and the vacancy rate is even lower, at 0.6 percent. Today, there are only about 1,100 vacant apartments available for occupancy throughout the entire Authority, including about 430 two-bedrooms and 380 one-bedrooms – our most sought-after apartment sizes.

Through NYCHA's reasonable accommodation policy, seniors with disabilities can request an accommodation that will make it easier for them to age in place in their apartment. That could include a move to a lower floor or an accessible apartment or an apartment modification such as the installation of a grab bar or a roll-in shower.

### *New Affordable Housing for Seniors*

There is not enough affordable housing for seniors in our city. We're using our land to build more. The 100 percent affordable housing we're creating for seniors across the city will include senior centers and dedicated programming for seniors. Four projects are in progress that will provide more than 650 new affordable homes for seniors, at Ingersoll, Mill Brook, Betances V, and Sumner Houses. The new development at Ingersoll will feature a senior center offering a range of services from our partner Services and Advocacy for GLBT Elders (SAGE), to support residents and the larger community. We look forward to

partnering with stakeholders on more of these vital projects, for the benefit of New Yorkers today and tomorrow.

## **Conclusion**

The stories of our seniors speak for themselves. Ms. Smith, a retired home health aide, moved into Glenmore Plaza when it first opened in 1968. After her husband passed away in 1972, she continued to raise her six children at Glenmore Plaza, until they married and moved out. Now retired from careers in law, city government, and the like, her children gifted her with 21 grandchildren, 31 great-grandchildren, and five great-great-grandchildren! Ms. Smith lost both of her legs due to diabetes, limiting her ability to do the things she once enjoyed. But socializing with other seniors at the Glenmore Plaza Senior Center, and participating in its programs and events, lifts her spirits and keeps her engaged.

Mr. Williams has been a resident of Brownsville Houses for 45 years. A proud father, he raised five children there, three of whom, along with a grandchild, are now working in law enforcement. Mr. Williams has been going to the Brownsville Senior Center every day for over 35 years. He likes to keep his mind and body active through pool and table games with friends; health, exercise, and nutrition classes; and socializing over lunch.

NYCHA supports seniors in a variety of ways – from senior center programming to the dedicated services available at our seniors-only buildings, from the new housing we’re creating exclusively for seniors to our policies that facilitate assistance from caregivers. That said, with more funding we could do more. We are eager to work with the Council and other partners to identify funding for building improvements, as well as additional programs and services, that will support seniors as they age in place at NYCHA.

Thank you for the opportunity to begin a dialogue on this important topic. We are happy to answer any questions you may have.

**New York City Council  
Committee on Public Housing jointly with the Committee on Aging  
Oversight Hearing: Seniors in NYCHA Housing  
October 24, 2017, 10 a.m.  
The Bronx Defenders  
Runa Rajagopal, Managing Director, Civil Action Practice**

My name is Runa Rajagopal. I am the Managing Director of the Civil Action Practice at The Bronx Defenders. The Bronx Defenders thanks the Committees for the opportunity to submit comments and testify regarding the permanent addition of family members to a New York City Housing Authority household and impediments to succession in public housing.

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I want to introduce you to Aida Reyes. Aida just turned 74 years old. Aida is a grandmother. She is a cancer survivor. She has lived in the Bronx for over 40 years. And in a matter of months, if NYCHA gets its way, **Aida will be homeless.**

Let me step back to give you a little more background about **Aida's story.**

**Aida used to live in Gun Hill Houses, near her mother Aurea, and her sister Alice, in zip code 10467**

Aida's mother, Aurea, lived in Gun Hill Houses. She moved there in the early 80's. Her sister Alice also lived down the hall from Aurea. In 1992, Aida moved into an apartment in that very same development, where she lived for approximately fifteen years. Around 2008, Aida needed a change in life- she gave up her NYCHA apartment and moved to Florida. However, she only lived there for a short amount of time before she decided the move was a mistake and that she missed New York too much. She needed to be near her family. By 2010, she was back in the Bronx.

**Aida's aging and disabled mother was in need of 24 hour live-in care**

Meanwhile, as Aurea grew older, her medical and mental health deteriorated. By 90, Aurea was diagnosed with dementia among other severe conditions and Alice had to become her power of attorney. At the request of Aurea and Alice, Aida moved close to her mother's apartment and would often stay over and help her mother with her daily activities. It was not long before Aurea begged Aida to live with her. She needed the help and wanted her daughters to be with her constantly.



**NYCHA staff misinformed Alice regarding the process of how to permanently add Aida to Aurea's household and failed to timely give her the necessary form**

The decision to move in with her mother was not an easy one for Aida. Her mother was stubborn. They fought often. But ultimately, when Aurea insisted, Aida decided to give up her place and to move in with her mother who needed her. Alice, as Aurea's power of attorney, called the management office to get information about how to add Aida to her mother's lease. She was advised that all she had to do was wait for the annual recertification and add Aida. To everyone's detriment, Alice relied on this misinformation and waited several months. When the annual recertification arrived, Alice, Aurea and Aida worked on adding Aida's information and name. This was submitted to the Gun Hill management office and Aida and her family thought the matter was settled.

To their surprise, weeks later, a housing assistant called Alice and told her that Aurea and Aida had to submit a different application. She gave Alice documents to apply for a new NYCHA apartment and instructed Aida to fill them out. Alice reviewed the paperwork and went back to the management office, confused. Surely, her sister did not have to fill out a NYCHA application for a new apartment? Was there not a different process for family members who wanted to live with an inform parent? After Alice sought clarification, nearly 11 months after the initial request, the housing assistant gave her NYCHA form 040.012 permanent permission request for a family member. It was immediately submitted.

**Aurea passed away and NYCHA attempted to harass and bully Aida out of the apartment**

Just two weeks after the form was submitted, just shy of 93, Aurea passed away. While processing and grieving the loss of their mother, the NYCHA management called Aida and Alice in to the office to advise them there was a problem with the form. Upon learning of Aurea's death, the staff stated Aida could not get a lease. By the end of the year, they demanded that Aida surrender the keys and move out. Their response could not have been more callous or more of a violation of the law.

**At all grievance levels, NYCHA rubber stamped their denial of Aida as a remaining family member and actively sought to deprive Aida of due process and to evict her**

After a failed attempt to evict her in housing court, NYCHA finally began to "review" Aida's request to get a lease in her name. At the management level and borough level they rubber stamped the denial without any acknowledgement of NYCHA's misinformation or misconduct. They then brought a petition to evict her in housing court. The NYCHA attorneys refused to give her a third step grievance before a hearing officer. Aida and her family went from law office to law office and elected official's office to elected official's office trying to get help, to no avail.

### **Retaining The Bronx Defenders and the ongoing fight for a lease**

Aida went to her City Councilmember in District 12, Andy King, who contacted The Bronx Defenders and asked us to advise Aida. As a courtesy, I went to court with her and her family and observed what I know to be true about NYCHA. I observed the many levels of resistance: the refusal to allow Aida to see her mother's tenant file or retrieve copies of documents submitted, the denial of Aida's administrative third step grievance, hostility from NYCHA staff at every level and a failure to be accountable for their own mishaps. It became clear that Aida needed help in navigating these systems and an advocate by her side. She retained The Bronx Defenders.

While we were able to successfully advocate for a third step grievance and have thus far been able to adjourn the pending housing court proceeding, Aida's denial was rubber stamped once again by NYCHA's "impartial" hearing officer<sup>1</sup>. We have filed an appeal in the Supreme Court which is currently pending. The reality is that this is an uphill battle and the case law does not weigh in favor NYCHA tenants or their family members. In a matter of months, Aida could be evicted.

### **NYCHA's mantra: "do as we say tenants, not as we do." And Courts have consistently sanctioned this double standard**

NYCHA's failure to follow its own procedures, refusal to give necessary forms and the dissemination of misinformation is particularly troubling because, as in the case of Aida and Aurea, tenants who request that family members be added to their household do so because they are elderly, physically disabled, or otherwise infirm, and need someone in the house to help them live and survive. When NYCHA botches a request to add a family member to the household, the effects can be devastating and the harm irreparable. Tenants can be deprived of the much-needed care of a family member. Family members who move in to provide care can find themselves homeless if the tenant dies and NYCHA refuses to recognize them as a remaining family member.

However, NYCHA makes no allowances if a NYCHA tenant or family makes one misstep, does not submit a form, fails to provide documentation or deviates from the rules in any way. NYCHA tenants are held to the highest of standards and punished greatly when they make even one mistake. What's worst is that Courts rarely hold NYCHA accountable for this grossly unjust double standard, which allows this inequity to continue with impunity.

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<sup>1</sup> All of NYCHA's Hearing Officers are career NYCHA employees who formerly prosecuted tenants in administrative proceedings or summary eviction proceedings.

