

CITY COUNCIL
CITY OF NEW YORK

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TRANSCRIPT OF THE MINUTES

Of the

COMMITTEE ON AGING, JOINTLY WITH THE
SUBCOMMITTEE ON SENIOR CENTERS

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December 14, 2017
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HELD AT: 250 Broadway - Committee Rm,
14th Fl.

B E F O R E:

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PAUL A. VALLONE
Co-Chairperson

COUNCIL MEMBERS:

Karen Koslowitz
Deborah L. Rose
Chaim M. Deutsch
Mark Treyger
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A P P E A R A N C E S (CONTINUED)

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Communications & Development Manager
India Home

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HANAC Harmony JVL Senior Center

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3 [sound check]

4 [pause]

5 [gavel]

6 [background comments, laughter]

7 CHAIRPERSON CHIN: Good afternoon. My
8 name is Margaret Chin, Chair of the Committee on
9 Aging. Thank you all for joining us today. I would
10 like to thank Council Member Vallone, Chair of the
11 Subcommittee on Senior Centers, for holding this
12 joint hearing with the Committee on Aging.

13 At today's hearing, the Committee will
14 have the opportunity to discuss seniors' access to
15 nutritious and culturally competent meals. New York
16 City is the largest provider of meals in the world,
17 either directly or through contracted providers. In
18 fiscal year 2017, DFTA alone provided 11.7 million
19 meals to seniors through its congregate meals program
20 at the City's over 250 senior centers and its home-
21 delivered meals program. These meals are a lifeline
22 to vulnerable low-income seniors in the city and we
23 look forward to hearing from the Department for the
24 Aging, providers and advocates on the status of these
25 programs, how they can be improved and how we can

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3 ensure that all seniors who need these critical
4 services get access to them.

5 I would like to thank the staff of the
6 Committee on Aging for their assistance in putting
7 together this hearing: our Counsel, Caitlin Fahey;
8 Policy Analyst, Emily Rooney; and Finance Analyst,
9 Daniel Kroop. I also want to thank the committee
10 members who are going to be joining us later.

11 And now we are going to hear from Council
12 Member Vallone, who is Chair of our Subcommittee on
13 Senior Centers. Thank you.

14 CO-CHAIRPERSON VALLONE: Thank you, Madam
15 Chair, and with the near hear approaching, I think
16 this might be our last co-chair together, so I want
17 to say a special thank you for the amazing tutelage
18 you've given me in my first four years and I think we
19 made a pretty awesome team in fighting for the
20 seniors and I think that's something we can all be
21 proud of, the work we've done with DFTA and everyone
22 over the last four years and hopefully we're all in
23 very similar roles in the next four years so we can
24 keep the advocacy going. But this is a good hearing
25 because it's something we're always all fighting for

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3 to expand and to grow and to hear how it's been and
4 how the contracts are going.

5 The Department of Aging oversees 250
6 senior centers throughout the city; they are free and
7 open to anyone over the age of 60 and provide so many
8 different services, including congregate meals, which
9 we're talking about today.

10 In Fiscal Year 2017, senior centers
11 provided 7.2 million congregate meals to seniors
12 across all of the boroughs, these meals included
13 breakfast, lunch and dinner and served five days a
14 week and in Fiscal Year 2018 we fought for the
15 baseline of \$1.2 million in funding for the sixth day
16 congregate meal, as so many seniors have asked for,
17 and provided a lifeline over the weekend, waiting for
18 Monday to come. These meals are critical in the
19 lives of our senior citizens, 13% of whom live in
20 food insecure homes.

21 I look forward to hearing testimony from
22 Department of Aging, our providers or advocates
23 regarding DFTA's congregate meal program and how we
24 can work together to help our senior to provide the
25 services needed for them to continue on with dignity
and respect they deserve.

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3 Thank you very much, Madam Chair.

4 CHAIRPERSON CHIN: We're going to invite
5 up the first panel -- Caryn Resnick, Deputy
6 Commissioner, External Affairs for Department for the
7 Aging; Karen Taylor, Assistant Commissioner,
8 Community Services; and...

9 CARYN RESNICK: Eileen Mullarkey.

10 CHAIRPERSON CHIN: Oh, Eileen Mullarkey,
11 Assistant Commissioner of Long-Term Care; all from
12 DFTA. [interpose]

13 CO-CHAIRPERSON VALLONE: The Three
14 Musketeers, [inaudible] all the time.

15 CHAIRPERSON CHIN: And all women, yes.
16 [crosstalk]

17 CO-CHAIRPERSON VALLONE: [inaudible]

18 CHAIRPERSON CHIN: So the counsel will
19 swear you in.

20 [background comments, pause, laughter]

21 COMMITTEE COUNSEL: Do you affirm to tell
22 the truth, the whole truth and nothing but the truth
23 in your testimony before this committee and to
24 respond honestly to council member questions?

25 [background comments] Thank you.

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3 CARYN RESNICK: Thank you for having us
4 here today. Good afternoon; Happy Holidays to one
5 and all. I'm Caryn Resnick, Deputy Commissioner for
6 External Affairs at the New York City Department for
7 the Aging and I am joined by Karen Taylor, Assistant
8 Commissioner for Community Services, and Eileen
9 Mullarkey, Assistant Commissioner for Long-Term Care.
10 On behalf of Commissioner Donna Corrado, I would like
11 to thank you for this opportunity to discuss seniors'
12 access to nutritional and culturally competent
13 congregate and home-delivered meals. DFTA contracted
14 organizations provided, as you mentioned, 11.7
15 million meals in FY17, including both home-delivered
16 meals and congregate meals at senior centers.
17 Central to DFTA's mission is to ensure the dignity
18 and quality of life of New York's diverse older
19 adults, and providing culturally sensitive services
20 is tantamount to supporting that mission.

21 DFTA currently sponsors 246 senior
22 centers and 29 affiliated satellites through the five
23 boroughs, which are funded at \$139 million. The
24 satellites include senior social clubs previously
25 operated by NYCHA and former discretionary programs
that were baselined. As you know, in addition to

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3 offering a broad range of programs and services,
4 senior centers provide meals at little or no cost to
5 participants, though modest contributions are
6 accepted and are completely voluntary. In FY17,
7 approximately 29,500 older New Yorkers participated
8 in activities and received meals at DFTA-sponsored
9 senior centers each day. Senior centers served a
10 total of 7.2 million congregate meals -- including
11 breakfast, lunch and dinner.

12 All DFTA-sponsored senior centers serve
13 meals that meet City and State nutritional standards
14 and strive to be culturally relevant to program
15 participants. Kosher meal programs are available at
16 senior centers in all five boroughs. A number of
17 senior centers in Brooklyn, Manhattan and Queens
18 serve meals that are culturally appropriate to their
19 Chinese constituents, including senior centers in
20 Chairperson Chin's district. In Queens, Korean
21 Community Services of Metropolitan New York, Inc.
22 provides Korean meals at the DFTA senior center they
23 operate in Flushing in Chairperson Vallone's
24 district, as well as at another site in Corona. In
25 the Bronx, several senior centers serve Spanish and
Latin American fare, as the preference of their

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3 constituents. Other senior centers offer Indian,
4 Italian, Southern, and Caribbean meals to meet
5 constituents' needs. Some DFTA senior centers
6 celebrate and observe the national holidays of their
7 diverse program participants as a way of
8 incorporating traditional customs. Through cultural
9 sharing and exchanges enriched by educational
10 programming and translation services, senior centers
11 foster sensitivity and appreciate for different
12 cultures among a diverse membership, which break down
13 cultural barriers in centers that have undergone
14 demographic changes.

15 The home-delivered meals (HDML) program
16 provides nutritious meals to older New Yorkers while
17 creating greater choice to address the future needs
18 of a growing homebound population. All home-
19 delivered meals meet prescribed dietary guidelines.
20 Those older adults assessed by their case manger as
21 capable of handling a frozen meal have choice and
22 flexibility between choosing twice weekly delivery of
23 frozen meals or daily deliver of a hot meal. The
24 selection of frozen meal delivery provides the option
25 to decide when clients are ready to eat and which
meal they wish to eat that day. In FY17, more than

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3 26,500 homebound seniors received nearly 4.5 million
4 home-delivered meals. Home-delivered meals are
5 funded at \$37 million.

6 In addition to the \$3.3 million that was
7 baselined in FY15 to address rising food costs for
8 congregate and home-delivered meals, the
9 Administrated added baseline funding of \$1.8 million
10 in FY16 to expand the capacity of the home-delivered
11 meals network by 5%. This funding resulted in
12 200,000 additional home-delivered meals for seniors
13 in need.

14 DFTA's home-delivered meal program
15 includes a variety of culturally relevant meals and
16 menus. The Department for the Aging requires that
17 menus are reviewed in terms of nutritional standards
18 as well as cultural relevance as determined by the
19 demographics of HDML clients. Reflecting this
20 diversity, more than 22% of meals delivered citywide
21 are kosher. For example, clients living in Lower
22 Manhattan are offered Chinese meals; clients in
23 Greenpoint, Brooklyn are delivered Polish meals; and
24 clients residing in Queens receive Korean meals.

25 DFTA engaged PricewaterhouseCoopers (PwC)
as a consultant in order to identify the means by

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3 which the City could better structure the home-
4 delivered meals program to improve the efficiency and
5 quality of the program for older New Yorkers. PwC
6 received feedback from HDML stakeholders in New York
7 City and nationally to pinpoint what works well and
8 what needs improvement in the way that food is
9 procured, prepared and delivered to homebound
10 seniors. Currently, DFTA holds 23 contracts with 17
11 community-based organizations to deliver
12 approximately 18,000 meals per day. It is the
13 agency's vision to build capacity and improve its
14 food service delivery across the city by broadening
15 menu options, addressing consumer choice, increasing
16 program efficiency, controlling costs, leveraging
17 technology and emerging platforms, and tailoring
18 meals to meet the nutritional needs of diverse
19 constituents. After extensive interviews, analysis
20 and fieldwork, PwC presented findings to DFTA on how
21 to improve meal quality, expand choice and develop
22 greater efficiencies where possible. We are
23 analyzing these results as they help to inform our
24 retooling of the overall system in the future. After
25 obtaining stakeholder input, DFTA plans to release an

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2 RFP for home-delivered meals contracts beginning in
3 2020.

4 I thank you again for this opportunity to
5 testify on seniors' access to nutritional and
6 culturally competent congregate and home-delivered
7 meals, and I'm pleased to answer any questions that
8 you may have. Thank you.

9 CO-CHAIRPERSON VALLONE: That was like
10 getting to the end of a TV show at the end of the
11 season; we're just about to get the conclusion, and
12 boom, we're gonna wait till 2020. I was all excited;
13 I was like, wait a minute, we've got those results
14 coming and... [interpose]

15 CARYN RESNICK: Well we wanted to leave
16 lots of time for **[inaudible]**... [crosstalk]

17 CO-CHAIRPERSON VALLONE: no, it's like
18 tune in next year for the... for the conclusion of the
19 DFTA.

20 Alright, so with that, expanding the
21 vision, just if you can expand on that a little bit
22 more -- the timeline, where do you see -- 'cause
23 that's where we all really want to be -- expanding of
24 the food service, addressing the costs, more of the
25 culturally competent meals, technology; all of that

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3 that you had at the end. Where do you see that on
4 the timeline?

