

CITY COUNCIL  
CITY OF NEW YORK

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TRANSCRIPT OF THE MINUTES

Of the

COMMITTEE ON GENERAL WELFARE

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March 9, 2026

Start: 1:02 p.m.

Recess: 3:42 p.m.

HELD AT: 250 Broadway - 8th Floor-Hearing  
Room 1

B E F O R E: Crystal Hudson,  
Chairperson

COUNCIL MEMBERS:

Shaun Abreu  
Alexa Avilés  
Gale A. Brewer  
Tiffany Cabán  
Darlene Mealy  
Frank Morano  
Sandy Nurse  
Lincoln Restler  
Althea V. Stevens  
Sandra Ung

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

Aqueelah Winston  
New York City Department of Homeless Services,  
DHS

Nirah Johnson  
New York City Department of Homeless Services,  
DHS

Rebecca Chew  
Human Resources Administration, HRA

Cassandra White  
New York City Department of Homeless Services,  
DHS

Alison Wilkey  
Coalition for the Homeless

Julia Casey  
Federation of Protestant Welfare Agencies

Catherine Trapani  
Volunteers of America Greater New York

Chris Mann  
WIN

Brandon Lloyd  
Urban Resource Institute

Graham Horn  
New York Legal Assistance Group

Joshua Goldfein  
Legal Aid Society

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

Lucy Carney  
Encore Community Services

Alexis Foote  
Real Edgemere Community Land Trust

Christopher Leon Johnson  
Self

1  
2 SERGEANT AT ARMS: Check one, two. Check one, two.  
3 This is a pre-recorded sound test for the Committee  
4 on General Welfare. Today's date is March 9th, 2026,  
5 being recorded in Hearing Room 1 by Patrick Kusner.

6 SERGEANT AT ARMS: Good afternoon, good afternoon.  
7 Welcome to the New York City Council hearing on the  
8 Committee on General Welfare. At this time, please  
9 silence all electronics and do not approach the dais.  
10 Again, please do not approach the dais.

11 If you are testifying today or have any other  
12 questions or concerns, please contact the  
13 Sergeant-at-Arms. Thank you for your cooperation.

14 Chair, you may begin.

15 CHAIRPERSON HUDSON: [GAVEL] Uh, thank you so much  
16 and good afternoon. Welcome to today's hearing. I'm  
17 Crystal Hudson, Chair of the General Welfare  
18 Committee, and my pronouns are she/her.

19 Today we have 5 bills on our agenda. Intro 139,  
20 sponsored by Council Member Tiffany Cabán. Requiring  
21 the Department of Social Services to provide a  
benefits interview confirmation notice.

Intro 232, which I've sponsored, in relation to  
shelter referrals and assessments for temporary  
housing assistance. Uh, Preconsidered Introduction-

1  
2 okay, uh, by Council Member Shaun Abreu in relation  
3 to the DSS Commissioner coordinating with hospitals  
4 to distribute informational materials on certain  
5 weather events to patients and make services directly  
6 available to discharged patients during such events.

7 Uh, and another Preconsidered Intro also  
8 sponsored by Council Member Abreu in relation to the  
9 DSS Commissioner coordinating with hospitals to make  
10 certain supplies available to discharged patient-  
11 patients during certain weather events.

12 And finally, the last Preconsidered Introduction  
13 by Council Member Lincoln Restler, which would create  
14 an integrated and confidential data system to track  
15 all engagement with street homeless individuals.

16 Uh, we are joined today by Council Members Abreu  
17 and Cabán. Intro number 139 seeks to improve  
18 transparency of the benefits application process by  
19 making interview confirmation notices available to  
20 applicants. The two bills sponsored by Council Member  
21 Abreu are a direct follow-up to our February 10th  
hearing on the city's recent response to Code Blue.  
These bills seek to provide certain supplies and  
information to individuals experiencing homelessness

1  
2 who are patients at hospitals during extreme weather  
3 emergencies.

4 Council Member Restler's bill would strengthen  
5 coordination between street outreach teams, enhance  
6 data collection efforts, and provide policymakers  
7 with timelier and more accurate data on the state of  
8 street homelessness.

9 Now into the final bill on our agenda. Currently,  
10 DHS requires that families with children produce 2  
11 years of housing history in order to demonstrate  
12 their eligibility to enter into, enter into its  
13 shelter system. This requirement has proven to be  
14 onerous on families with children.

15 My bill, Intro 232, seeks to reduce this  
16 administrative burden by shifting the requirement  
17 from 2 years of housing history to 1 year of housing  
18 history. The requirement creates an unnecessary  
19 barrier for those who are already in crisis and  
20 juggling so much.

21 Families with children who are seeking to enter  
into a homeless shelter have already hit rock bottom.  
They're already facing chaotic and unstable living  
situations. To expect them to provide this type of

1  
2 documentation in order to qualify for shelter is to  
3 doubt their needs.

4 Policies like this risk excluding the very  
5 families that the city's shelter system is meant to  
6 serve. If the ultimate goal is to reduce family  
7 homelessness, we have to change policies that may  
8 shut out the people they intend to help. We hope that  
9 today's hearing will effectively inform the final  
10 versions of the bills on our legislative agenda, and  
11 that they ultimately serve to strengthen the city's  
12 social safety net for its most vulnerable  
13 populations.

14 I want to conclude by thanking the Committee  
15 Staff for their work on this hearing: Aminta  
16 Kilowan, Panina Rosenberg, Justin Campos, and  
17 Elisabeth Childers-Garcia. Childers-Garcia, excuse  
18 me. And I would also like to thank my staff, Andrew  
19 Wright and Erika Ruintan(SP?).