Aida and her family, to the best of their ability and at the misdirection of NYCHA, made several attempts to add her to her mother's household. In addition to their efforts, Aida was formerly a tenant in good standing at this very same development. She pays her rent on time as an occupant. She is elderly. She is disabled. She is otherwise eligible for public housing. She lives in zip code 10467, which is a priority zip code under universal access to counsel due to it having the highest rate of shelter entry in the Bronx. But none of these facts seem to matter to NYCHA who refuse to allow her to stay.

### **Recommendations: A call for transparency and accountability**

Unfortunately, Aida's story is not unique. The rules regarding adding family members and succession are highly specific and not well-known or understood by NYCHA tenants or their family members. One cannot help but wonder whether this is by design. Tenants and their family members cannot be expected to be aware of rules without access to them and without receiving accurate explanations about them from NYCHA staff. Many tenants who are older or impaired require assistance and accommodations to understand these procedures and to navigate them successfully.

The Bronx Defenders puts forth the following recommendations for your consideration:

- Make NYCHA rules, including its Management Manual, General Memoranda and forms publicly accessible online and physically available in the public areas of each management office.
- NYCHA management office staff must affirmatively explain rules and processes to tenants and their family members. They should make home visits where necessary.
- Reasonable Accommodations for elderly and disabled tenants and their family members must affirmatively be made to assist families.
- NYCHA should hold its staff accountable for misconduct and misinformation and take remedial steps where tenants and their family members do not meet the remaining family requirements due to NYCHA's actions or inactions.
- NYCHA must change its culture of bullying, confusing and misleading tenants. They need to focus on their Management office staff and educate them as to their role and responsibility in supporting tenants. The role of NYCHA staff should not just be about the arbitrary exertion of power and control over tenants.
- As universal access to counsel rolls out, lawyers and advocates should be appointed early in the administrative process (when a tenant seeks to add a family member), rather than at the housing court level, to help tenants and family members avail themselves of their rights.

As the country's largest landlord that is purportedly not in the business of eviction, NYCHA has to do better to support its tenants and their family members to avail themselves of their rights or, in the very least, not actively obfuscate and violate them.

We look forward to working with the City Council to finding solutions to this problem and I thank you for giving Aida Reyes and The Bronx Defenders this opportunity to testify.

Sincerely,

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#### **About The Bronx Defenders and The Civil Action Practice**

Founded in 1997, our organization is nationally renowned for providing holistic and comprehensive legal services, which include civil, criminal, family, immigration defense, social services and community programs to approximately 35,000 low-income families in the Bronx each year. The Civil Action Practice is designed to defend against the devastating civil penalties that arise out of a person's arrest or the removal of children. Additionally, we represent community members facing evictions and have worked with countless public housing residents and their families to help them defend their right to safe and affordable public housing.



**October 24, 2017**

New York City Council Committee on Aging jointly  
with the Committee on Public Housing  
Remarks on behalf of JASA  
by Molly Krakowski, Director of Legislative Affairs

Good morning. My name is Molly Krakowski and I am the Director of Legislative Affairs at JASA. I would like to thank Council Member Chin, and the members of the Aging Committee, and Council Member Torres, and members of the Public Housing Committee for hosting today's joint hearing on seniors in NYCHA.

JASA's mission is to sustain and enrich the lives of aging New Yorkers in their communities, enabling them to connect with the people and places that give them meaning. JASA's programming promotes independence, safety, wellness, community participation, and an enhanced quality of life for New York City's older adults. Our varied programs provide a continuum of care to over 40,000 clients annually.

JASA has a long standing productive partnership (more than 30 years) with the New York City Housing Authority, NYCHA. We currently have five (5) DFTA contracted senior centers located in NYCHA sites: Throggs Neck, Sue Ginsburg, Bay Eden, Williamsburg, and Cooper Park. In addition, JASA provides NORC Supportive Services Programs at the Bushwick/Hylan and Surfside/O'Dwyer Gardens developments. Many other NYCHA residents avail themselves of JASA case management, elder abuse prevention, caregiver support and other services. JASA is pleased to have the opportunity to speak to the positive relationship we have with NYCHA, as well as some of the challenges we face in hosting programs in NYCHA developments as well as those that our clients experience as tenants.

Co-locating senior centers and programs within NYCHA housing makes sense, and serves a great need within the community. Several NYCHA sites are NORCs, Naturally Occurring Retirement Communities where people moved in when they were young, raised their families and have now grown old. In 2013, NYCHA proactively sought out a proposer to develop a NORC program at the Bushwick Hylan development. As part of the process of proposing a new program at the site, and at JASA's request, NYCHA facilitated engagement between JASA and the resident leaders. This promoted resident

buy-in and enabled JASA to create a responsive application. With NYCHA's support, JASA successfully secured funding from DFTA for this program.

Most recently, NYCHA supported JASA's application to New York State Office for Aging; during a competitive RFP process, JASA secured new state funding for the program. The Bushwick Hylan NORC program is one of only three new NORC programs funded by NYSOFA. JASA was also able to secure ongoing NYSOFA funding for the Coney Island Active Aging NORC program (serving the Surfside and O'Dwyer Gardens developments). NYCHA's Performance Tracking and Analytics Department was very helpful in providing information for these applications. It is clear that NYCHA recognizes the importance of enhancing services to its growing older adult tenant population. The elderly are among the most vulnerable of NYCHA residents. Conversely, there are many older NYCHA tenants whose lifetime of experience may be supported and directed toward resolving community concerns.

JASA's successful efforts to secure philanthropic funding for the programs located in NYCHA developments are supported by the ability to speak to the meaningful partnership. For example, JASA has implemented a new initiative, the Community Health Navigator Program in Williamsburg and Bushwick, communities with disproportionately high rates of diabetes, hypertension, and preventable hospitalizations. Community Health Navigators (CHN), community residents aged 65+ who have been trained and have learned to manage chronic health conditions, coach and help their neighbors to overcome barriers and access medical services, social care and support. Community Health Navigators help to deliver the following programs: Chronic Disease Self-Management Group Program (in English and Spanish), Diabetes Self-Management Group Program (in English and Spanish), Healthy Eating Peer Coaching, Monitoring/Hypoglycemia Peer Coaching, Peer-Led Blood Pressure Screenings and a FIT Club programs to control blood pressure and increase physical activity. The project has delivered on its original objectives to (a) motivate healthy behaviors, (b) improve diabetes (and hypertension) self-management, and (c) reduce the rates of preventable hospitalization for diabetes and related comorbidities. To date, we have trained over 200 participants in the above programs and many of them have been from the Bushwick/Hylan NORC. Based on this success, JASA is seeking to expand the initiative to the Williamsburg and Cooper Park Senior Centers, other NYCHA sites.

In another initiative in FY 16, JASA implemented the United Hospital Fund HIPI project at the Coney Island Active Aging NORC program. CIAA NORC identified strategies to help residents improve their blood pressure. Results of this project were reported at the

NYS Health Foundation Population Health Summit at the New York Academy of Medicine in 2016.

NYCHA has proven a strong and supportive partner in both of these NORC programs, attending community events, and providing support as necessary to help JASA secure additional funding and services. There is a similar response to partnering with JASA at the senior centers within NYCHA sites.

Unfortunately, there are challenges that interfere with NYCHA's commitment to, and efforts on behalf of its senior residents. Many relate to an aging infrastructure across the NYCHA housing portfolio and limited maintenance capacity. This negatively impacts program operations as well as individual tenants. Submitting tickets for building maintenance is routine: doors need fixing, heavy rains flood program space, lighting needs replacement, and other common issues. Additional concerns involve the lack of building security, poor/out of service elevators, and long wait times for tickets to be resolved. These are serious concerns that create significant obstacles for older adults to maintain safe and fulfilling aging in place. We would welcome an opportunity to participate in an advisory council type structure that engages NYCHA and its community partners or an ombudsman person at NYCHA in order to prioritize these issues and identify new strategies to maximize resources in correcting them.

JASA recognizes that with a limited budget NYCHA faces constraints. We are hopeful that the RFP initiative under NextGeneration NYCHA is a positive opportunity to improve the facilities at eight sites and enhance New York City's range of affordable housing as well as the community programs offered at these sites. New initiatives that identify new funding sources are welcome.

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**Testimony of United Neighborhood Houses  
Before the New York City Council  
Committee on Aging  
Committee on Public Housing**

**Submitted by Nora Moran, Senior Policy Analyst  
*Oversight Hearing: Seniors in NYCHA Housing***

**Honorable Margaret Chin, Chair, Committee on Aging  
Honorable Ritchie Torres, Chair, Committee on Public Housing**

**October 24<sup>th</sup>, 2017**

Thank you for convening today's hearing. My name is Nora Moran, and I am a Senior Policy Analyst at United Neighborhood Houses of New York (UNH). UNH is the federation of New York City's settlement houses that collectively benefit over 750,000 New Yorkers annually—from infancy through old age—with services at over 600 sites throughout the city.