5 CARYN RESNICK: So as I mentioned, we
6 engaged PricewaterhouseCoopers and we are not yet
7 ready to move forward with the next phase, but we are
8 hoping that in the new year we will begin to look at
9 different models and look at ways in which we can
10 implement at least some of those strategies. It may
11 be too much to take on that whole reform package at
12 one time, so I think that's part of the next step of
13 work is to figure out if this can be staged or
14 piloted or actually now start to drill down and see
15 what different options look like.

16 CO-CHAIRPERSON VALLONE: I think that
17 would be very prudent for us to kind of work -- what
18 are the most attainable ones we can hit first..

19 [crosstalk]

20 CARYN RESNICK: Exactly.

21 CO-CHAIRPERSON VALLONE: sort of the low-
22 hanging fruit that we can maybe address while we look
23 at long-term dream projects. You know I think
24 that's... a lot of it comes down to budget and fiscal,
25 but that's our job... [crosstalk]

CARYN RESNICK: Right.

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2 CO-CHAIRPERSON VALLONE: is to fight with
3 you to make sure that this year that we continue our...
4 every year is the year of the senior. These would be
5 things that we'd like to really expand on.

6 The 23,000 meals and 18... 23 contracts,
7 sorry; 18,000 per day, how has that changed? I think
8 we were talking about it the last time we brought
9 this up, that your... [interpose]

10 CARYN RESNICK: I don't have the exact
11 numbers, but we know in fact... well Eileen might, but
12 our overall home-delivered meal numbers have gone up
13 and we had additional dollars that allowed us to do
14 that. So I don't know if you have anything else to
15 add... [crosstalk]

16 CO-CHAIRPERSON VALLONE: Have we met the
17 current demand, I guess, with what we're doing now is
18 there a wait list or?

19 EILEEN MULLARKEY: We ended the year a
20 little bit underutilized, so there is still room for
21 more clients to receive meals. Every once in a while
22 there will be like a small wait list and it's really
23 about a meal provider having to start a new route and
24 then that quickly gets absorbed so we don't have
25

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2 clients waiting. So there really, at this point, are
3 no clients or should be no clients waiting for meals.

4 CO-CHAIRPERSON VALLONE: Is that absorbed
5 by an existing provider or are we looking...

6 [crosstalk]

7 EILEEN MULLARKEY: By existing providers.
8 And because we were slightly underutilized, we have
9 some room if one provider ends up having more growth
10 in their area, that we could shift funds to them to
11 be able to have that.

12 CO-CHAIRPERSON VALLONE: So we're
13 constantly asked and requested for an increase within
14 culturally specific types of meals and I know the
15 cost reimbursement has always been something that we...
16 could we expand a little bit on what the costs per
17 meal for senior centers is today and where we see it;
18 is it something that we can address going forward?

19 CARYN RESNICK: So senior centers is a
20 whole other topic and we are right now engaged with
21 OMB in very serious drilling down into every single
22 budget line of our senior center budget to come up
23 with actually what are those costs and what are
24 realistic goals. So we are I think right on target

25

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2 to be able to announce that model budget at the
3 beginning of this year, so only a few weeks away.

4 Costs for home-delivered meals are funded
5 a little bit differently and that's actually on a per
6 meal basis as opposed to senior centers, which is
7 still really a line item budget. So Eileen can
8 perhaps comment about what the per meal cost is...
9 [crosstalk]

10 CO-CHAIRPERSON VALLONE: For the home...

11 CARYN RESNICK: we were able to get a
12 differential for the cost of kosher meals [background
13 comment], but I don't believe that we do have
14 differentials for culturally competent other meals.

15 EILEEN MULLARKEY: Right; we don't
16 differentiate for that. When there was the increase
17 for the regular meals and then the kosher meals, it
18 ended up to be a blended rate and then this year
19 there's the COLA, so people's rates will be going up
20 based on that as well; minimum wage has gone up, so
21 that'll affect some of our meal programs in terms of
22 their staff.

23 CO-CHAIRPERSON VALLONE: Well in the
24 overall service and the amount of meals and staff or
25 just will that all be increased to reflect the

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3 minimum wage? I don't want to reduce what we're
4 providing because of an increase in [inaudible]...
5 [crosstalk]

6 CARYN RESNICK: No, it's on top... it's on
7 top. [crosstalk]

8 CO-CHAIRPERSON VALLONE: [inaudible]...

9 CARYN RESNICK: So that will all help to
10 raise what the actual overall reimbursement rate is.
11 But we have heard, and I know you will hear later
12 from advocates who are... [interpose]

13 CO-CHAIRPERSON VALLONE: We love our
14 advocates.

15 CARYN RESNICK: We do love them and I see
16 all of my friends out there. There have been some
17 organizing and the beginning I think of advocacy
18 around raising that meal rate, so we are aware of
19 that and that's being taken into consideration as we
20 move forward with both of the plans for the future of
21 home-delivered meals as well as senior centers.

22 CO-CHAIRPERSON VALLONE: And senior
23 centers you said would be addressed early next year?

24 CARYN RESNICK: Yes.

25 CO-CHAIRPERSON VALLONE: Okay; that's
gonna be very important, especially when we added

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3 that sixth day meal that affects -- so many seniors
4 have contacted us as to how that provides that
5 critical meal for the weekend, for the extra day and
6 to get them over till Monday, so we appreciate that
7 that was baselined and included.

8 I'll turn over to our chair just with a
9 final question as to the providers that are handling
10 the Chinese and the Korean type of meals; what's the
11 update as to the current meals that are being
12 provided versus the demand; are we meeting the demand
13 for those areas, like with the Chinese meals and the
14 Korean Meals? 'Cause I know in my district, it's
15 astronomical, the increase of the amount of Asian-
16 related meals that are being requested.

17 EILEEN MULLARKEY: We are. In Queens,
18 for example, there is one provider who subcontracts
19 with all the home-delivered meal programs in Queens,
20 and any time someone requests a Korean meal they're
21 authorized for that, and the agency that handles the
22 subcontract, they've been able to absorb all those
23 clients that get referred to them.

24 CO-CHAIRPERSON VALLONE: Who handles...
25 [crosstalk]

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3 EILEEN MULLARKEY: Korean-American
4 Services.

5 CO-CHAIRPERSON VALLONE: But which...
6 you're... DFTA's with directly.

7 EILEEN MULLARKEY: No, there is I think
8 five home-delivered meal programs in Queens and each
9 of those programs subcontracts with Korean-American
10 to... [crosstalk]

11 CARYN RESNICK: For the Korean meals.

12 EILEEN MULLARKEY: for the Korean meals.
13 So anyone in Queens who wants a Korean style meal,
14 they're able to get one.

15 CO-CHAIRPERSON VALLONE: Okay and so
16 that's been... how long has it been five?

17 EILEEN MULLARKEY: A couple years now.

18 CO-CHAIRPERSON VALLONE: And that's been
19 able to meet the demand?

20 EILEEN MULLARKEY: Uhm-hm.

21 CO-CHAIRPERSON VALLONE: Okay. I'd be
22 curious to follow up with that. But thank you very
23 much everyone.

24 EILEEN MULLARKEY: You're welcome.

25 CO-CHAIRPERSON VALLONE: Caryn, Happy New
Year to everybody, [inaudible].

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3 CARYN RESNICK: Thank you.

4 CHAIRPERSON CHIN: Yeah, I just want to
5 follow up on that one question; you said that, in
6 your testimony, there are 23 contracts with 17
7 community-based organizations, so do you know how
8 many subcontractors are included in that?

9 EILEEN MULLARKEY: We can get back to you
10 on the exact number of subcontractors; there's two
11 different kinds of subcontractors; one is the lead
12 agency subcontracts, like with the example with
13 Korean-American, and then there's also home-delivered
14 meal programs that cook and then others that
15 subcontract with say like a caterer, so there is a
16 couple different levels of subcontracting, but we can
17 get back to you and give you the exact numbers.

18 CHAIRPERSON CHIN: And also, the question
19 is, another question relating to that is: how many...
20 are any senior centers cooking the home-delivered
21 meals... [crosstalk]

22 EILEEN MULLARKEY: There's about...

23 CHAIRPERSON CHIN: are there like the
24 subcontractor or are they one of the primary
25 organizations that DFTA contracts with?

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3 EILEEN MULLARKEY: It's a combination and
4 I think there are about seven senior centers that
5 cook either as a main contractor or as a
6 subcontractor.

7 CHAIRPERSON CHIN: Yeah, if you could
8 provide us with those data...

9 EILEEN MULLARKEY: Yeah.

10 CHAIRPERSON CHIN: you know which are the
11 subcontractors, which are the senior centers that are
12 providing the meals. Because in previous hearings,
13 right, Council Member Vallone, we have heard from
14 groups that are subcontracting and they feel like
15 they were not able or they were not allowed to do the
16 outreach to let people know that these kind of
17 cultural meals are available, I mean there's
18 definitely more demand than what is being provided
19 now, so the issue is like how do we make sure that
20 every vulnerable senior who really needs a home-
21 delivered meal gets it, and relating to that too is
22 the sixth meal. Now we baselined \$1.2 million, but I
23 think that there's a lot more demand from the centers
24 for that sixth meal. I know that DFTA in the past
25 would just say oh we surveyed the centers and they
really don't want it, but that's not what we are

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3 hearing, so that's the question is, like whether \$1.2
4 million is enough, sufficient to cover. And the
5 other relating to that is that what would it cost to
6 have senior centers open on the weekend and provide
7 the congregate meal on the weekend? Because I have,
8 you know, centers in my district who've asked or who
9 have done in the past that they were open either six
10 days and some even seven days, so it just kind of
11 seems like you know seniors need the congregate meal
12 and the socialization practically seven days a week,
13 but they're only there five days a week. So I think
14 going forward are you looking at what it would cost
15 for centers if they do want to provide that
16 congregate meal on-site, right, or on the weekend and
17 also whether the 1.2 is sufficient to cover the six
18 meals right now.

19 KAREN TAYLOR: We can get back to you
20 definitely on the \$1.2 million and how it's planned
21 to be spent this year. Because it was baselined, we
22 want to be sure that programs understand that those
23 meals will now be a permanent part of their contracts
24 and that that's an obligation as well as a benefit,
25 so we're going through that process now.

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3 Clearly... I agree, I mean I think we all
4 agree that it would be wonderful if there were more
5 centers open for congregate services on the weekends
6 rather than just providing a meal for someone to take
7 home, that would be great. There are very few
8 centers that are able to do that are able to do that;
9 some on a part-time basis; some on a full-time basis,
10 so that would be a wonderful goal, perhaps a long-
11 term goal, because we have so many other needs within
12 the current system that we're -- as Caryn mentioned
13 earlier -- that we've been working very closely with
14 OMB to try to address to bring the current system up
15 to a level where they have more capacity to meet the
16 current needs.

17 CHAIRPERSON CHIN: But that should be
18 included while you're figuring what is the...

19 [background comments]

20 KAREN TAYLOR: We can do that, yeah.

21 CHAIRPERSON CHIN: you know the model
22 budget, so what it would be to really have the best
23 senior... you know one senior center with all the
24 activities and open seven days a week so that we know
25 what the goal is; what we could be fighting for, so
that should be included in your budgeting model.

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2 KAREN TAYLOR: Sure, we can extrapolate
3 and come up with something.