UNH members provide a wide variety of services to over 80,000 older New Yorkers each year by operating senior centers, Naturally Occurring Retirement Communities (NORCs), home delivered meal programs, case management programs, and social adult day programs, often funded by New York City's Department for the Aging (DFTA). UNH and its settlement house members employ the philosophy that older adults are valued members of our neighborhoods, whose wisdom and experience are important to the fabric of our communities. UNH believes that senior centers, NORCs, and case management programs, among others, are in themselves strong interventions that promote health and wellness, address social isolation, and provide meaningful opportunities for participants to be involved in broader community life.

UNH members also have a deep commitment to public housing, and to a model of public housing that supports comprehensive community-based services for its residents. More than half of UNH member organizations operate programs on sites located in New York City Housing Authority (NYCHA) developments, and several are located entirely within NYCHA developments. Settlement houses offer public housing residents a broad array of services, including early childhood education, after-school programming, adult literacy classes, and more.

This testimony will focus on the supportive services for older adults living in public housing, as well as capital needs in NYCHA community spaces.

**Older Adult Residents in Public Housing**

There are a significant number of older adults living in NYCHA developments. As of 2017, 38 percent of households within NYCHA developments are headed by an individual age 62 or older, and 19.9



percent of the NYCHA population is 62 or older.<sup>1</sup> Projections indicate that the number of older adults age 65 and over living in NYCHA developments will outpace the rest of NYC's older adult population, because these individuals are more likely to stay in their residences instead of moving into assisted living facilities or outside of New York City.<sup>2</sup> While their residency in NYCHA ensures limits on their rent burden, poverty still remains a challenge for older residents of NYCHA. As of 2011, almost half of older NYCHA residents had incomes below the federal poverty level.<sup>3</sup> Ensuring that older NYCHA residents also have access to supportive services and assistance with benefits is key to combating the challenges that individuals in poverty face, particularly health concerns.

Many NYCHA developments are home to supportive services to older adults, including senior centers and Naturally Occurring Retirement Communities (NORCs), which serve older residents living in those developments. These programs are vital to the health and wellbeing of older NYCHA residents, and are utilized regularly. A 2014 study indicates that approximately one in three older NYCHA residents attends senior centers, and one in five attends regularly. Additionally, research has shown that older NYCHA residents who live alone and who are at risk for depression are more likely to be senior center users, indicating that senior centers have been somewhat successful at reaching potentially isolated residents.<sup>4</sup> Whether a senior center is located within a NYCHA development or outside of one, it is clear that senior centers play a significant role in the lives of older NYCHA residents. Additionally, 13 NYCHA developments are home to Naturally Occurring Retirement Community- Supportive Service Programs. NORC-SSPs are a valuable model for coordinating health and social services for older adults, and NORC-SSPs in NYCHA developments are important to ensuring that older NYCHA residents can age in their own homes rather than in a nursing home.

Of particular concern to UNH are the results of the New York State Office for the Aging (NYSOFA) Request for Applications (RFA) for their Naturally Occurring Retirement Community- Supportive Services Program (NORC-SSP). NYSOFA recently awarded contracts under its NORC procurement and 3 NORC-SSPs that operate in NYCHA developments were not awarded a continuing contract. These developments are home to a significant number of older adults who still need the health and social services that a NORC-SSP offers. DFTA is already working with these NORC-SSP providers to understand the impact of lost funding, and should continue to do so to ensure continuity of services for these older residents.

## **Recommendations**

UNH believes that NYCHA provides a crucial lifeline to older New Yorkers who might otherwise struggle to afford market-rate rents in New York City, and that DFTA's core services play a key role in supporting older adults to age in place. UNH recommends that the City take the following steps to support older adults living in NYCHA developments:

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<sup>1</sup> NYCHA 2017 Fact Sheet: <https://www1.nyc.gov/assets/nycha/downloads/pdf/factsheet.pdf>

<sup>2</sup> Health of Older Adults in New York City Public Housing: <http://www1.nyc.gov/assets/nycha/downloads/pdf/senior-report-nycha.pdf>

<sup>3</sup> Health of Older Adults in New York City Public Housing: <http://www1.nyc.gov/assets/nycha/downloads/pdf/senior-report-nycha.pdf>

<sup>4</sup> Predictors of Senior Center Use among Older Adults in New York City Public Housing  
<https://www.ncbi.nlm.nih.gov/pmc/articles/PMC4242850/>



- **Ensure continued access to services for older adults living in NYCHA developments**—There are already a significant number of programs for older adults living in NYCHA developments, and the City should continue its support for these programs, and consider expansion, particularly to NYCHA developments that do not have many other senior programs in or near the development. Where possible, DFTA procurements should also take into account the unique issues faced by older NYCHA residents and account for them.
- **Examine and address capital challenges in public spaces in NYCHA**—Unmet capital needs in NYCHA community space is one of the most pressing issues facing New York City's nonprofit sector. Neither NYCHA nor DFTA are able to consistently provide the funding needed to maintain the aging infrastructure in public housing. As such, providers wait more than a year for severe issues such as leaking pipes, cracked ceilings and open sewage to be addressed. Last year, UNH collected information about hundreds of open tickets for basic repairs at senior centers and other community services in NYCHA. NYCHA was unable to address many of the problems providers identified. Moreover, there is often confusion as to whether DFTA, NYCHA or another agency holds responsibility for the capital needs. These unmet needs not only create uncomfortable or even unsafe conditions for older adults but raise compliance issues, particularly with regard to the rules set under the Americans with Disabilities Act (ADA) Accessible Design standards. For example, the senior center located in the Amsterdam Houses, operated by Lincoln Square Neighborhood Center, has bathrooms that are not wheelchair-accessible. The building was built before the passage of the Americans with Disabilities Act, and there has been no capital funding to make needed repairs to ensure accessibility. As a result, older adults who use wheelchairs and attend the senior center require assistance from aides to simply use the bathroom. NYCHA should analyze which senior centers and senior-used communal facilities are not ADA-compliant, and examine solutions to make the necessarily capital repairs. Furthermore, both NYCHA and DFTA should work collaboratively to ensure that service providers in public housing have space that is safe and comfortable for older adults, complies with all standards including ADA Design Standards and is kept in good repair.

Thank you for your time. For questions, I can be contacted at 917-484-9322 or [nmoran@unhny.org](mailto:nmoran@unhny.org).

**TESTIMONY OF LEGAL SERVICES NYC  
WITH RESPECT TO “Seniors in NYCHA Housing”**

**New York City Council  
Committee on Public Housing & Committee on Aging  
October 24, 2017**

Legal Services NYC (LSNYC) welcomes the opportunity to give testimony before the New York City Committee on Public Housing and Committee on Aging. LSNYC urges the City Council to inquire into NYCHA’s policies and practices governing additions to tenant households and reasonable accommodations for tenants, which fail to consider the needs of its senior and disabled residents and violate federal, state and local human and civil rights laws.

Legal Services NYC, through its 18 community-based offices and numerous outreach sites located throughout the five boroughs, provides expert legal assistance to low income New Yorkers. Historically, LSNYC’s key priority areas have included housing, government benefits and family law. In recent years, we have vastly expanded services in areas of critical need to our client base, including consumer issues and foreclosure, unemployment, language access, disability, education, immigration and bankruptcy. Legal Services NYC has litigated numerous cases related to public housing.

NYCHA’s procedures stipulate that no one may be added to an existing tenant’s household, unless the tenant requests permission in writing and the development’s management grants it. Tenants may either request to have an additional person join their household permanently or on a temporary basis. Permission to add a person permanently is only granted when there is a familial relationship

**Legal Support Unit**

40 Worth Street, Suite 606, New York, NY 10013

Phone: 646-442-3610 Fax: 212-966-9571 [www.LSU.LegalServicesNYC.org](http://www.LSU.LegalServicesNYC.org)

**Raun J. Rasmussen**, Chief of Litigation & Advocacy

between the tenant and the additional person and the proposed addition will not cause overcrowding under NYCHA's occupancy standards. Unlike requests for permanent additions, requests for temporary residence do not require a familial relationship and permission may be granted even if the addition results in overcrowding. However, tenants cannot request to transfer to a larger apartment to alleviate the consequent overcrowding. Therefore, senior tenants that reside in one bedroom apartments and require the assistance of a live-in aid or a relative caregiver can only request temporary permission to add their caregivers to their households; and if approved, they will be required to reside in conditions that NYCHA itself deems to be overcrowded. Since temporary permission may be renewed every year, disabled tenants and their caregivers are expected to live in overcrowded conditions indefinitely.

Through its policies and practices, NYCHA violates the "reasonable accommodation" provision of the Fair Housing Act that requires landlords to waive or modify "traditional rules or practices if necessary to permit a person with [disabilities] an equal opportunity to use and enjoy a dwelling." *Shapiro v. Cadman Towers, Inc.*, 51 F.3d 328,333 (2d Cir. 1995). Moreover, NYCHA disregards its own reasonable accommodation policy and HUD's directives, which state that landlords are required to engage in a federally mandated "interactive process" to explore possible accommodations, because neither NYCHA's Procedures Manual nor its Management Manual include provisions for the approval of household additions as reasonable accommodations or for an "interactive process."

NYCHA's failure to accommodate the needs of seniors requiring live-in caregiving has given rise to repeated litigation involving our organization. For instance, in July of this year Legal Services NYC signed an amicus brief along with elected officials and other advocates that was filed with the Court of Appeals in support of the Petitioner-Respondent in the matter of *Aponte v. Olatoye*. In that grievance, NYCHA denied "remaining family member" status to Petitioner-Respondent because he had moved in with his mother, a senior tenant with dementia, without management's written authorization. NYCHA had previously denied Petitioner-Respondent's mother permission to add him to her household because of overcrowding concerns instead of exploring other options that could have accommodated her

disability, for example transferring her and her son to a larger unit. Legal Services NYC is also currently representing relatives of deceased NYCHA tenants in grievances where, as in *Aponte*, NYCHA violated disabilities laws by denying tenants permission to add their family caregivers to their households. In one case, NYCHA did not allow the tenant's son to move in with her, even though the tenant had dementia and would leave her apartment in the middle of the night and could not remember how to get back to her apartment in several occasions. The circumstances forced the tenant's son to move in with his mother and the family lived in overcrowded conditions for seven years while facing the risk of eviction. In another case, the tenant's caregiver son made several attempts on behalf of his mother to request permission to move in with her but was denied permission several times because management required that the tenant request permission herself, despite knowing that she was disabled and needed her son to help her with the process.

NYCHA plays an important role in bridging the affordable housing gap for seniors because it provides housing to a significant low-income aging population. Thus, it is critical that NYCHA act as a policy leader in this area instead of denying reasonable accommodation requests that would permit seniors to age in place with family caregivers. Furthermore, policies that allow seniors to age at home can result in financial savings to both individuals and the government programs that pay the cost of nursing facilities and other long-term care.

For all the above reasons we urge the committees to inquire into NYCHA's practices and procedures involving reasonable accommodation of seniors before hundreds of other public housing seniors are denied their rights and their remaining family members face homelessness. We thank the City Council for addressing these important issues.

Respectfully submitted,

Andrea Tan, Esq.  
Legal Services NYC- Brooklyn Branch  
105 Court Street, 4<sup>th</sup> Floor  
Brooklyn, New York 11201  
(718) 233-6383

October 24, 2017

My name is Madelyn Innocent and I am a long time resident of Douglass Houses. Full disclosure: I am a member of Community Board 7 and Chair of CB7 Taskforce on Public Housing. However, I am here speaking on my own behalf and on behalf of all the seniors in Public Housing, especially in Douglass Houses.

I am 61 years old, soon to become a "full-fledged senior citizen." I am worried about housing for seniors and ~~that they~~<sup>we</sup> will be pushed out of a neighborhood that ~~they~~<sup>we</sup> feel safe in and cared for by their neighbors. I've been on physical disability since 2002. Sometimes my physical disabilities stop me in my tracks from doing the things that I did as an adolescent. Thank God my mind is still functioning so I am able to come to hearings like this one today, and many in the past. It was difficult for me to come here today because of my physical pains and the older I am getting my pains worsens, but I keep trucking along and I try to not complain too much. But, I feel I am my best advocate as an upcoming senior to speak on my own behalf as well as others in my predicament that feel they don't have an voice.

Telling you my personal information is to tell you we in Douglass Houses look out for the Seniors, because maybe their families can't administer to all there needs during the day or at night or many seniors don't have any family or maybe they are estranged from their families living alone. There are all sorts of reasons why we and you related to Public Housing should help our Seniors and not threaten them to downsize or if they don't they will be evicted that was told to me from a few seniors and or move out of their neighborhood where people are looking out for them by the community. How cruel is that and inhumane? I want to tell you about a few seniors that I've come in contact everyday. One senior told me that management sent him a letter that he would have to downsize and if he didn't accept the apartment that they showed him he would be evicted. Another senior roams the street at night with her scooter and we try to tell her she shouldn't be out certain hours of the night by herself and that she should run her errands when her home attendant is with her, but we all make sure this senior gets home safely. Here is another senior, who goes out early in the morning, but he could barely walk and his neighbors help him to the store to get a cup coffee as he has done for years. These are people who are in a neighborhood who care about them and will look out for them. Also their Doctor's are in the neighborhood, and churches with people who will look out for them. These are seniors who have had a routine life the entire time of living a particular development.

Lastly it is time for NYCHA to step up a pay tribute to the seniors who paid there taxes, kept in <sup>sustainabili</sup> compliance with NYCHA rules as well as the regulations and have been able to have sustainably with furnishing NYCHA with steady and guaranteed income from Social Security with the exception if they die. They have been in Public Housing as loyal residents by abiding by everything NYCHA has asked of them including myself. Seniors are not throw a ways, but people who got older and not able to care for themselves. Do the right thing and build senior housing or you will be doing an injustice to people who have worked most of their lives and raised their children along with the responsibility of maintaining there apartments in Public Housing. You all should commend and revere them and not throw them away like last years garbage.

Do the right thing NYCHA and stop frightening our seniors. Community is very important to ~~their~~<sup>the</sup> lives, health and safety of the seniors.

Madelyn Innocent  
Resident of Douglass Houses



**Testimony for Guo Qiang He**  
**New York City Council Oversight Hearing: Senior in NYCHA Housing**  
**October 24th, 2017**

Hello Council Members:

I, Guo Qiang He, am a tenant who lives at 41-05 10th St — Queensbridge South Houses under the New York City Housing Authority (NYCHA). In 2015, I have requested the Queensbridge South management office for a transfer to Flushing because it is in closer proximity for my medical visits. (My primary care physicians and facilities are in Flushing. The NYCHA Flushing office I went to, has informed that I fulfill the requirements for transfer.) However the Queensbridge South office manager told me I did not appear sick and ignored my request. Under these circumstances, I submitted a new NYCHA application online in May 2015 (Case number: 11289647). I was informed that besides disabilities and domestic violence, that the application process will take a total of 2 years.

In February this year, I have asked for helped to call the NYCHA Customer Contact Center about the status of my application. I was told that I will have to wait till May 2017 to receive a response. In July, I asked again but I was informed that my case has expired and that I will need to start over in the process.

In the present, my health has continued to deteriorate. My kidney disease is reaching an end stage and my life can be endangered at any time. I hope that related departments can offer their assistance and help me get through these difficult times. Thank you.

Mr. Guo Qiang He  
10/22/2017

各位委员你们好:

本人因残障在2015向皇后府管外提出要求为治病提供方便(因李德和专科医生却在法拉威.法拉威那边一政府机构认为我病情不符合申请条件).但皇后府南边20个经理认为我不像患病的人不予理睬.无奈之下.本人在2015年5月向政府房屋局网站提出申请(案件号码为:11289647)报告之除了残障和家庭暴力.需等待两年.

今年二月.我曾向房屋局服务中心查询申请状态.答复是再五月才有答复.等到七月再问.说我一事已过期了.需重新排队人.现在我的病情日益恶化.肾衰竭至晚期.随时有生命危险.希望有关单位根据我一情况给我人道援助.渡过难关.

Guo Qiang He

Guo Qiang He

10/22/2017



# CHINATOWN KIDNEY CARE FLUSHING

**Elizabeth Liang MD**

**39-16 Prince Street. Suite 355 Flushing NY 11354**

**TEL: (718)886-6882 Fax: (718)886-7883**

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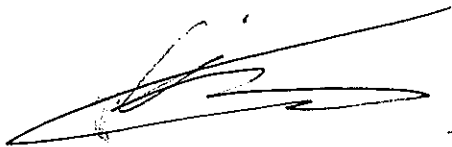
Date: October 6<sup>th</sup>, 2017

To Whom It May Concern:

This letter is to attest that He, Guoqiang (DOB 2/3/1956) is a patient at my practice, Chinatown Kidney Care, PLLC. He has severe diabetes kidney disease, hypertension, hyperlipidemia, insulin dependent diabetes and will likely need dialysis in near future. He also severe diabetes retinopathy, and very poor eye sight, and is followed by ophthalmologist.

If you have any question regarding him, you may contact our practice at the above phone numbers.  
Thank you for your consideration of my patient.

Sincerely,



Elizabeth Liang MD

**CHINATOWN KIDNEY CARE**

Wei Y. Sun, M.D., Ph.D.

Elizabeth Liang, M.D.

Li Yang, M.D., Ph.D.

Laurel Win Yap, M.D.