4 CO-CHAIRPERSON VALLONE: Well it's kind
5 of like how the libraries -- at some point there will
6 be some branch [background comments] some place on
7 the sixth or seventh day and I think that would be...
8 at least somewhere within the borough we know in
9 certain sections there will be certain places on an
10 emergency basis [background comments] that could
11 provide a sixth or a seventh day. I think that's a
12 wonderful idea and then let's see how it works
13 [background comments] on a trial basis and maybe try
14 to expand it... [crosstalk]

15 KAREN TAYLOR: And we can... We can let you
16 know; there are some programs that are open if not a
17 sixth day, that are open on a weekend, some of our
18 kosher programs open on a Sunday, may close on a
19 Friday and open on a Sunday so that there is a little
20 bit of carryover in whatever those communities are.
21 But we can let you know the programs that do have
22 weekend days as well.

23 CO-CHAIRPERSON VALLONE: Well I think the
24 Chair touched on something beyond today's scope, but
25 we'll talk about early next year, is our senior

3 center funding and how they're able to handle the
4 increased costs across the board; this is just one
5 small segment of the overall costs of the operation
6 of a senior center -- the staffing, the senior center
7 insurance, the programs, the contracts, the social
8 workers; everything that's part of it, and the meals.
9 I think the push that you're feeling now just on this
10 is just one part of all of that, so I think that's
11 gonna be a big part of how we have to fight so we
12 don't decrease programs or services or have to pick
13 it up on separate ways -- through Council budget or
14 individual Council Members. This is important and we
15 want to advocate for as much funding as we can get
16 and I think we can't ignore that; there's a whole
17 portion of senior center funding that is really at
18 risk if we keep things status quo.

19 You mentioned the RFP in 2020; I thought
20 that was gonna be a little before that, weren't we
21 talking about maybe doing the contracts and
22 subcontracts for food vendors -- the next RFP's gonna
23 be 2020? [background comments]

24 CARYN RESNICK: So the RFP would be
25 probably a year before... [crosstalk]

CO-CHAIRPERSON VALLONE: Okay, that's...

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3 CARYN RESNICK: takes us a whole year to...

4 [crosstalk]

5 CO-CHAIRPERSON VALLONE: It's like the
6 voice...

7 CARYN RESNICK: approve them and get the...
8 yeah... [laughter]

9 CO-CHAIRPERSON VALLONE: the wizard
10 behind the curtain.

11 CARYN RESNICK: Exactly.

12 [laughter]

13 CO-CHAIRPERSON VALLONE: So wait, one
14 more time, so the RFP within a year and then
15 contractors... [interpose]

16 CARYN RESNICK: The 2020 is that
17 contracts would begin in 2020, so that means it takes
18 us about a whole year to procure, go through the
19 process and award contracts.

20 CO-CHAIRPERSON VALLONE: Because that was
21 part of I think the ask, was the increase in the RFP
22 provi... and what we could do within the RFP so that we
23 can now have groups like KCS to provide [background
24 comment] the meals to have additional... Okay. Thank
25 you, Chair.

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2 SENIOR CENTERS 28

3 CHAIRPERSON CHIN: Would DFTA share with
4 us the Pricewaterhouse findings so that we can also
5 take a look at what are some of those suggestions
6 and...

7 CARYN RESNICK: Sure, absolutely.

8 CHAIRPERSON CHIN: Okay, 'cause that's
9 the first time we've heard about it, so that'll be
10 good, alright.

11 Now the other question, this whole
12 voluntary contribution for congregate and home-
13 delivered meals, alright. [background comment] So
14 what was the purpose behind this whole voluntary
15 contribution and do you know how many seniors
16 contribute; how much money is collected; what the
17 funds are used for; and, who set the rates for the
18 voluntary contribution, because it's different from
19 center to center? 'Cause one of the conversations
20 that I was having with my colleague is we were so
21 successful in getting universal free lunch for our
22 students and the depart... you know, [background
23 comment] in our schools; I said, what about universal
24 free lunch for our seniors, because it's the same
25 issue; the whole stigma... I mean some seniors on fixed
income just cannot afford the \$1.75, \$1.50 or \$1.00 a

3 day voluntary contribution and if they don't
4 contribute, it makes them feel bad, because the
5 minute you walk into some of the centers, that's the
6 first table that you come across. So if you can go
7 through the history... [crosstalk]

8 CARYN RESNICK: Yes.

9 CHAIRPERSON CHIN: of this whole
10 voluntary contribution. And also we heard that Meals
11 on Wheels, I mean that home-delivered meals also are
12 supposed to ask for a voluntary contribution, so if
13 you can go through the history of that.

14 CARYN RESNICK: Yes. So this wasn't our
15 bright idea, but it was of our forefathers in 1965,
16 when the Older Americans Act was put in place -- the
17 nutrition programs, Title C I, C II, C III of the
18 Older Americans Act all talk about providing
19 nutritious meals to seniors over 60 and they put the
20 provision in for voluntary contribution. As you
21 know, the programs are not means tested; none of the
22 Older Americans Act programs are based on income, and
23 so I think there were a number of reasons behind the
24 costs share, which is simply that you have some skin
25 in the game and that because they are essentially
free we're asking people, can you or would you help

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3 contribute to the costs. There should not be stigma,
4 nobody should be watching who puts what in the
5 bucket; we certainly have had complaints about that.
6 And then it's kind of all over the place; there tends
7 to be an inverse relationship, counterintuitive, that
8 anecdotally at least we think that sometimes in the
9 poorer communities the contribution level is higher
10 than in more affluent communities. So it's not
11 necessarily tied to one's income status; it's I guess
12 the same way as if you pass the hat anywhere; there
13 are people who feel more obliged to be charitable...
14 [interpose]

15 CHAIRPERSON CHIN: But it's not passing
16 the hat, it's like... [crosstalk]

17 CARYN RESNICK: No, you're right, it's
18 that the ticket at the front door...

19 CHAIRPERSON CHIN: the ticket or the... the
20 minute you walk in -- I had one of my first senior
21 meals... [crosstalk]

22 CARYN RESNICK: We are required to ask...

23 CHAIRPERSON CHIN: and I, you know...

24 CARYN RESNICK: and we do require that
25 our centers post -- [background comment] it's part of
the Older Americans Act that there be a sign posted

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2 -- DFTA does not set the contribution amount.

3 Historically there were times when we did suggest the
4 suggested contribution; that had been under
5 discussion again recently actually raising what the
6 suggested contribution amount is; not talking about
7 eliminating it, but actually raising it. Because
8 there is a very wide disparity across our whole
9 center network and some seniors find that
10 uncomfortable, that you go to one center and it's
11 \$1.25 and another center it's \$3. So we have been
12 talking internally about should there be a uniform
13 suggested contribution. But we are not at liberty to
14 dissolve that; that's both a federal... [crosstalk]

15 CHAIRPERSON CHIN: But you must have...

16 CARYN RESNICK: and a state regulation
17 that we... [crosstalk]

18 CHAIRPERSON CHIN: But you must have some
19 data in terms of how much a center collects...
20 [crosstalk]

21 CARYN RESNICK: We do, we know how much
22 we collect. We do.

23 CHAIRPERSON CHIN: and what they use the
24 funding for. I mean if they're using that funding to
25 supplement the meal budget, then it's a problem, you

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2 SENIOR CENTERS 32

3 know then they're not getting enough reimbursement
4 rate for the meals. I mean there's gotta be some
5 kind of like statistic to look at what is... how much
6 money are they collecting and what, you know the
7 funding is used for. I mean there is different ways
8 of looking at contribution -- yeah, if there was a
9 box there and I could just put whatever I want to
10 put; if I could afford, I can put more [background
11 comment] and for some seniors that come to the
12 center, some of them are still working and to them
13 maybe you know a \$1.25 is... [crosstalk]

14 CARYN RESNICK: Exactly.

15 CHAIRPERSON CHIN: is really cheap but
16 they could afford \$5.00 or maybe they can give, you
17 know, \$3.00 or \$5.00. But the way it is set up now,
18 it's sort of like you're buying a ticket, I mean
19 that's the front line, the minute you walk in there
20 you're expected to pay whatever the amount that the
21 center is asking for, and so that is something that
22 we really need to visit. If the center does not have
23 enough money to run, they cannot... I mean if that is a
24 fundraising project in terms of charging for the
25 meals, you know that's something that we should look
at. I mean yeah, everyone can contribute, you have

3 an event, you have a fundraising event [background
4 comment], everybody can contribute, or nominally, you
5 put in a quarter, but paying \$3.00 or \$1.75, when you
6 look at how many people attend to center and the kind
7 of population that attends different centers, you can
8 seen that something's not totally equal in a way. So
9 I think that is something that we really need to look
10 at in terms of the so-called voluntary contribution.

11 [background comments]

12 KAREN TAYLOR: We did an exercise; I
13 believe it was last spring, on this that we can share
14 with you -- I'll dig it up -- that goes over the
15 amount of contributions that are collected and what
16 the average is and what each site collects, and what
17 each site is asking, so we'll share that with you.

18 CHAIRPERSON CHIN: Yeah, that would be
19 helpful. 'Cause like for... let's say for the senior
20 center, I know previously in the past has been that
21 some centers because they over-serve, then they get
22 the extra money at the end of the fiscal year, if
23 there's any funding left over. Now is it true that
24 each center is... their contract is based on the number
25 of meals that they serve; do we have any statistics
about numbers of seniors that get turned away, that

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3 show up and they say oh, we don't have anymore food
4 because we served our everyone today? Does DFTA
5 collect any data?

6 [background comments]

7 CARYN RESNICK: I think maybe Open Door
8 might be the only place where that happens, where
9 **[inaudible]** actually runs out of tickets. But our
10 other centers, you know if they can't feed everybody
11 because of the facility, they'll do multiple
12 seatings, but it's very rare that people are turned
13 away because there's not enough food. That's not
14 really [background comment] a systemic issue.

15 [background comment]

16 CHAIRPERSON CHIN: So you don't hear that
17 from the centers? Because I've heard from the
18 seniors that shows up at... you know, that's it, all
19 the meals are served... [interpose]

20 KAREN TAYLOR: There are occasions where
21 we hear that as well, especially at centers that
22 cater, because they arrange for a certain number of
23 catered meals to be delivered every day and if some
24 days they get more than anticipated there's very
25 little they can do; they are supposed to and they do
adjust their catering order so that they hopefully

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3 can accommodate anybody who comes. But it does
4 happen every now and then where they get more people
5 than expected and can't provide or they have to
6 provide sort of an alternative meal. But systemwide,
7 our issue is a little bit more on the other side,
8 that there is still capacity for more people to come
9 and get meals at senior centers that we'd love to
10 have come.

11 CHAIRPERSON CHIN: So also is, DFTA ought
12 to be looking at new contract models for senior
13 centers and home-delivered meals programs that allow
14 for the contract reimbursement rate to be adjusted
15 when the price of food you know fluctuates. 'Cause
16 one of the complaints [background comment] that we
17 had is like, you know... yeah, like a COLA would, that
18 food cost is going up, but the reimbursement rate is
19 still the same and that's what we keep hearing over
20 and over again from providers, that there is no
21 adjustment, 'cause contract was signed years ago and
22 nothing changed.

23 CARYN RESNICK: But we're taking meals
24 off... [interpose]

25 CO-CHAIRPERSON VALLONE: Especially with
the ethnic meals...

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2 SENIOR CENTERS 36

3 CARYN RESNICK: Yes.

4 CO-CHAIRPERSON VALLONE: because they're
5 always more expensive.

6 CARYN RESNICK: So obviously meal cost is
7 part of the parsing of the budget process that we're
8 going through; I don't know that we're actually
9 looking at building in a specific COLA for meals, I
10 mean there is the now COLA for overall contracts and
11 changes in indirect rates that will add money to
12 contracts and I think ease some of the burden about
13 the meal rate.