39-16 Prince Street, Unit 355

Flushing, NY 11354

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Enzo Clinical Labs  
60 Executive Boulevard  
Farmingdale, NY 11735  
Client Service 800-371-5227  
Main Lab 800-522-5052

REPORT STATUS FINAL

SPECIMEN INFORMATION		PATIENT INFORMATION		ORDERING PHYSICIAN	
SPECIMEN:	J1559987	HE, GUO QIANG		Liang, Elizabeth M.D.	
REQUISITION:	37804-280961	DOB:	02/03/1956	AGE:	61
COLLECTED:	09/23/2017 14:37	GENDER:	MALE	FASTING:	Y
RECEIVED:	09/23/2017 22:25	ED PID:	34120	37804 Chinatown Kidney Care 39-16 Prince Street, Ste. 355  Flushing, NY 11354	
REPORTED:	09/25/2017	ID:	3016606		
AMENDED:		PHONE:	9177758109		
REPRINTED:	09/25/2017 12:48				
Test Name		IN Range	OUT Range	Reference Range	Lab

Comprehensive Metabolic Panel

Reported: 09/24/2017

Glucose	170	H	65 - 100	mg/dL
Urea Nitrogen	88	H	6 - 20	mg/dL
Creatinine	8.45	H	0.70 - 1.30	mg/dL
BUN/Creatinine Ratio	10.4			Ratio
eGFR	6	L	>=60	mL/min/1.73m2
eGFR (Afr. Amer.)	8	L	>=60	mL/min/1.73m2
Sodium	136		136 - 145	mmol/L
Potassium	5.2		3.5 - 5.3	mmol/L
Chloride	98		98 - 107	mmol/L
Carbon Dioxide	21		21 - 32	mmol/L
Calcium	8.5	L	8.6 - 10.4	mg/dL
Protein, Total	5.8	L	6.0 - 8.3	g/dL
Albumin	3.1	L	3.5 - 5.2	g/dL
Globulin	2.7			g/dL
A/G Ratio	1.1			Ratio
Bilirubin, Total	0.3		0.0 - 1.2	mg/dL
AST (SGOT)	12		0 - 40	U/L
ALT (SGPT)	8		0 - 41	U/L
Alkaline Phosphatase	82		40 - 129	U/L

Uric Acid 7.4 >18y: 4.0 -8.0 mg/dL

Reported: 09/23/2017

2012 American College of Rheumatology  
Therapeutic target for gout patients: <6.0 mg/dL

Phosphorus 5.6 H 2.5 - 4.5 mg/dL

Reported: 09/24/2017

Iron/TIBC

Reported: 09/23/2017

Iron	91		30 - 170	ug/dL
UIBC	115		112 - 347	ug/dL
TIBC	206	L	225-415	mcg/dL
% Transferrin Saturation	44.2		14 - 50	Percent

Ferritin 790.2 H 30 - 400 ng/mL

Reported: 09/23/2017

Lipid Panel

Reported: 09/23/2017

Cholesterol 171 mg/dL

ATP III Classification (NCEP)  
<200 ..... Desirable  
200-239 ..... Borderline high  
=>240 ..... High

Triglycerides 140 mg/dL

ATP III Classification (NCEP)  
<150 ..... Normal

J1559987 - A32LRFI - ED1FILE	HE, GUO QIANG	Page: 1 (continued)
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Dieter M. Schapfel, M.D., Medical Director



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REQUISITION: 37804-280961	DOB: 02/03/1956 AGE: 61	CLIENT INFORMATION
COLLECTED: 09/23/2017 14:37	GENDER: MALE FASTING: Y	Chinatown Kidney Care
Test Name	IN Range OUT Range	Reference Range Lab

150-199 ..... Borderline high  
200-499 ..... High  
=>500 ..... Very high

HDL Cholesterol 41 mg/dL  
ATP III Classification (NCEP)  
<40 ..... Low  
=>60 ..... High

LDL Cholesterol, Calc. 102 mg/dL  
ATP Classification (NCEP)  
<100 ..... Optimal  
100-129 ..... Near optimal/above optimal  
130-159 ..... Borderline high  
160-189 ..... High  
=>190 ..... Very high

VLDL Cholesterol, Calc. 28 Desirable <30 mg/dL  
Chol/HDL Ratio 4.2 Desirable <4.80 Ratio

#### Complete Blood Count

Reported: 09/23/2017

WBC	5.9	3.8 - 10.5	10E3/uL
RBC	3.93 L	4.20 - 5.80	10E6/uL
Hemoglobin	11.3 L	13.5 - 17.5	g/dL
Hematocrit	34.1 L	38.8 - 50.0	Percent
MCV	86.8	82.0 - 100.0	fL
MCH	28.8	26.0 - 34.0	pg
MCHC	33.1	32.0 - 36.0	g/dL
RDW	12.6	11.8 - 15.6	Percent
Platelets	180	150 - 450	10E3/uL
MPV	10.4	7.0 - 13.0	fL
Neutrophils	60.8	43.0 - 77.0	Percent
Lymphocytes	31.5	15.0 - 46.0	Percent
Monocytes	6.2	2.0 - 14.0	Percent
Eosinophils	0.8	0 - 6	Percent
Basophils	0.7	0 - 2	Percent
Immature Granulocytes	0.0	<=1	Percent
Neutrophils, Absolute	3610	1650-8500	10E3/uL
Lymphocytes, Absolute	1870	1000-3850	10E3/uL
Monocytes, Absolute	370	30-850	10E3/uL
Eosinophils, Absolute	50	0-600	10E3/uL
Basophils, Absolute	40	0-120	10E3/uL
Immature Granulocyte, Absolute	0.00	<91	10E3/uL

\*Please note change in reference range

NRBC % 0.0 0.0 - 0.70 /100WBC  
\*Please note change in reference range

NRBC Count 0.00 Not Established x10E3/uL

Hemoglobin A1c 8.1 H 4.1 - 5.6 Percent  
Reported: 09/23/2017

Degree of Glucose Control\* Hgb A1c %



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COLLECTED:	09/23/2017 14:37	GENDER:	MALE	FASTING:	Y
Test Name		IN Range	OUT Range	Reference Range	Lab

Normal (Non-Diabetic) ..... <5.7  
Increased Risk of Diabetes ..... 5.7-6.4  
Consistent with Diabetes ..... =>6.5  
\*Recommended Range-American Diabetes Association, 2010

PTH, Intact 187.7 H 15-65 pg/mL  
Reported: 09/23/2017

Vitamin D, 25-OH 32.7 30 - 100 ng/mL  
Reported: 09/23/2017

Interpretive Guidelines for Vitamin D, 25-Hydroxy\*

>100 ng/mL ..... Potential Vit D Toxicity  
30-100 ng/mL ..... Vitamin D Optimal Level  
21-29 ng/mL ..... Vitamin D Insufficiency  
<20 ng/mL ..... Vitamin D Deficiency  
\*Endocrine Society Guidelines, 2011

Urinalysis

Reported: 09/24/2017

Specific Gravity	1.013	1.003 - 1.030
Color	Yellow	Straw-Yellow
Appearance	Clear	Clear
pH	5.0	4.5 - 8.0
Leukocyte Esterase	Negative	Negative WBC/uL
Protein	3+(>=500) H	Negative-Trace mg/dL
Glucose	2+(150) H	Negative mg/dL
Ketones	Negative	Negative mg/dL
Bilirubin	Negative	Negative
Blood	1+(0.03) H	Negative mg/dL
Nitrites	Negative	Negative
Urobilinogen	Negative	Negative mg/dL
White Blood Cells	0-5	0-5 /hpf
Red Blood Cells	6-10 H	0-5 /hpf
Squamous Epithelial Cells	Few	None-Few /hpf
Bacteria	Few	None-Few /hpf
Mucus	Few	None - Few /hpf

Microalbumin, Random Urine

Reported: 09/24/2017

Microalbumin, Urine mg/L  
RESULT GREATER THAN ANALYTICAL MEASURING RANGE  
Creatinine 108.17 mg/dL

Protein/Creatinine Ratio, Urine

Reported: 09/24/2017

Creatinine, Urine 110.80 39 - 259 mg/dL  
Protein, Urine 866.4 mg/dL  
Result verified by dilution  
Ratio 7.82 Ratio

\*\*\* END OF REPORT - FINAL \*\*\*

J1559987 - A32LRFL - ED1FILE	HE, GUO QIANG	Page: 3 (continued)
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Dieter M. Schapfel, M.D., Medical Director



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Test Name		IN Range	OUT Range	Reference Range	Lab

Unless otherwise noted, all testing performed at Enzo Clinical Labs, 60 Executive Blvd., Farmingdale, NY, CLIA #: 33D0159701

**New York City Council**

**Joint Hearing: Committee on Aging and Committee on Public Housing**

Council Member Margaret Chin, Aging Chair and Council Member Ritchie Torres, Public Housing Chair  
October 24, 2017

With a base of more than 100 community-based organizations that serve over 300,000 older New Yorkers annually, LiveOn NY's members provide core services that allow older adults to thrive in their communities, including senior centers, congregate and home-delivered meals, affordable senior housing, elder abuse prevention services, caregiver supports, transportation, NORCs and case management.