14 CHAIRPERSON CHIN: Okay. I mean that's
15 part of it that you should be talking to the provider
16 and ask them... [crosstalk]

17 CARYN RESNICK: We do...

18 CHAIRPERSON CHIN: for suggestions,
19 right? Is there a... [crosstalk]

20 CARYN RESNICK: every day.

21 CHAIRPERSON CHIN: I'm sure they'll let
22 you know too. [laughter] Is there a difference in
23 cost between meals that are prepared by the center
24 and meals that are catered? Do you have any
25 statistics on that?

3 KAREN TAYLOR: There are differences,
4 yes, although I'm not sure we have an exact answer to
5 that, but clearly there are differences; it depends
6 on so many other factors -- how many staff you have
7 in your kitchen; how many meals you're preparing in
8 your kitchen versus what kind of meals you're
9 catering -- you know, so there is a lot of data that
10 we can certainly give you, but I believe it's...
11 there's really no rule of thumb on that, it's...
12 [background comment] yeah. Yeah.

13 CHAIRPERSON CHIN: I mean would that
14 affect the cost, I mean do you find that it's cheaper
15 in the long run if you have your own kitchen, you
16 prepare your own food versus if you cater outside,
17 that's one thing?

18 [background comments]

19 CARYN RESNICK: It's not an obvious
20 answer; [background comments] sometimes yes;
21 sometimes no, and because of that it depends on the
22 staffing pattern and the operating costs and if you
23 have a particularly good rate with a caterer or it
24 could actually be less expensive.

25 CHAIRPERSON CHIN: So does DFTA do
something with the centers' economy by scale, like in

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3 terms of purchasing certain food items together? I
4 mean it seems like every senior has a little
5 container of milk, right.

6 CARYN RESNICK: So that's... that's one of
7 the recommendations, certainly around home-delivered
8 meals, is the concept of is there a better way to
9 procure food, you know on either with DFTA doing it
10 or on behalf of the providers, and that would hold
11 true for senior centers as well. So I think that's
12 one of the ways that we can try to bring costs down
13 and that we're looking at.

14 CHAIRPERSON CHIN: And also, can you
15 share with us in terms of like we have 270 senior
16 centers... [laughter] I know that we have more
17 [background comments] social adult day care than
18 senior centers.

19 KAREN TAYLOR: We have about 275 sites
20 that are senior programs, congregate programs; we
21 have, you know our basic 246 senior centers and then
22 we have satellites and social clubs and other
23 affiliate senior center type programs, yes.

24 CHAIRPERSON CHIN: So do you know how
25 many of them have their own kitchen and cook their

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2 SENIOR CENTERS 39

3 own meals and how many cater; do you have that
4 breakdown?

5 CARYN RESNICK: Do you know off the top
6 of your head? Elysa Dinzes is our head nutritionist,
7 Director of Nutrition, and I think she has the answer
8 to that question. [background comments, laughter]

9 CHAIRPERSON CHIN: Can you say that again
10 on the record in the mic?

11 CARYN RESNICK: 120 of the 270 programs
12 do not cook for themselves, but then of the
13 remainder... [background comments] of the 120...
14 [background comment] okay, 70 are from commercial
15 caterers, [background comments] oh, the other 50...
16 what we used to call DFTA the DFTA, so one senior
17 center is preparing excess meals and delivering them
18 to another senior center. Don't ask me to do that
19 again. [laughter]

20 CHAIRPERSON CHIN: But you should know
21 that by heard, Caryn... [crosstalk]

22 CARYN RESNICK: I should.

23 CHAIRPERSON CHIN: okay; I expect that.

24 [background comments] It changes... [background
25 comments] but I think that that is something to
really look at, helping senior centers to really have

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3 the capacity of, you know, preparing their own meals,
4 they have their own kitchen; I know a lot of them
5 need to be upgraded, but there is probably a cost
6 savings there, and also, going forward, if we want to
7 talk about more, you know, from farm to table, you
8 know, more fresh vegetables, more locally grown
9 products, I think ultimately... [crosstalk]

10 CO-CHAIRPERSON VALLONE: Yes, you brought
11 up nutrition, so...

12 CHAIRPERSON CHIN: yeah, the nutrition.

13 CO-CHAIRPERSON VALLONE: how has the
14 nutritional aspect of our meals changed over the last
15 year or so? I know we were talking about trying to
16 incorporate some more, you know nutritionally
17 beneficial meals, but again, that brings up the cost
18 versus taste, versus the ability and all that; how
19 are we today with nutrition on the meals?

20 KAREN TAYLOR: Actually we've done quite
21 a bit; the nutrition unit -- well I'm speaking for
22 senior centers at this point; I think they've worked
23 very hard with programs and some programs have really
24 stepped up and they're doing some amazing things with
25 or without DFTA's encouragement. But our
26 nutritionists look for those kinds of assets that a

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3 program may be able to have and gives them technical
4 assistance on how to incorporate more fresh food. It
5 sometimes is a challenge when there are certain
6 dietary habits that different populations are used
7 to; the big one of course was the reduction in
8 sodium, which was a big hurdle to get over, but I
9 think we've kind of been there and I think you'll
10 probably hear from some of the other providers later
11 on a little bit about their experiences, but we... yes,
12 I think we have come a long way; I don't have any
13 exact numbers for you, but we see a lot more of that
14 and we see a lot more participation in the farmers
15 markets and things like that as well.

16 CO-CHAIRPERSON VALLONE: Well I think
17 that's what the Chair just brought up. Do we have
18 any numbers on the increase of the farmers market and
19 the farm to table and even the schools now are
20 starting to have their own gardens and that would be
21 a wonderful way to expand locally. [background
22 comments] That might be something for the future if
23 we can get... [crosstalk]

24 CARYN RESNICK: I don't know if we have
25 numbers, but we certainly can talk about different
26 programs that are... [crosstalk]

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2 SENIOR CENTERS 42

3 CO-CHAIRPERSON VALLONE: Yeah, I think
4 that...

5 CARYN RESNICK: are doing all kinds of
6 incredible things; you're gonna hear from some of
7 them today, I think.

8 CO-CHAIRPERSON VALLONE: Okay, thank you.

9 CHAIRPERSON CHIN: We've been joined by
10 Council Member Deutsch. And just another question on
11 wait lists. So is there any current case management
12 wait list and how many of those seniors would qualify
13 for home-delivered meals?

14 [background comments]

15 EILEEN MULLARKEY: There's about 1,100
16 clients who are on the case management wait list, but
17 what it means is they're waiting for a case manager
18 to visit them at home. So when these clients get
19 connected to the case management agency, they have a
20 mini assessment over the phone; if they need meals,
21 meals are initiated before the case manager visits.
22 These clients are also called every two months, so if
23 it was a client where they screened them and they
24 felt like they really need a home visit; they
25 wouldn't be on the wait list, they would be visited.
But clients that they feel can manage safely at home

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3 with the meal until the case manager can visit; they
4 stay on the wait list until case management can
5 absorb them.

6 CHAIRPERSON CHIN: So out of the 1,100,
7 do we know how many have a home-delivered meal?

8 EILEEN MULLARKEY: I would estimate 90%
9 of them.

10 CHAIRPERSON CHIN: Okay. Why are there
11 still 1,100 seniors on wait lists for case
12 management? I thought we provided the funding to
13 eliminate the wait list and this is December. Caryn,
14 the money didn't get out the door? I mean, what's
15 going on?

16 EILEEN MULLARKEY: I mean it does take
17 some time to get the money to the programs, for the
18 programs to hire, to onboard them, so even programs
19 who staffed up, they can't like first day give the
20 new worker 65, so it is a process to build up, but
21 we're hoping that, you know, it continues to get
22 better over the year. That being said, you know
23 there's always new people coming [background comment]
24 into the system.

25 CARYN RESNICK: So as we clean up the
wait list, then the next [background comment] group,

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3 the next waive comes on and then sometimes there is a
4 lag. So...

5 CO-CHAIRPERSON VALLONE: Now you sound
6 like us; that's what we always say, **[inaudible]**...
7 [crosstalk]

8 CHAIRPERSON CHIN: No, that's when uh...
9 OMB never admitted that there was a wait list...

10 CO-CHAIRPERSON VALLONE: Yeah, right.

11 CHAIRPERSON CHIN: right and they... people
12 need service; if you're gonna provide it, they will
13 come and that's why we need additional funding every
14 year, because the senior population is growing and
15 they need it there. Council Member Deutsch; do you
16 have a question for the panel?

17 COUNCIL MEMBER DEUTSCH: If you insist.
18 [laughter, background comment] Good afternoon. I
19 just have a question -- you don't have to go through
20 the numbers again, but from the 240, the sources that
21 the food is prepared, so you have catered meals --
22 can you just go over like... [background comment] no,
23 no; not the... you don't have to give me the numbers,
24 just only from how many different sources does the
25 meals get prepared? So you have... one could be from a
caterer... [crosstalk]

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2 CARYN RESNICK: So cooking on-site..

3 [crosstalk]

4 COUNCIL MEMBER DEUTSCH: Okay.

5 CARYN RESNICK: in the senior centers and
6 then catered through a commercial caterer, and then
7 catered by another senior center, so a senior center
8 that has a very large kitchen may cook and prepare
9 not only for their own programs, but then drop off
10 and deliver to other programs. So those are the
11 three different ways that we... [crosstalk]

12 COUNCIL MEMBER DEUTSCH: So do you know...
13 what is the difference in cost per meal in the
14 three...? [interpose]

15 CARYN RESNICK: We just... We just went
16 over that, and it turns out that it's not that one is
17 more or less expensive than the other, because things
18 are not equal... [crosstalk]

19 COUNCIL MEMBER DEUTSCH: No, no, no, no,
20 no; my question is what is the cost, like
21 approximately what is the cost; is it \$1.50
22 [background comment] a meal; a dollar a meal? How
23 much would it come out to? [background comments]

24 CARYN RESNICK: Yeah. For a senior
25 center meal... [interpose]

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3 COUNCIL MEMBER DEUTSCH: Yeah.

4 KAREN TAYLOR: For a senior center meal...

5 [interpose]

6 COUNCIL MEMBER DEUTSCH: For a prepared
7 meal, yeah.

8 KAREN TAYLOR: The actual cost of just
9 the food, and this is without the staffing allocation
10 and everything, just the food itself, I think ranges
11 from on the very low end about what, two... a little
12 under \$3.00 up to \$7.00 or \$8.00 a meal in some
13 cases... [crosstalk]

14 COUNCIL MEMBER DEUTSCH: Wow. And... Okay.
15 And all this is strictly City funded; nothing from
16 the State. Do you ever get anything from the State
17 [inaudible] meals...? [crosstalk]

18 CARYN RESNICK: No and the majority is
19 federally funded.

20 COUNCIL MEMBER DEUTSCH: Federally
21 funded. So the free lunch program for schools, that
22 costs about \$1.50, right, approximately \$1.50, 'cause
23 I kept on asking for kosher and halal options;
24 [background comment] they said no, we can't go over
25 \$1.50, it's too expensive, [background comment] so I
was just curious to compare it to the meals that we

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3 give to the senior centers to the seniors compared to
4 DOE, what they provide for our kids, [background
5 comment] 'cause I think \$1.50 is kind of low to give
6 a good nutritional meal; it should be... the numbers
7 should be like Department of Aging has, 'cause that
8 is a good meal and people walk away and they don't
9 have to look for a second meal or a second snack, but
10 \$1.50 is pretty low when you're talking about our
11 children, right? So I just wanted to see the
12 comparison between the free lunch... [interpose]

13 CARYN RESNICK: So one of the differ... I
14 mean I can't comment on whether it's too low or not,
15 but one of the... the big difference is, is DOE does
16 their own procuring and they are preparing meals on-
17 site, so there's much more cost control than what we
18 have in our current system, with over 100 different
19 sponsors and cooking or catering and preparing in
20 different ways, and procuring food in different ways.
21 Some people buy from their local grocer in the
22 neighborhood and you know others buy from big, large...
23 and those are some of the things we're looking at and
24 ways in which we can possibly do better on
25 procurement throughout the system... [interpose]

COUNCIL MEMBER DEUTSCH: Right, okay.

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3 CARYN RESNICK: but I would imagine
4 that's part of why DOE can do a meal at a much lower
5 price point.

6 COUNCIL MEMBER DEUTSCH: Uh-huh. Okay.
7 Thank you.

8 CHAIRPERSON CHIN: Thank you. We are
9 also joined by Council Member Koslowitz. Council
10 Member; do you have any questions for the panel?

11 COUNCIL MEMBER KOSLOWITZ: Not right at
12 this moment.

13 CHAIRPERSON CHIN: Okay. We did talk
14 about your sixth meal...

15 COUNCIL MEMBER KOSLOWITZ: Okay.

16 CHAIRPERSON CHIN: making sure that... they
17 have to let us know whether they need more money to
18 make sure every senior who wants it gets it.

19 Any other questions we have for the
20 panel? [background comments]

21 Okay, one last question is that, besides
22 senior center home-delivered meals, are there any
23 other ways to a low-income senior can access
24 nutritious meals from the City. [background
25 comments] Food pantries and... [crosstalk]

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3 CARYN RESNICK: Yes, we're actually
4 looking at that at this very moment, but yes, of
5 course, there are food pantries throughout the City
6 of New York. You're gonna hear very soon from our
7 partner, City Meals, which does deliveries for
8 holidays and weekends and does grocery bags of
9 nonperishable goods. There are now some mobile food
10 pantries, so there are many other ways that somebody
11 who's hungry can access meals. But of course we'd
12 like seniors, anybody over 60, to come join us in the
13 center, 'cause there is all the rest of the wealth
14 and activity that goes on there and so much more than
15 just a meal.

16 CHAIRPERSON CHIN: Okay. Well thank you
17 so much... [interpose]

18 CARYN RESNICK: Thank you. Happy
19 Holidays.

20 CO-CHAIRPERSON VALLONE: Thank you.

21 CHAIRPERSON CHIN: for coming today,
22 Happy Holidays, and [background comment] we look
23 forward to continue working with you; it's been a
24 very productive four years and we had a victory this
25 year with the Year of the Senior budget and we're
gonna move forward to make sure we build on the gains

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3 that we've made, and thank you and we're gonna call
4 up the next panel.

5 CO-CHAIRPERSON VALLONE: Thank you very
6 much.

7 [background comments]

8 CHAIRPERSON CHIN: William Dionne from
9 Carter Burden Network; Ariel Savransky, UJA-
10 Federation; Danielle Christenson from Gods Love We
11 Deliver; and Rachel Sherrow from Citymeals on Wheels.

12 [pause]

13 CO-CHAIRPERSON VALLONE: Ah, there you
14 are, Rachel; you were hiding on us. Yes, you should
15 go first.

16 [pause]

17 [background comments]

18 CHAIRPERSON CHIN: Okay, you may begin.

19 RACHEL SHERROW: Alright. My name is
20 Rachel Sherrow; I'm the Associate Executive Director
21 at Citymeals on Wheels, and I just want to begin by
22 thanking Council for your continued support of aging
23 services especially past Year of the Senior, which
24 was an incredible win for all of us and we're greatly
25 appreciative and we know it's going to continue this
year.

3 As you know, Citymeals is a not-for-
4 profit working in partnership with the Department for
5 the Aging as well as all of the providers who provide
6 home-delivered meals as Caryn described. We deliver
7 meals on weekends, holidays and in emergencies, so
8 homebound elderly New Yorkers will not go without
9 food any day of the year and have some extra. I'm
10 sorry about that; there was extra paper in our
11 printer and so some private stuff was attached to the
12 back of that. [background comments] Pre-net
13 neutrality.

14 So as you'll hear from my colleagues and
15 other advocates, studies suggest that one in four
16 senior citizens living in our communities is
17 malnourished. According to Hunger Free America,
18 there has been a 25% increase in food insecurity in
19 the senior population, and a Hunger Study conducted
20 by LiveOn NY shows this to mean basically that 35% of
21 older adults in New York City are living with food
22 insecurity, or hunger, they're just literally hungry.

23 Meals on Wheels is a very vital service
24 for our homebound elderly to prevent hunger, decrease
25 isolation and ensure our older neighbors can remain
in their homes and live within their communities and

3 neighborhoods, as they wish. However, having the
4 right nutrition is also crucial for this population
5 and for years the system has relied on community-
6 based organizations which know their local
7 populations and cultural traditions to prepare and
8 deliver those meals appropriate to their meal
9 recipients. However, as the city's neighborhoods
10 have shifted demographically, and a more diverse
11 group of older adults live together, having only one
12 choice for a meal no longer works.

13 In addition, Citymeals undertook a study
14 with the Columbia University Dental School which
15 showed that there are meal recipients unable to eat
16 part of their meals due to oral health issues,
17 therefore missing essential nutrients and not
18 fulfilling the benefits of meals on wheels. Thus, we
19 need to offer choice and diversity in what we serve
20 both culturally and therapeutically to best serve
21 this vulnerable population.

22 For example, in addition to funding the
23 weekend meals for homebound elderly, Citymeals
24 prepares over 600,000 shelf stable meals at our
25 warehouse for holiday weekends and emergencies, all
of our food is kosher which enable all of our

3 recipients to accept and eat the food. However, we
4 would love to be able to offer a better variety for
5 example, to serve those who are gluten-free or vegan,
6 setting aside all the therapeutic needs that our
7 clients have. Hopefully, with the partnership of
8 DFTA, we hope that the near future, and obviously the
9 RFP, which I still just want to clarify, if it's
10 calendar 2020 or... [background comment] thank you,
11 Chair; I've got it. Alright. [background comment]
12 Yes. No, I love it. Hopefully this will help our
13 recipients have greater choice for taste, culture and
14 oral health needs. However, this cannot happen
15 without an investment in our system for both
16 nutritional education, so our centers actually know
17 how to prepare these special meals, and appropriate
18 funding which covers the cost of both the meal and
19 delivery and all the components involved including
20 administrative costs, with increases based on the
21 increase in prices, and you talked the COLA's cost of
22 really just the consumer price index -- milk goes up
23 every year; how can we keep up with those growing
24 costs?

25 We should also look toward modernizing
the system as a whole to include technology and

3 accessibility to make the delivery process more
4 efficient and to push information out about the
5 recipients faster -- this is 2017; we live in New
6 York City; we shouldn't be writing on pieces of paper
7 anymore.

8 Bringing a meal to the door is one less
9 struggle for the homebound to worry about
10 financially. In addition, this food delivery is one
11 way to prevent them from slipping into more expensive
12 kinds of care, and evidence does support the fact, it
13 really does support the fact that programs like meals
14 on wheels which allow older adults to age in place
15 may help save costs for families, governments and our
16 health system. This also benefits caregivers who are
17 able to go about their daily activities knowing that
18 a meal is coming to the door.

19 So hopefully we will be able to do this
20 and as we move into our 36th year as Citymeals, we
21 again thank Council and our partners, our grassroots
22 organizations, and DFTA and we hope that we can help
23 this process move along.

24 ARIEL SAVRANSKY: Good afternoon
25 Chairperson Chin, Chairperson Vallone and members of
the Committee on Aging and Subcommittee on Senior

3 Centers. My name is Ariel Savransky and I am an
4 Advocacy and Policy Advisor at UJA-Federation of New
5 York. On behalf of UJA, our network of nonprofit
6 partners and those we serve thank you for the
7 opportunity to testify on seniors' access to
8 nutritional and culturally competent congregate and
9 home-delivered meals. You have my longer testimony
10 and Rachel actually made a lot of the points that I
11 was planning on speaking about, so I'm going to be
12 pretty brief in my testimony today.

13 I would like to start off as well by
14 thanking the Council and the Administration for the
15 historic investments in DFTA core programs in FY18.

16 Our nonprofit partners provide vital
17 services and support to New Yorkers; we are also the
18 largest provider, through our core partners, of
19 kosher food. The high cost of a kosher meal presents
20 a unique challenge for many of our agencies in their
21 work.

22 Furthermore, as Rachel spoke about
23 before, while food insecurity rates among most New
24 Yorkers have declined, there has been an increase
25 among seniors. Additionally, food pantries and soup

3 kitchens continue to see increased visitor traffic
4 and many report experiencing food shortages.

5 As evidenced by these numbers and the
6 increased nutritional requirements for seniors, there
7 is an immense need for access to nutritional and
8 culturally appropriate meals for this population.

9 We offer the following recommendations:

10 First, increase reimbursement rates for
11 kosher meals. As discussed previously, the high cost
12 of a kosher meal presents a unique challenge for many
13 of our agencies. Providing culturally sensitive meal
14 services for seniors is a priority for us and we are
15 particularly concerned about reimbursement rates for
16 kosher home-delivered meals.

17 Second, we urge you to explore ways to
18 maintain access to culturally appropriate, home-
19 delivered meals for Holocaust survivors, which is
20 essential to addressing the food insecurity that is
21 often found in this population. Furthermore, beyond
22 simple meal provision, home-delivered meals provide
23 important social contact for those who are confined
24 to their homes. It acts as an access point for other
25 important services and helps survivors to age safely
and in place.

3 Lastly, we urge continued investment in
4 expanding the anti-hunger safety net through
5 enrollment in programs such as SNAP as well as the
6 Emergency Food Assistance Program.

7 Thank you for the opportunity to testify
8 today and we look forward to working with you to
9 address this important topic.

10 DANIELLE CHRISTENSON: Thank you, Chair
11 Chin and Chair Vallone and the Committee for allowing
12 me to speak today. My name is Danielle Christenson
13 and I am proud to represent God's Love We Deliver. I
14 will not read my testimony verbatim; I simply want to
15 highlight the work we do for seniors who live with
16 chronic and severe illnesses.

17 For those of you who don't know us, we
18 are the only not-for-profit medically tailored meal
19 provider in New York City that delivers to people who
20 are too sick to shop or cook for themselves.

21 What I mean by medically tailored meals
22 is; our seven registered dietitians work with each
23 client to develop a meal plan that takes into account
24 their illness, the medications they are taking, and
25 current nutritional guidelines. Dietitians then work
directly with our chefs to create a meal plan, all

3 made from scratch in our kitchen. Last year alone we
4 delivered 1.7 million meals to 7,000 clients, their
5 children, and caregivers. About 65% of those clients
6 were seniors.

7 What we know is many seniors need our
8 meals. Chronic illness is on the rise for older
9 adults: 92% of seniors in the United States are
10 living with at least one chronic illness, 72% are
11 living with more than one chronic illness.