LiveOn NY also administers a citywide outreach program that targets older adults in the communities where benefits are most underutilized. This program places friendly and highly-trained retired professionals within low-income, high-needs communities to educate thousands of older adults, including those who are homebound, about food assistance options, and screen and enroll those who are eligible for SNAP, SCRIE and other benefits. LiveOn NY also administers a call hotline, staffed by a professional client services team that assists older adults and caregivers with benefits screenings and applications, serving approximately 1,000 clients per quarter.

Thank you for the opportunity to testify today on seniors in NYCHA housing.

NYCHA represents an important component in the makeup of affordable housing options for seniors in New York City. Currently, 38% of NYCHA households are headed by a senior age 62 or older and 20% of the total NYCHA population is over 62. As the senior demographic continues to grow, the NYCHA population will likely continue to skew older, with seniors making up a growing portion of NYCHA's residents. These statistics highlight the importance of the senior population within NYCHA communities, as they are in all communities throughout New York City.

Currently, NYCHA has a waiting list of over 250,000 families looking to receive an affordable home. Many of the individuals waiting for a NYCHA residence are likely to be seniors. The dire need for affordable housing for seniors is present beyond the sphere of NYCHA housing itself; a 2016 LiveOn NY study estimates that an estimated 200,000 seniors languish on waiting lists for affordable housing through the HUD202 program as well. Given this dire need for affordable housing throughout the city, it is imperative that investments are made to ensure the currently available stock of NYCHA units be habitable and accessible for populations of all mobility levels for the years to come.

Seniors are invaluable participants within NYCHA, as they contribute to their communities through caregiving supports, civic engagement, and local economic investment. As anchors in their communities, seniors have the ability to positively affect the overall community. It is important that when making policy decisions regarding NYCHA, the needs and perspective of seniors be given due consideration.

Numerous senior centers are located in NYCHA developments that work to serve the senior residents within the NYCHA facilities as well as the senior community at-large. Seniors citywide should have access to quality services in their communities. It is imperative that senior centers located in NYCHA facilities be appropriately maintained and accessible for the seniors served.

LiveOn NY looks forward to working with the Administration and City Council to make New York a better place to Age.

URBAN  
JUSTICE  
CENTER

123 William Street, 16<sup>th</sup> Floor, New York, NY 10038  
Direct: (646) 459-3000 • Fax: (212) 533-4598

TESTIMONY CONCERNING  
SENIORS IN NYCHA HOUSING

PRESENTED BEFORE:  
THE NEW YORK CITY COUNCIL'S  
COMMITTEE ON AGING  
AND  
COMMITTEE ON PUBLIC HOUSING

PRESENTED BY:  
NORMA BLAS  
NYCHA RESIDENT

OCTOBER 24, 2017

Good morning, and thank you to Chairpersons Margaret Chin and Ritchie Torres, and to the Committees on Aging and Public Housing.

My name is Norma Blas. I live at 77 Vandalia Ave in NYCHA's Vandalia Houses, Brooklyn, NY. My mother was Gilda Ramos, a NYCHA tenant for many years. I lived with her in Vandalia Houses for almost 13 years.

I first moved into my mom's NYCHA apartment around 2000. I moved in with her because she was sick and the doctor ordered that she have someone there twenty-four hours a day. She only had home health care 4 hours a day. She was 85 years old. She was blind and couldn't walk. She was bed-bound and needed help going to the bathroom. She weighed 220 pounds. She had kidney problems. She had 2 broken hips. She had Alzheimer's Disease. She sometimes didn't recognize me, or thought I was 8 years old again. She did not trust anyone but me, and would often yell and curse at her doctor or her home health attendant. If I hadn't moved in to care for her, she would not have been able to stay in her apartment.

As her care-giver, I changed her diapers and bathed her. I changed her bedding. I fed her. In the last years of her life, she could not eat solid food, so I would feed her from a baby's bottle.

About a month after I began caring for her, I asked the Vandalia Houses management for permission for my mom to add me to her household. I told them that my mom was sick and needed me there to care for her twenty-four hours a day. Management denied this request, saying that it would be "overcrowding" for my mother and me to share a one-bedroom apartment. They said that, under NYCHA rules, my mother would either have to live alone or move out of NYCHA housing. One of the NYCHA staff told me that if my mother couldn't live alone then I should "put her in the hospital."

I went back to management at least two more times to ask their permission for my mom to add me to her household. They turned me down every time.

Even though I didn't have permission, I stayed in the apartment with my mother, sleeping on the couch or on a chair in her bedroom. I had no choice – if I had left her alone I don't know what would have happened to her. I think she probably would have died.

My mom lived until 2013, and I stayed in the apartment to care for her. After she died, I had a nervous breakdown. It was around this time that NYCHA informed me that I had to leave the apartment or I would be evicted. After a hearing, the NYCHA hearing officer ruled that I have no succession rights because my mother never received permission from NYCHA to formally add me to her household. At the hearing, I submitted documentation showing my mother's medical condition, but the hearing officer never even considered whether NYCHA should make an exception to its rules because of my mother's condition.

NYCHA has started a Housing Court case to evict me. It is stayed while the Urban Justice Center appeals the NYCHA hearing officer's ruling.

Vandalia Houses has become my home. It has been seventeen years since I gave up my own apartment to care for my mother. I know my neighbors. Fifty-five of them signed a petition to NYCHA to let me stay. I pay the rent early every month. I've never missed a payment, and I've never had any trouble with management.



In all the years since 2000, not a single person at NYCHA has ever considered whether my mother had a right as a disabled person to have a family member live with her. Vandalia Houses management, the Brooklyn Borough Director, the hearing officer, and the NYCHA Law Department have all seen my mother's medical documentation. They have all seen my request to live with her to take care of her. They have all known that my mother couldn't stay in her apartment without me there. They have all denied that request. They have all given the same reason, over and over: NYCHA's rules say two unmarried adults can't share a one-bedroom apartment. Never in all these years have any of these NYCHA employees ever considered making an exception to that rule to accommodate my mother's disability.

I wish NYCHA would take pity on people who are seniors. I'm 62 years old and losing my own vision. I've heard that New York City supports "aging in place." The only reason my mother had a chance to age in place at NYCHA is because she broke the rules and let me live with her. I hope I get the chance to age in place, but NYCHA has been fighting for years to keep that from happening.

NYCHA staff should follow the law and make exceptions to their rules to accommodate disabled people, especially when they need family members to care for them. If management at a development break the law, then we should be able to count on higher-ups like Borough Directors, hearing officers, or NYCHA administration to fix the mistake, not keep doubling down on it and using it as grounds for eviction.

When a family member moves into a NYCHA apartment for care for a disabled tenant, NYCHA should give them permanent permission to join the household so they can succeed to the apartment after their family member dies. If NYCHA cares about "aging in place," they shouldn't make people choose between taking care of their aging parents and having a home later on.

Thank you for this opportunity to testify. I hope that my story helps show why NYCHA's policies and practice must change.

## **Leneer Hutchinson**

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**From:** Microsoft Outlook  
**To:** Andrea  
**Sent:** Monday, October 23, 2017 12:53 PM  
**Subject:** Relayed: Index #060004/2017

**Delivery to these recipients or groups is complete, but no delivery notification was sent by the destination server:**

Andrea (andrea@aslawny.com)

Subject: Index #060004/2017

**RE: Oversight: How Can Naturally Occurring Retirement Communities Improve and Expand Services?**

My name is Bob Madison, Director of Senior Services at Queensbridge Riis Neighborhood Senior Center and **Riis NNORC**. We are located in the Queensbridge NYCHA Housing complex the largest housing project in the nation and which also houses approximately 1,500 seniors in residence. At the **Riis NNORC** we have a small staff (five people) trying to engage a large population of older adults. Our NNORC has been in existence for over 8-10 years and constantly making efforts to improve and expand our services. Over the past years NNORC programs have relied on volunteer or low-cost assistance from many superb organizations and institutions in the communities they serve.

First, we need to thank the City Council in their wisdom in providing additional supports to the NORCS and Neighborhood NORCs to enable them to improve, expand or continue services.

We (the Riis NNORC) and I am sure other programs are constantly challenged with the question as to making improvements and how we are going to expand our services.

*I want to use the Riis NNORC as an example because we face the same challenges as other NORCS*

We convened a few meetings with participants, service providers and others, within the past two years and established a strategy to improve and expand our program. The outcome indicated we needed to increase and support our staffing structure to meet existing and forecasted needs. **The challenge is one Case Manager is not adequate to address the needs and follow-up care for such a large population.** Programs need the ability to reduce the “participants to case worker” ratio dramatically to provide quality of care. There needs to be resources to add another case worker should your participant level become exceedingly high.

There needs to be an increase in the allocations to provide on-site nursing\*. It is being prescribed by grantors for specific program hours but adequate funding is not allocated to meet that demand as well as other programmatic needs. Programs understand and do not contest the value of the nursing they just need the ability to fund it. There should be opportunities for programs to have access frequently to a licensed mental health professional and not an either physical or mental health person situation.

Similar to the professional health care person the presence of licensed mental health professional to assist staff in working around the breath of work that deals with depression, loss, chronic illness and other cognitive and mental health issues is key.

Our populations throughout the city are diverse with culture, ethnicity, and especially language. Many programs have access to the contracted telephonic translator ( ) or Google translator but there is no substitution for having a staff person or translator present that speaks your native language. It is so important to provide this service in some iteration at programs.

Most NNORC programs have stretched their staff roles and responsibilities in an effort to do more with less. Programs have administrative assistants (if they are lucky enough to have one) and other program people trying to provide a social and learning activity in their N/NORCs. Resources should be made available to support key activities needed to enable older adults to remain independent in the community such as computer training. In addition socialization is a major component to staying healthy and engaged in the community and having other activities supported such as local garden sessions, art, drama, dancing or vocal classes would be of great importance.

With confidence I mention these particular components of expansion and growth to NNORC programs because we at the Riis NNORC were able to institute them with the generous support from the City Council. We were able to allocate some funds to:

- Have a consultant, **Geriatric Psychologist**, for a few hours each month to assist participants dealing with immobilizing issues. We do have continued mental health partners at the Floating Hospital and using Pearls (sponsored by VNSNY) but the on-site professional increased the accessibility and compliance. Qualitative responses from seniors on the benefit of the professional counseling was 100 %
- We engaged a **Nutritionist** for a few hours each month to help our older adults identify real working strategies in combating obesity, weight loss, and healthy eating.
- Hire a **Part time interpreter** the NNORC population of Mandarin speaking seniors from 6 to 28 people within three weeks; homebound seniors came out to garden and learned technology, compliance on appointments with him. Currently at our NNORC the majority speak English (60%), Spanish (30%), Mandarin (5%) and Korean. (We have Spanish speaking staff but hired a translator part-time to assist with Mandarin and Korean).
- In addition, we were able to bring Older Adults Technology Services' (OATS) competent and consistent **technology training** to the program.
- Connect with a **consultant** to assist the older adults to build our **community garden**.

This gave our NNORC Case Manager the time to work with the Social work Interns to reach more seniors in the large housing complex.

All of the aforementioned components additional Case manager, adequate support for the health care services being required, mental health services in the picture, an interpreter for the

additional language and an activities person are needed to strategically improve and enhance the services of a NORC program.

I want to thank the City Council for their support of the NNORC programs in the city and encourage the council members to increase the support to senior services city-wide. And to let the mayor know the success that you are having by providing the needed, critical and necessary support for City wide N/NORC programs.

Thank you

\*The NORC must also have an experienced healthcare professional on site with experience that corresponds to the type of healthcare programming offered. Programs receiving \$100,000 or more in state funds annually are required to have at a minimum one full time equivalent (FTE) case manager and one-half FTE providing healthcare management and healthcare assistance



**Testimony of Judi Kende  
Vice President & New York Market Leader  
Enterprise Community Partners, Inc.**

**To the New York City Council  
Committee on Public Housing and Committee on Aging  
Oversight Hearing - Seniors in NYCHA Housing**

**October 24, 2017**

On behalf of Enterprise, I would like to thank Chair Torres and the City Council Committee on Public Housing, and Chair Chin and the City Council Committee on Aging, for the opportunity to testify on behalf of seniors living in New York City Housing Authority (NYCHA) housing. Enterprise is a national non-profit organization that provides capital for affordable housing and community development, advocates for policies that advance these goals, and supports local groups working on these issues. Since our New York office opened in 1987, we have committed nearly \$3.4 billion in equity, loans, and grants to help create or preserve over 60,000 affordable homes for nearly 160,000 residents in the region.

Today is an opportunity to discuss priorities for New York's senior public housing residents. One of the greatest tasks facing our city is to preserve and improve the housing provided by NYCHA. Public housing is a critical source of affordable housing and it must continue to be a stabilizing force and a connection to opportunity for all who live there. Concurrently, our city is grappling with rapid population growth among older adults and their ability to remain in the communities they've worked hard to create.

The city's older adult population is projected to increase 40% by 2040.<sup>i</sup> A shocking 19% of residents age 65 or older live below the federal poverty line, nearly double the national rate of 10%.<sup>ii</sup> In NYCHA alone, 19.9% of the population is age 62 or older. Furthermore, seniors have greater health and social service needs as they age and often rely on fixed incomes sourced primarily from Social Security. Forty percent of NYCHA families rely on Social Security, SSI, pensions, veterans' benefits, and other government programs.<sup>iii</sup>

NYCHA's \$17 billion in unmet capital needs put it at risk of federal receivership and its properties at risk of further deterioration. More immediately, these funding shortfalls lead to conditions that threaten the health and quality of life for residents. Part of the solution to these threats includes Supportive Service Programs for naturally occurring retirement communities (NORCs) and NYCHA's Design Guidelines, which are being integrated into NYCHA's capital repairs.

Public housing depends on Department for the Aging (DFTA) programs, such as NORC Supportive Service Programs, to provide essential services to their residents as they age-in-place. Enterprise supports the expansion of these DFTA programs so that more naturally occurring retirement communities around the city can also receive the support services they need. Additionally, DFTA-funded case management can help seniors unable to travel obtain critical in-

home care and prevent social isolation. These services are vital for senior residents of affordable housing.

Enterprise's Rose Architectural Fellow worked with NYCHA to create the *Design Guidelines: Rehabilitation of NYCHA Residential Buildings* which promote excellence in renovations and new construction to improve resident quality of life. For seniors, one crucial aspect of this work is accessibility. To ensure compliance with the accessibility requirements of the Rehabilitation Act of 1973, NYCHA entered a Voluntary Compliance Agreement with HUD. The scope of work includes widening interior doors; creating fully-accessible bathrooms and kitchens where permissible; adjustments such as lowering light switches, raising outlets and installing audio-visual smoke and CO alarms; and creating accessible routes to converted apartments. NYCHA aims to modify 5% of its apartments to meet these accessibility requirements, and is currently close to reaching its goal. Additionally, Enterprise hosted an Aging in Place charrette with NYCHA Design staff in 2016 to explore ways that NYCHA could integrate age-friendly design. The charrette utilized our Aging in Place toolkit, created to support developers seeking to assess and respond to the needs of aging residents through the built environment.

New York City must do everything it can to ensure that seniors at all income levels can age safely and comfortably in their homes. Thank you for the opportunity to testify and we look forward to working with you to help meet the needs of older adults living in NYCHA and throughout the city.

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<sup>i</sup> New York City Department of City Planning, New York City Population Projections by Age/Sex & Borough, 2010-2040, Aug. 2015: [http://www.nyc.gov/html/dcp/pdf/census/projections\\_report\\_2010\\_2040.pdf](http://www.nyc.gov/html/dcp/pdf/census/projections_report_2010_2040.pdf)

<sup>ii</sup> AARP, State of the 50+ in NYC, 2014: [http://www.aarp.org/content/dam/aarp/research/surveys\\_statistics/general/2014/State-of-the-50-Plus-in-NYC-2014-AARP-res-gen.pdf](http://www.aarp.org/content/dam/aarp/research/surveys_statistics/general/2014/State-of-the-50-Plus-in-NYC-2014-AARP-res-gen.pdf)

<sup>iii</sup> Ibid.



**GMHC Testimony:**  
**NEW YORK CITY COUNCIL COMMITTEES ON PUBLIC HOUSING and AGING**  
**Joint Oversight Hearing on Senior in NYCHA Housing**  
**Council Member Ritchie Torres, Public Housing Committee Chair**  
**Council Member Margret Chin, Aging Committee Chair**

Contact: Eric L. Sawyer,  
[erics@gmhc.org](mailto:erics@gmhc.org) / 212-367-1182

Good morning, my name is Eric Sawyer and I am the Vice President of Public Affairs and Policy at the Gay Men's Health Crisis (GMHC). Founded in 1982, GMHC is the world's first AIDS service organization. In 2016, we served over 12,000 clients across New York City, and our housing staff services over 900 clients. At any given time, between 75 – 100 clients reside in NYCHA housing.

Today, I will be testifying about the challenges facing our clients residing in NYCHA housing, as well as GMHC's difficulty accessing housing units in NYCHA buildings. Our clients are primarily people living with HIV—many of whom are designated as people living with a disability, and most of whom are receiving services through SSI, SSD, or the HIV/AIDS Services Administration (HASA), or are clients of the Department of Veterans Affairs. As people living with a disability, many of our clients should be prioritized for housing placement within NYCHA buildings and receive reasonable accommodations for housing placements with apartment modifications to allow them equal access to safe, medically appropriate housing. Yet we have clients who have been wait-listed for many months or even over a year for a NYCHA apartment. One elderly GMHC client received certification of eligibility for a disability housing placement in a NYCHA building in May yet remains homeless today.