12 Individuals with chronic health conditions account
13 for approximately 86% of all health care spending.
14 Combined with the fact that 75% of seniors were
15 unable to shop for food on their own and 58% were
16 unable to prepare their own food means there is a
17 need for our services. If you're a senior living
18 with a chronic illness in New York City and are
19 unable to shop or cook, God's Love is the only
20 option.

21 Last year, 4,402 New York City seniors
22 received over one million meals from God's Love.
23 Over 65% of these services were supported with
24 private funding, which gets harder and harder to
25 raise each year. For certain populations, this
percent is higher. For seniors with end stage renal

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3 disease, which disqualifies individuals from eating
4 meals from DFTA-funded agencies, over 93% of the
5 meals we deliver to this population are funded
6 through private donations.

7 We receive many referrals from DFTA for
8 seniors with chronic illness, despite having no
9 contractual relationship with them. Because of this,
10 we urge DFTA to issue an RFP for the provision of
11 medically-tailored, specialty meals for the senior
12 population most at risk for malnutrition,
13 hospitalization and institutionalization. God's Love
14 We Deliver is also eager to hear what topic area the
15 consultants hired by DFTA have in their purview, and
16 is interested in working together to address the
17 needs of severely ill seniors.

18 Thank you.

19 WILLIAM DIONNE: Good afternoon and I
20 also would like to thank you for this hearing and all
21 the amazing work City Council has done this year.

22 My name's Bill Dionne; I am the Executive
23 Director of the Carter Burden Network (CBN); we have
24 13 different programs throughout Manhattan, four of
25 which are senior centers, and they range from
Roosevelt Island up to an East Harlem NYCHA building

3 site and throughout. I'm going to not read this
4 testimony because much of it has been said, so I
5 don't want to be redundant, although I would like to
6 also speak to some of the issues that you've raised.

7 I think that it's important to look at
8 the historical perspective of the meals, and that is
9 that before the Older Americans Act there were
10 articles of people that were living on cat food and
11 so the whole point of the meal delivery was: oh my
12 God, we've got to do something about this, people are
13 starving and they're eating cat food; we have to do
14 something. Well hurray, we've done something; we're
15 now at a point where we really do need to look at
16 what else can we do that's effective.

17 I think great strides have been made
18 through DFTA; the idea that there are approved menus
19 I think have helped abundantly; I'm afraid I remember
20 the day walking into a senior center where they were
21 serving peas, hot dogs and French fries and while I
22 may find that delicious, it's not really what we
23 should tout as being healthy folks to eat.

24 So we have made progress, but there's so
25 much more we need to do, and I think in the whole
idea of... I have had the pleasure of working with

3 Citymeals with regards to the whole oral health
4 issue, and just to put that in perspective, when you
5 realize that almost a third of the people that are
6 receiving a home-delivered meal or in a senior center
7 are looking at their plate and cannot eat something
8 on the plate; that's an issue, and it's an issue that
9 I believe can be fixed and not with great difficulty.

10 In our senior centers we offer three
11 choices a day, so a person can come in and they can
12 order main plate, they can order a veggie burger, or
13 they can order a salad, and it's a very cost-
14 effective way because there is much less waste,
15 because whatever was served earlier in the week, such
16 as salmon, can then be turned into a salad, so there
17 is very little waste. It is a way of looking at food
18 a little bit differently. I think that it would be
19 very easy to offer a soft option, so when people
20 check in, what they'll do is, they are going through
21 the payment issue -- which I would actually like to
22 speak to a bit -- but they're also making a choice as
23 to which one of the three options they're having, and
24 they get a colored tile which will say what it is
25 they're eating because they are served restaurant
style. So it would be very easy to add a soft

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3 option, and as importantly, when you look at health,
4 many people are on blood thinners, Coumadin or
5 something of that nature; we shouldn't even be
6 serving them salad; we don't necessarily know that
7 information, but the individual would be able to say
8 I need a non-leafy item. So I think there are easy
9 fixes to this even though... [crosstalk]

10 CO-CHAIRPERSON VALLONE: Is that what you
11 mean by a soft option?

12 WILLIAM DIONNE: I'm saying two different
13 things, [background comment] I'm sorry. Soft is for
14 folks... [crosstalk]

15 CO-CHAIRPERSON VALLONE: **[inaudible]**

16 WILLIAM DIONNE: that can't chew... thanks;
17 I knew you would...

18 CO-CHAIRPERSON VALLONE: 'Cause we're
19 listening. [sic]

20 WILLIAM DIONNE: Soft is for those folks
21 that can't eat things that are being served to them,
22 and there is a very large percentage of that
23 happening every day. The leafy vegetable is for
24 folks that are on blood thinners; they shouldn't be
25 eating lettuce, as an example; there are several
things they shouldn't. We don't have that

3 information; they know individually, so again, it's
4 giving them the opportunity to provide us with what
5 it is they need; they should have that choice as an
6 option.

7 The contribution -- DFTA and we know
8 exactly where the money is going -- to your point,
9 Councilwoman Chin -- and that is that it's the bottom
10 line of our budget; it's within our Department for
11 the Aging budget for our senior centers, so just as
12 an example, last year in one of our centers I said
13 that we would get donations of \$50,000, so within
14 that \$50,000, it's cost out what's going for food,
15 what's going for salary, so we said we were going to
16 get \$50,000 when in fact we got \$32,000. So when you
17 look at the bottom line of our budget, there is a
18 shortfall of \$18,000 -- just using that as an
19 example, when you were asking well how do we know
20 what the money is being used for.

21 So the whole idea of when you think of
22 how many chickens are bought throughout the year in
23 senior centers, when you hear this number, the whole
24 idea of group purchasing is absolutely... I know that
25 it is something that LiveOn has looked at for several
years and tried to work with, but it's really

3 something that could be looked at and much more

4 **[inaudible]**. So when you talk about the style of
5 food, I have senior centers; I do catering for other
6 senior centers; I have a program on Roosevelt Island
7 where the kitchen is absolutely inappropriate, so I
8 can't cook there, so I am catering in, and I have
9 absolutely found that the cost of providing the meals
10 in my own kitchen is cheaper, and more importantly
11 than cheaper, as far as I'm concerned, is quality,
12 because I have complete control of the quality of the
13 meal that I'm serving.

14 Bear with me; I'm just... I have been
15 writing throughout this whole thing.

16 I do also, if I might, to your point,
17 Councilwoman Chin, is when you're looking at senior
18 centers and meals, you really do have to look at the
19 whole idea of people coming together and combating
20 isolation and loneliness; there have been report
21 after report of how poorly this affects people's
22 health if they are lonely and don't feel that there
23 is a place where they can go, and people are not
24 going to walk into a senior center and say oh my God,
25 I'm here because I'm lonely; it's much easier to say
I'm here for a meal. All of this being said, I so

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3 applaud the Department for the Aging's look at right-
4 sizing the budget for senior centers; I have a center
5 that's funded, to my thinking, more appropriately
6 than others and that is a seven day a week program,
7 to your point, and I absolutely see the need for the
8 folks coming in on the weekend and they're not
9 necessarily the people that are coming during the
10 week, although certainly to a large percentage they
11 are. I also utilize the sixth meal, which there is a
12 line for people on Thursdays and Fridays -- we offer
13 it two days a week -- and there is a line for people
14 purchasing those meals; we sell out every single
15 time. I think I'm finished.

16 CO-CHAIRPERSON VALLONE: And that was the
17 short version.

18 WILLIAM DIONNE: Yeah, that...

19 CO-CHAIRPERSON VALLONE: That's how you
20 started [sic].

21 CHAIRPERSON CHIN: Well thank you. I
22 mean thank you for addressing some of the questions
23 that came up and as advocates, you know we appreciate
24 you know your advocacy, your input, your partnership,
25 and that's why we were so happy that we were able to
achieve, you know, the budget that we were able to

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3 get for the Year of the Senior and we're going to
4 continue; it's gonna be the decade, alright, and then
5 I think when I saw Bobby the other day, he said let's
6 work towards the century, okay, so let's... one step at
7 a time, but we definitely have to build on the gains
8 that we have made and we want to make sure that every
9 senior can access a nutritious meal and to be able to
10 come to a center and share with their friends, so
11 thank you [background comment] for all the great work
12 that you do.

13 CO-CHAIRPERSON VALLONE: Just one quick...
14 and Rachel, you brought up a question that we
15 should've had at the last hearing, when we were
16 grilling Access-A-Ride on technological improvements
17 [background comment] and you said about paper. Could
18 you maybe just expand, 'cause I don't... [crosstalk]

19 RACHEL SHERROW: Sure.

20 CO-CHAIRPERSON VALLONE: think that's
21 been mentioned ever before and the drop-off system...
22 [crosstalk]

23 RACHEL SHERROW: Right. Nothing's wrong
24 with paper, right.

25 CO-CHAIRPERSON VALLONE: and the whole
chaos that goes into that... [crosstalk]

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3 RACHEL SHERROW: Right, I mean basically
4 for Meals on Wheels there is literally a route sheet;
5 it's a sheet of paper that is given to the deliverers
6 and when they go to deliver the meal there's maybe
7 some notes or comments, some information, important
8 information on there, and then that paper comes back
9 and it's reporting who got their meals; who didn't
10 get their meals; if there was something amiss with
11 the recipient. I mean everybody has a smartphone; I
12 am sure that there is an app out there...

13 CO-CHAIRPERSON VALLONE: Except my
14 parents, but.

15 RACHEL SHERROW: But you know what;
16 deliverers should... that should be funded, smartphones
17 for deliverers so that Mrs. Smith can also sign or
18 maybe press down on a button so that when she calls
19 two hours later, 'cause she has a little bit of
20 dementia, and says my meal wasn't delivered, we can
21 say, I understand that you don't think it was; why
22 don't you go and look in your refrigerator, or if
23 Mrs. Smith falls on the floor, more immediate help,
24 or if we're going and we're driving around Midtown
25 and this crazy, you know the Christmas tree and
everything, Mrs. Smith can be re-routed behind

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3 Mr. Jones because the GPS system is working, so
4 instead of trying -- 'cause I know Mrs. Smith is
5 next; I can only go to Mrs. Smith, those kinds of
6 things to really speed up the process and modernize
7 it; I mean why are we filing away papers at all
8 anymore? So that kind of stuff.

9 CO-CHAIRPERSON VALLONE: Right, those are
10 the things that Albany... [crosstalk]

11 RACHEL SHERROW: Other parts of the
12 country use apps for meals on wheels, Upstate.

13 CO-CHAIRPERSON VALLONE: So we need to
14 expand. [background comment]

15 RACHEL SHERROW: Those are other parts of
16 the country. [laughter]

17 CO-CHAIRPERSON VALLONE: That's right,
18 that's uh... well that's what we always say, they're
19 not happy when we say that, but... [crosstalk]

20 WILLIAM DIONNE: That's why they hate us.

21 CO-CHAIRPERSON VALLONE: So much... I think
22 you're always... your advocacy is always teaching us
23 for legislation and budget, future hearings, so we
24 always thank you and I can't believe you're the only
25 provider for medically provided meals and so you say...

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3 how many... do you have a percentage of how many times
4 DFTA or how many clients that DFTA refers to you?

5 DANIELLE CHRISTENSON: I don't personally
6 have that number, but... [crosstalk]

7 CO-CHAIRPERSON VALLONE: That would be
8 interesting.

9 DANIELLE CHRISTENSON: yes, I can
10 definitely get that to you... [crosstalk]

11 CO-CHAIRPERSON VALLONE: I think
12 especially since there's that partnership cooperation
13 and these are the type of things that we need to look
14 at and there's not really another option.