Some of our clients who have developed mobility issues while in NYCHA apartments have been waiting for months to move to an accessible apartment on the ground floor of their buildings, or to move into a building with a working elevator. This is happening even though apartments remain vacant on the ground floor.

A majority of our NYCHA-housed clients complain of insect and mice/rat infestations; garbage in public spaces, in basements and in front of their buildings; and apartments in need of significant repairs due to water leaks, exposed pipes, fallen plaster, mold problems, non-working lights and electric outlets, and heating issues in the winter months. One client living in the Edgemere Housing Projects in the Rockaways complains that there is still no consumable water available in the building other than bottled water five years after Hurricane Sandy.

Clients also complain about a repair policy that generates an inspection once a repairs need is reported, but state that the repair work never happens for months. If they file subsequent complaints about the repairs having not been done, it simply triggers a new inspection and





removes the prior requested repair from the repair list; this act moves their repair scheduling to the bottom of the repair waiting list.

Many of GMHC's elderly clients are long-term survivors of HIV/AIDS with many chronic health conditions and mobility issues; some are in wheelchairs, others have respiratory illnesses, and many face mental health issues, depression, and social isolation. Many of these conditions are only made worse by placement in apartments without adequate handicapped access.

GMHC also works with a younger client family with three children . The family has only a one-bedroom apartment and is waiting for a larger apartment when there are two- and three-bedroom apartments sitting vacant in their building in need of repairs to make the units livable. Similarly, a family with two children—one of whom is severely disabled and requires numerous machines and apparatuses to facilitate her breathing, movement into and out of bed, and a wheel chair, etc.—is crowded into a small bedroom with her sister.

Clearly NYCHA needs far greater levels of funding and management changes to allow NYCHA to provide medically appropriate housing to their residents. GMHC urges the City Council to prioritize a dramatic increase to funding for NYCHA and a total review of NYCHA's housing management programs, which seem criminally inadequate at best.

**THE COUNCIL  
THE CITY OF NEW YORK**

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☐ in favor ☐ in opposition

Date: \_\_\_\_\_

(PLEASE PRINT)

Name: Runa Rajagopal + Aida Reyes (tenant)

Address: 360 E 161 St BR NY 10451

I represent: Aida Reyes (Remaining family member)

Address: \_\_\_\_\_

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Date: \_\_\_\_\_

(PLEASE PRINT)

Name: Aida Reyes (Remaining family member)

Address: 3445 Holland Avenue (Guthrie /

I represent: Tenant + RFMS (Parkside)

Address: w/ The Bronx Defenders

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☐ in favor ☐ in opposition

Date: 10/24/17

(PLEASE PRINT)

Name: Nora Moran

Address: 45 Broadway NY NY 10006

I represent: United Neighborhood Houses

Address: \_\_\_\_\_

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☐ in favor ☐ in opposition

Date: 10-24-2017

(PLEASE PRINT)

Name: Katelyn Hosey

Address: 11 Maiden Lane 4B

I represent: Live On NY

Address: 49 W. 45<sup>th</sup> St, 7<sup>th</sup>

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Date: 10/24/17

(PLEASE PRINT)

Name: Andrea Tan

Address: 105 COURT ST. 4TH FL, BROOKLYN NY 11201

I represent: Legal Services NYC (LSNYC)

Address: \_\_\_\_\_

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Date: \_\_\_\_\_

(PLEASE PRINT)

Name: Janna Levin - Brooklyn Legal Services Corp A

Address: 260 Broadway Suite 2 Brooklyn, NY 11211

I represent: \_\_\_\_\_

Address: \_\_\_\_\_



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☐ in favor ☐ in opposition

Date: \_\_\_\_\_

(PLEASE PRINT)

Name: MadeLyn Innocent

Address: 865 Columbus Ave.

I represent: Public Housing/CB7

Address: Same as above

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☒ in favor ☐ in opposition

Date: \_\_\_\_\_

(PLEASE PRINT)

Name: Katherine Martinez

Address: PSS 2095 Broadway Suite 401

I represent: PSS NYC 10023

Address: \_\_\_\_\_

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☐ in favor ☐ in opposition

Date: 10/23

(PLEASE PRINT)

Name: Beatriz Encarnacion Padru

Address: 50 Broad Street NYC 10004

I represent: Housing Court answers

Address: 50 Broad St

Please complete this card and return to the Sergeant-at-Arms

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☐ in favor ☐ in opposition

Date: \_\_\_\_\_

(PLEASE PRINT)

Name: Sioeyia Sherman  
Address: EVP Community Engage + Partner.

I represent: NYCHA

Address: \_\_\_\_\_

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☐ in favor ☐ in opposition

Date: \_\_\_\_\_

(PLEASE PRINT)

Name: Lillian Harris  
Address: VP for Tenancy Admin

I represent: \_\_\_\_\_

Address: \_\_\_\_\_

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☐ in favor ☐ in opposition

Date: 10/24/17

(PLEASE PRINT)

Name: Cynthia Hill  
Address: 89-09 162nd St

I represent: Shelton Houses

Address: 89-09 162nd St Apt 8K  
Jamaica 104-11430

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☐ in favor ☐ in opposition

Date: 10.24.17

(PLEASE PRINT)

Name: Caryn Reznick

Address: Deputy Commissioner, External Affairs

I represent: DFA

Address: \_\_\_\_\_

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☐ in favor ☐ in opposition

Date: 10.24.17

(PLEASE PRINT)

Name: Karen Taylor

Address: Assistant Commissioner, Community Services

I represent: DFA

Address: \_\_\_\_\_

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☐ in favor ☐ in opposition

Date: 10/24/17

(PLEASE PRINT)

Name: Brian Clarke - Senior VP of Operations

Address: 250 Broadway, NY 10007

I represent: NYCHA

Address: \_\_\_\_\_

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☐ in favor ☐ in opposition

Date: 10/24/17

(PLEASE PRINT)

Name: PATTON FISHER

Address: 57 HERKIMER ST 609

I represent: BROOKLYN LAWSCHOL

Address: 250 JORALEMON

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☐ in favor ☐ in opposition

Date: 10/24

(PLEASE PRINT)

Name: Molly Krakowski

Address: \_\_\_\_\_

I represent: JASA

Address: 247 W. 37th St. NYC 10018

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☐ in favor ☐ in opposition

Date: 10/24/2017

(PLEASE PRINT)

Name: JONAS APONTE

Address: 150 W 175th St, BRONX, NY

I represent: \_\_\_\_\_

Address: \_\_\_\_\_



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Appearance Card

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☐ in favor ☐ in opposition

Date: \_\_\_\_\_

(PLEASE PRINT)

Name: MICHAEL GRINTHAL

Address: 365 CLINTON AVE

I represent: URBAN JUSTICE CTR

Address: 123 WILLIAM ST

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THE CITY OF NEW YORK**

Appearance Card

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☐ in favor ☐ in opposition

Date: \_\_\_\_\_

(PLEASE PRINT)

Name: Deborah Goddard

Address: EUP Capital

I represent: NYCHA

Address: \_\_\_\_\_

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THE CITY OF NEW YORK**

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☐ in favor ☐ in opposition

Date: 10/24/17

(PLEASE PRINT)

Name: Sandy Myers

Address: 7520 8th Ave, NYC 10018

I represent: Selfhelp Community Services

Address: \_\_\_\_\_

Please complete this card and return to the Sergeant-at-Arms



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THE CITY OF NEW YORK**

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I intend to appear and speak on Int. No. \_\_\_\_\_ Res. No. \_\_\_\_\_

☐ in favor ☐ in opposition

Date: \_\_\_\_\_

**(PLEASE PRINT)**

Name: Young Ae Kim

Address: 40-13 12<sup>th</sup> ST APT 6B LIC, NY

I represent: CAAAV

Address: \_\_\_\_\_

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THE CITY OF NEW YORK**

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☐ in favor ☐ in opposition

Date: \_\_\_\_\_

**(PLEASE PRINT)**

Name: NORMA BLAS (BY MICHAEL GRINTHAL)

Address: 77 VANDALIA

I represent: NYCHA RESIDENT

Address: \_\_\_\_\_

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THE CITY OF NEW YORK**

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☐ in favor ☐ in opposition

Date: \_\_\_\_\_

**(PLEASE PRINT)**

Name: CAAAV (interpreter) Sonae Brown

Address: 55 Hester ST NY NY

I represent: \_\_\_\_\_

Address: \_\_\_\_\_

*Please complete this card and return to the Sergeant-at-Arms*

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☐ in favor ☐ in opposition

Date: \_\_\_\_\_

**(PLEASE PRINT)**

Name: Guo Qiang He

Address: 41-05 10th St, Long Island City, NY 11101

I represent: CAAAV

Address: \_\_\_\_\_

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☐ in favor ☐ in opposition

Date: \_\_\_\_\_

**(PLEASE PRINT)**

Name: Roxy Chang

Address: 57 Hester St, NY 10002

I represent: CAAAV - Mr. He

Address: \_\_\_\_\_

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