15 UNKNOWN FEMALE: It's about 30%.

16 CO-CHAIRPERSON VALLONE: See... I was
17 waiting for the voice behind the curtain to give me
18 the... you know that one... so 30%. Okay. Thank you
19 very much everyone, Happy Holidays.

20 CHAIRPERSON CHIN: Yes, thank you. We're
21 going to call up the next panel -- Nora Moran, United
22 Neighborhood Houses; Andrea Cianfrani, LiveOn NY;
23 Meera Venugopal, India Home; Allison Simmons Brown
24 [sic], HANAC. Anyone else that wishes to testify,
25 please make sure you fill out a slip with the
sergeant.

2 [pause]

3 CO-CHAIRPERSON VALLONE: Feel free to
4 jump in whenever you want.

5 NORA MORAN: Okay, great. Thank you. My
6 name is Nora Moran; I am a Senior Policy Analyst at
7 United Neighborhood Houses; we are New York City's
8 federation of settlement houses, 38 members serving
9 750,000 New Yorkers each year. You know to build
10 upon many of the comments that were made earlier
11 today, you know we know that meal programs are a
12 really important part of supportive services for
13 older adults, since good nutrition is such a key
14 determinant of health outcomes as we age. Settlement
15 houses play a really big role in this in New York,
16 they are serving 1.3 million congregate meals to
17 48,000 people through their neighborhood and
18 innovative senior centers, and they're serving 1.4
19 million meals through their home-delivered meal
20 programs to about 6,000 older adults each year, and
21 our members strive to operate senior centers and
22 home-delivered meal programs that are high quality,
23 that are responsive to the needs and preferences of
24 older people. In recent years they have identified,
25 like many others, a greater need for variety in their

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3 meal offerings, mainly around culturally appropriate
4 meals as well as meals that are responsive to health
5 issues such as diabetes, oral issues, etc. and they
6 have identified that cost is often the biggest
7 barrier in order to be able to meet those needs. We
8 have been doing some work with them to understand
9 that a little bit more and see what some of those
10 costs look like and we have been looking at... there
11 was a recent national evaluation that the
12 Administration on Community Living did of all the
13 Administration on Aging nutrition programs to
14 understand both outcomes and true costs of what those
15 meal programs are. So that evaluation found that the
16 average true cost of a home-delivered meal is \$11.06;
17 to offer a point of comparison in the UNH network,
18 the contractors with a home-delivered meal contract
19 receive \$8.12 from DFTA to provide their meals. And
20 the congregate side of things; the average cost of a
21 congregate meal nationally is \$10.69 and then the UNH
22 network among neighborhood senior centers, their
23 average reimbursement rate is \$7.98. So some of our
24 members incur deficits in order to run these programs
25 and meet the needs of their local communities and
without an increased reimbursement rate, it's a

3 challenge to offer the culturally and nutritionally
4 appropriate meals that people are interested in,
5 retain staff, offer competitive wages, etc., so we
6 would obviously love to see an increased
7 reimbursement rate more in line with some of that
8 analysis of what the true cost of meal provision
9 actually is, and we'd also love to see a greater set
10 of providers be able to refer to home-delivered
11 meals. Currently, if you are in need of a home-
12 delivered meal you have to go through a DFTA case
13 management organization in order to eventually get
14 that meal turned on; a lot of our members run NORC
15 programs and there are case managers within the NORC
16 who are capable of also doing that assessment for
17 meals, but then find that they have to refer someone
18 to a case management contractor when sometimes the
19 NORC program and the home-delivered meal program for
20 that area are run by the same organization, so it's
21 referring someone externally to only have them be
22 referred back to them for a different program, so
23 streamlining that would obviously make it a more
24 seamless experience for clients, which is what our
25 members want, and reduce some of the administrative
burden on their end as well.

3 And finally, just to speak to an example
4 of farm to table and local produce was raised before,
5 just to give an example of something that's happening
6 on that; Lenox Hill Neighborhood House, which is a
7 settlement house and UNH member organization, has
8 started a program called The Teaching Kitchen, which
9 is a training and technical assistance program that
10 helps nonprofit organizations with institutional food
11 programs serving low-income clients to either convert
12 their programs to or accelerate their programs toward
13 a farm to institution model of serving meals; being
14 able to do it within the costs of their current
15 contract, they identify different produce suppliers
16 to work with, they do a lot of work with GrowNYC, and
17 so far they have trained 22 organizations to date on
18 how to change their menus and offer more farm to
19 table offerings, and for the organizations that have
20 gone through the training, they found it really
21 interesting, you know resistant initially to some of
22 those menu changes, but once the changes actually
23 happened, they get very positive reviews from clients
24 coming to the center and eating those meals, so just
25 an example of some good work that's happening in the
city and I'm sure they'd be happy to share some of

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3 that with you directly as well if you are interested,
4 so thank you.

5 ANDREA CIANFRANI: Good afternoon. I am
6 Andrea Cianfrani; I'm with LiveOn NY. Council Member
7 Chin, Council Member Vallone; your incredible staff,
8 thank you all your leadership this year, we were
9 really proud to be advocating with our advocate
10 partners as well as standing strong to make this the
11 Year of the Senior, and we truly appreciate your
12 leadership; we know that that took a lot to make it
13 happen and we're very proud to be here today.

14 We also very much thank Mayor de Blasio,
15 as well as the Speaker and the Finance Chair for the
16 \$1.2 million in new baselined funding for the
17 congregate and home-delivered and weekend meals as
18 part of this Year of the Senior campaign, and that's
19 obviously what we're here talking about today.

20 I echo what several of my colleagues have
21 said; again, LiveOn NY represents about 100 members
22 citywide, community-based agencies that offer a wide
23 variety of services to older adults, including senior
24 centers serving congregate meals; home-delivered
25 meals, so this is a really important part of our
members' work and what they value very highly and I

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3 am very glad to be here talking at this hearing today
4 about this subject.

5 As the Older American Act was mentioned
6 often today and at inception senior centers, which
7 were borne out of the OAA, were aimed at providing
8 nutritional services which are often lacking for
9 seniors and still today through the U.S. The model
10 has expanded for senior centers to include other
11 services, as we all know, that are very much valued,
12 but really we know that meals are still a big part of
13 this program and at the heart of senior centers. The
14 value of these congregate meals for the lives of
15 thousands of New Yorkers remains very important and
16 very valued.

17 Food insecurity remains a harsh reality
18 of daily life for many New Yorkers. With 250 million
19 meals needed to reach food security for all, and
20 demand for nutrition services remains significant for
21 seniors. This is highlighted by the fact that one in
22 six seniors struggles with hunger in the U.S. This
23 inadequate nutrition, as we know, especially in older
24 adults, can exacerbate other health conditions and
25 make things worse, so we are very proud to represent

3 a network that is focused on providing solutions and
4 helping reduce those possible concerns.

5 A couple things we wanted to highlight
6 about home-delivered meals and congregate meals is
7 that they combat more than just the strains of food
8 insecurity. We have had many people talk here today
9 about isolation and not just walking in saying I'm
10 lonely -- it was a great quote -- it's really the
11 idea of going somewhere and being able to access all
12 sorts of services and not having the stigma or any of
13 that associated with it. Congregate meals are a
14 nutritious meal and an opportunity for socialization
15 with peers and it improves lives, and a point that
16 we've made several times at hearings but we feel is
17 really important to keep making, is that isolation
18 has been found to be a greater predictor of death
19 than obesity. Further, attended by nearly 30,000
20 seniors daily, senior centers provide these critical
21 nutrition and socialization services.

22 Home-delivered meals are also very
23 important here in New York City and nationwide; it's
24 been well documented. Meals on Wheels of America
25 found that 92% of seniors say home-delivered meals
enable them to remain in their homes; this is also

3 seen, as Rachel mentioned, is reducing the costs of
4 other highly, more expensive needs and we really
5 value the work that home-delivered meals providers do
6 as well.

7 So getting to some kind of specific
8 recommendations around this; we all know the value
9 that meals provide and some of the challenges that
10 we're facing. We feel that we must ensure the
11 programmatic success of both home-delivered and
12 congregate meals by modernizing the programs.

13 You know the City has changed over the
14 years, a recent report said that 2015 [sic] said that
15 almost 50% of older New Yorkers were foreign born,
16 reflecting a significant need for meals that are
17 culturally appropriate, as well as diversity and
18 other health requirements that impact the need for
19 meals. DFTA's senior center standards, according to
20 them, providers must offer menus that are appropriate
21 to participants' cultural backgrounds, and this
22 requirement that senior centers must fulfill brings a
23 fiscal implication. For example, in 2015, DFTA
24 stated that in DFTA's home-delivered meal network,
25 each catered kosher meal is an average of \$1.38 more
than non-kosher catered meals, and that goes for

3 other types of meals that need to be provided. So
4 there is a real fiscal impact on this cost increase,
5 which leads us to the fact that we also advocate that
6 the City must fully reimburse providers for all types
7 of meals and support the providers' efforts to serve
8 culturally appropriate meals as needed.

9 The other main issue that you've referred
10 to already today is the rising cost of food and not
11 keeping pace with the reimbursement rate, and that is
12 something that we have been talking about for many
13 years and we will be back here next year talking
14 about the same thing if we don't start addressing it,
15 so I'm very glad that you brought it up.

16 Just some quick stats. From 2008 to 2013
17 alone, the cost of food increased 11% according to
18 the Consumer Price Index, and as inflation continues
19 to rise, a system must be put in place to
20 automatically reimburse providers for the full cost
21 of each meal, rather than constantly reimbursing at
22 an insufficient rate, because the system will
23 continue to suffer and that's not going to help.

24 These recommendations are supported by
25 the findings of LiveOn NY's recently held membership
convening entitled *Senior Centers: Visions and*

3 *Priorities for the Future.* We were doing this as
4 really part of talking about the model budget
5 process, which we could talk for days about and we
6 will continue to talk for days about, so I'm glad you
7 brought that up because again, all of this is tied
8 together, but we really were excited to bring
9 together our member agencies to talk about what their
10 vision is for the future of senior centers, and a big
11 part of that obviously, as I've already mentioned, is
12 meals. When talking about their priorities and
13 looking at how to serve older adults today and in the
14 future, we found that members overwhelmingly
15 identified enhanced nutrition capabilities was one of
16 the top priorities. So we know not just from what we
17 are all saying here, we know hearing from our members
18 who are doing the work on the ground each day that
19 this is on the forefront of what they need to look at
20 and what we'll need to support.

21 I wanted to offer a couple responses; I
22 know -- I'm glad you raised the issue as well about
23 the voluntary contributions -- one of the important
24 things that we've learned from our work, both from
25 hearing from our members as well as our social
workers that do direct outreach, trying to help

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3 seniors enroll in benefits such as SNAP, you know is
4 the stigma associated with receiving anything,
5 whether that be SNAP or meals at a senior center, and
6 so I think that that's something we always talk about
7 is just to be aware of is, you know and with school
8 lunches, with the Free Meals for All, the idea is to
9 remove that stigma so that one person's getting a
10 free meal versus the second one who's sitting next to
11 them that isn't, so stigma is always important no
12 matter what kind of meal is being offered.

13 And I think the other thing about
14 voluntary contributions that we're very focused on
15 and talking with our members about was brought up
16 today as well, is you know in the spirit of the OAA,
17 the voluntary contributions are allowed, but I
18 believe the standards talk about not being coercive
19 or not being pressured and not feeling, again, tied
20 to the stigma, so I think that that's something
21 really important to look at, that we're really
22 looking at as well is to... you know we know that
23 that's an important part, but we also know that
24 members don't want seniors to feel uncomfortable
25 about that being an issue, so I think that's
something we're focused on.

3 The last thing I'll add; I know that it
4 affects budgets as well, as several providers have
5 talked about, is if you're not making a certain
6 amount of money in those contributions, then
7 providers having to kind of pick up the piece of
8 that, and I know that that's a challenge and I know
9 that that could be tied on how you're trying to get
10 those contributions, so all of it's connected and
11 it's just something we're going to continue to look
12 at and obviously talk to our members about and bring
13 feedback to you all and to DFTA as well as we all
14 work together to continue these successful programs.
15 So thank you for the opportunity to talk today.

16 [background comments]

17 MEERA VENUGOPAL: Okay. Yes. I'll start
18 again. Thank you for the opportunity to be here,
19 Chair Margaret Chin and Council Member Paul Vallone.
20 My name is Meera Venugopal and I am with India Home,
21 and India Home is the only community-based nonprofit
22 in the New York area serving the needs of a wide
23 variety of South Asian diaspora seniors from
24 Bangladesh, India, Indo-Caribbean, Pakistani, and
25 other South Asian seniors. We provide classes, meals
and events at our four centers in Queens.

3 We run congregate meal programs at four
4 of our centers. Our Desi Senior Center in Jamaica,
5 Queens runs the largest senior center congregate
6 halal meal program in New York City, serving
7 culturally appropriate halal meals to over 120 mostly
8 Bangladeshi Muslim seniors every program day. At our
9 Sunnyside Center, Kew Gardens and Richmond Hill
10 centers we serve vegetarian Hindu and Jain meals to
11 over 100 Indian and Indo-Caribbean patrons.

12 So one of the main reasons keeping South
13 Asian seniors from accessing mainstream centers is
14 the food. Many senior centers serve congregate
15 meals. A shared meal helps to combat the social
16 isolation so many seniors suffer from, and often is
17 the only way for poor seniors to get a nutritional
18 meal. However, the food in mainstream senior centers
19 may not suit everyone, especially South Asians, who
20 have many restrictions on what kind of food they can
21 eat.

22 A substantial percentage of Indians are
23 Hindu and vegetarian. Many Pakistanis and
24 Bangladeshis have strict religious injunctions about
25 what they may or may not eat. For instance, halal
food, as I'm sure you know, is an integral part of

3 Islam and as a subset of one of the main five pillars
4 of the religion, Muslims are mandated to eat only
5 halal food to maintain their faith.

6 Because we serve culturally appropriate
7 food at our centers we are able to target an
8 underserved and ignored segment of seniors in New
9 York City.

10 According to the Center for an Urban
11 Future's report in New York City alone, between 2000
12 and 2010 the population of older immigrants from
13 India grew by 135 percent and the number of
14 Bangladeshi immigrants from Bangladesh grew in the
15 previous decade by 471%, and the Pakistani
16 populations grew by 38% from 2008 to 2011. So the
17 borough of Queens, where we have our centers, is home
18 to some of the largest South Asian populations in the
19 country.

20 Studies have shown that congregate meals
21 promote health, help tackle food insecurity faced by
22 low-income seniors, increase nutrition intake and
23 more importantly, encourage conversation and
24 camaraderie. Some of our seniors live alone or have
25 chronic health conditions or may be at nutrition

3 risk. For many of our seniors, that shared warm meal
4 is one of the best reasons to visit our centers.

5 So given the huge and growing population
6 of South Asian seniors, it is imperative that there
7 be a concentrated effort to make culturally
8 appropriate meals that cater to these populations
9 available.

10 It is also important to reach homebound
11 seniors who may be older; as all my colleagues here
12 have said, they may be highly vulnerable and at risk
13 of social isolation. Home-delivered meal drivers may
14 be the sole social contact for meal recipients and
15 may also report safety or unhealthy environmental
16 concerns back to agencies. So home delivering
17 culturally appropriate meals will allow us to support
18 our desire to promote healthy aging and food security
19 and allow all older adults to experience stable
20 health and age in place. More importantly, it will
21 help in reducing and/or impacting the racial equity
22 disparity that now exists in home-delivered meal
23 plans and ensure healthy aging for all.

24 We at India Home are ready to provide
25 expertise, partner with all of you to make these
kinds of things happen.

2 Thank you so much for your time.

3 ALLISON SIMMONS BROWNLEY: Good
4 afternoon. My name is Allison Simmons Brownley; I'm
5 from HANAC. I'm the Director of the HANAC Innovative
6 Senior Center in Astoria, the HANAC Harmony JVL
7 Senior Center. We serve over 2,000 individuals at
8 our center annually, about 700 in a week, and we
9 provide meals that we cook on site and we're at the
10 very lowest end of the reimbursements for raw food
11 level [sic] -- around \$2.76 -- and we do definitely
12 rely upon the voluntary contributions to fill that
13 out.

14 Many things that I wish to say were
15 spoken eloquently by my colleagues, but my desire, as
16 a director and HANAC's desire is to serve the most
17 people possible, the most needy people and there are
18 people that are not coming to our congregate program
19 because we are not providing culturally appropriate
20 meals; specifically, Asian and South Asian, people
21 that are within our community that I can see and that
22 I do outreach to, but our food is just not what
23 they're looking for. In-house, if we had a higher
24 amount of money, we could provide different options,
25 even medically appropriate options -- soft food,

3 that's a real issue in our center and people do stop
4 coming or they ask to take their food home, which is
5 not encouraged, because they'll need to puree it.

6 Now of course, home-delivered meals are
7 what we're here to talk about today and that's
8 something -- I would just encourage... I think that
9 there should be a cost study to see the different
10 costs... what these meal numbers are for different
11 centers and these providers, because I do believe
12 that in-house cooked meals are cheaper and better,
13 and the people who are cooking them and that have a
14 relationship with the seniors, who have their feet on
15 the ground in these communities would be the best
16 people to hold those contracts, not people who are
17 gonna have outside caterers, or we could cater from
18 each other to have culturally appropriate meals, and
19 I think it would be a savings of money and I think
20 that the food would be better and it would also keep
21 people within the network of these senior centers if
22 someone is -- sorry; I have a cold -- if someone is
23 homebound temporarily or is released from the
24 hospital and needs home-delivered meals, they're
25 still in the hands of their trusted senior center
network so that hopefully they'll be able to come

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3 back and receive the supportive services that we're
4 providing and socialize with their friends and live
5 longer, and staying at home longer, living longer in
6 your home independently, this is less expensive than
7 a long stay in a rehab, than a long stay in hospice;
8 it's better for everyone. And that's all.

9 CHAIRPERSON CHIN: Well thank you, thank
10 you very much for your testimony. I think for LiveOn
11 and for UNH, I mean we are going to rely on your
12 organizations to really help us to bring the
13 providers together and kind of work with DFTA to make
14 sure that we've gotta get a handle on this, because
15 we just can't wait until the next RFP. There's gotta
16 be some solution and I think there were a lot of
17 great suggestions that came out of the hearing that
18 we can, you know, provide more nutritious meals at
19 reasonable cost and if everybody kind of works
20 together. So for that we look forward to your
21 leadership and your support on this issue.

22 CO-CHAIRPERSON VALLONE: As always, thank
23 you to our advocates, thank you for the ideas, like
24 The Teaching Kitchen, you know these are all things
25 that we can use right in our own neighborhoods to try
to learn from, and again, with a small amount of

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3 reimbursement costs and funding would be able to
4 provide these additional meal options, whether it's
5 within our Asian community, our South Asian
6 community, our Jewish community, our Muslim
7 community, Greek, Italian; you name it, so much of
8 the meal identifies with the culture, which
9 identifies with the senior and the way to attach to
10 the home and some meaning of what happened in their
11 life. As an Italian, I know my meal means very, very
12 much to me. Somebody said there was Italian meals
13 being offered somewhere in the city; I'd like to find
14 it, besides Sunday at my house, but this is
15 important, so we're gonna continue to fight for this
16 in the budget, and thank you everybody.

17 CHAIRPERSON CHIN: You're too young to go
18 to the senior centers.

19 CO-CHAIRPERSON VALLONE: I'm over 50 now.

20 [laughter]

21 CHAIRPERSON CHIN: Thank you. Before I
22 adjourn the final committee hearing on aging here in
23 this term, I want to say what an honor it has been to
24 serve as chair of this committee and advocate for the
25 growing senior population throughout New York City.
It's a privilege to be a senior; it's a privilege to

3 be able to grow old in the greatest city in the
4 world, and for many of us lifelong or nearly lifelong
5 New Yorkers it's a privilege to be able to age with
6 dignity in the neighborhoods that we helped build,
7 but sometimes we need the help and the resources to
8 do that, and that is why the work that this committee
9 does is so important; we fight for some of the most
10 vulnerable New Yorkers and I'm proud that all of us,
11 all that we have accomplished in the last four years.
12 We expanded the SCRIE and SHE [sic] programs to make
13 sure that seniors can continue to stay in their
14 community. We made social adult day care more
15 transparent to give our caregivers peace of mind. In
16 fact, we invigorated and the conversation about how
17 our city is taking care of our caregivers, and we
18 jumpstarted the conversation about how to continue
19 the expansion of NORCs as a model to deliver services
20 to our seniors. Now so many of my colleagues are
21 asking us how can they start one in their own
22 neighborhoods. And last but not least, we
23 dramatically increased DFTA's funding which includes
24 the historic Year of the Senior budget.

25 I have so many people to thank for the
success of this committee. I want to thank our

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3 Speaker, Melissa Mark-Viverito and Finance Chair
4 Julissa Ferreras-Copeland for their leadership
5 throughout the budget process. You know when women,
6 especially women of color, we know how to get things
7 done.

8 So I also wanted to thank our committee
9 members, especially our Chair on the Subcommittee on
10 Senior Centers, Council Member Paul Vallone. You're
11 such a great partner; I hope we can continue. And
12 also a big thank you to all the staff, our counsel;
13 from previous counsel: Kelly Taylor, we had Eric
14 Bernstein, Alex Paulenoff, and now we have Caitlin
15 Fahey, and then our analysts; we had James Saboute
16 [sp?] and now we have Emily Rooney and our finance
17 analysts, we have Dohini Sompura, who has been with
18 me the entire four-year term, and we also had
19 Brittany Morrissey; now she is at DFTA, and Daniel
20 Kroop.

21 I also wanted to thank all the advocates,
22 all of you out there, who bring seniors every year to
23 gently remind us and remind the Mayor and the
24 Administration to remember the seniors.

25 And lastly, I wanted to thank the
Department for the Aging, our Commissioner Donna

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3 Corrado, Deputy Commissioner Caryn Resnick, and all
4 the staff at DFTA. Even though we do not always
5 agree on everything, I've never doubted that we are
6 moving towards the same goal to ensure that our
7 seniors live their best lives.

8 With that, I want to thank all of you for
9 attending today's hearing and I wish all of you a
10 wonderful holiday and a Happy, healthy New Year, and
11 I look forward to working with all of you in the new
12 term.

13 Thank you again and we're adjourned.

14 [gavel]

15 [clapping]

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C E R T I F I C A T E

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



Date January 7, 2018