20 I will now pass the mic to the other sponsors of  
21 bills on today's agenda, Council Member Abreu,  
followed by Council Member Cabán.

COUNCIL MEMBER ABREU: Thank you, Chair Hudson.  
For years, structural gaps have left our most  
vulnerable neighbors exposed to extreme weather and

1  
2 without access to the services they need. After the  
3 recent freezing Arctic winter storms that saw some of  
4 our neighbors across the city tragically lose their  
5 lives to the cold, including a man found on a park  
6 bench with hospital discharge papers just days old,  
7 it is clear that need persists to do all that we can  
8 to protect our most vulnerable neighbors.

9 We'd like to be clear, this issue is something  
10 that has pre-existed, uh, this Administration.  
11 Extreme weather is becoming more frequent, and with  
12 the winter behind us now, we must be prepared for the  
13 dangers of extreme heats in the months ahead as well.

14 The legislation we are hearing today will  
15 strengthen coordination between hospitals and the  
16 Department of Homeless Services so that individuals  
17 potentially experiencing homelessness are not  
18 discharged into life-threatening conditions without  
19 the necessary information or support.

20 By ensuring hospitals have the resources and  
21 materials to connect patients to warming centers,  
cooling centers, and other life-saving services  
during Code Blue and Code Red alerts, as well as  
providing them with critically important supplies  
like blankets or cooling wipes, we can close

1  
2 dangerous gaps in our safety net and help keep  
3 vulnerable New Yorkers safe.

4 Thank you to the General Welfare Committee and  
5 the Chair Hudson for hearing these bills and for your  
6 consideration. Thank you very much.

7 CHAIRPERSON HUDSON: Thank you, Council Member  
8 Abreu. Council Member Cabán.

9 COUNCIL MEMBER CABÁN: Thank you, Chair Hudson,  
10 and to the members of the General Welfare Committee  
11 for the opportunity to speak today about Intro 139 of  
12 2026. This legislation is a straightforward but still  
13 important step toward improving transparency and  
14 accountability in our city's public benefit system.

15 Intro 139 would require DSS to provide applicants  
16 with a confirmation notice after completing an  
17 eligibility or recertification interview for benefits  
18 like cash assistance or SNAP.

19 For our constituents seeking assistance, the  
20 interview process is a key step towards accessing  
21 life-saving support from New York City. At a time  
when the federal government has launched a full-blown  
assault on America's already anemic welfare system,  
adding transparency and clarity to the process of  
applying for benefits is crucial for us.

1  
2 This bill addresses administrative gaps in the  
3 benefit application process, gaps that so often cause  
4 our constituents problems as they apply for benefits  
5 they're entitled to. These may seem like small  
6 administrative details, but they can make a  
7 significant difference for New Yorkers trying to  
8 navigate a complex and often frustrating system.  
9 Giving beneficiaries clear documentation helps  
10 applicants track their cases, resolve disputes, and  
11 advocate for themselves when delays or errors occur.

12  
13 Ultimately, this legislation is about  
14 strengthening trust and transparency in how our city  
15 delivers the benefits that millions of our people  
16 rely on. I look forward to the passage of this bill  
17 and to work with DSS and HRA advocates and my  
18 colleagues to ensure this policy is implemented  
19 effectively and helps our city's residents access the  
20 support that they need. Thank you, Chair.

21  
CHAIRPERSON HUDSON: Thank you so much, Council  
Member Cabán. And now, uh, the Committee Counsel,  
Aminta Kilawan, will administer the oath to the  
Administration.

COMMITTEE COUNSEL: Now, in accordance with the  
rules of the Council, I will administer the

1 affirmation to the witnesses from the Mayoral  
2 Administration. Please raise your right hand. Do you  
3 affirm to tell the truth, the whole truth, and  
4 nothing but the truth in your testimony before this  
5 Committee, and to respond honestly to Council Member  
6 questions? Cassandra White? Aqueelah Winston? Nirah  
7 Johnson? and Rebecca Chew? Thank you. You may begin  
8 when ready.

9 AQUEELAH WINSTON: Thank you. Good afternoon. My  
10 name is Aqueelah Winston, and I serve as the Interim  
11 Chief of Intake Assessment in Operational Capacity at  
12 the New York City Department of Homeless Services. I  
13 am accompanied today by my colleagues, Nirah Johnson,  
14 Assistant Commissioner of Direct— uh, sorry, Director  
15 of Health and Homeless Services Integration, DHS,  
16 Rebecca Chew, Chief Program Officer, Human Resources  
17 Administration, and Cassandra White, Deputy  
18 Commissioner, Street Homelessness Solutions Division  
19 within DHS.

20 As the breadth of this hearing encompasses the  
21 work of both agencies, DHS and HRA, within the  
Department of Homeless— Department of Social  
Services, DSS. I would like to thank Committee Chair  
Hudson, the members of the Committee on General

1 Welfare, and the bill sponsors for holding today's  
2 hearing and inviting us to speak.

3 We will speak to each of the Introductions by  
4 being heard in turn today. We would like to brief the  
5 Council on existing work being done by DHS and to  
6 highlight important considerations and concerns we  
7 believe the sponsors, members of the community, and  
8 General Welfare, the broader Council, and  
9 stakeholders should keep in mind in assessing and  
amending these Introductions.

10 Introduction 139. Introduction 139, sponsored by  
11 Council Member Cabán, would require the Department of  
12 Social Services (DSS) to provide confirmation notice  
13 in hard copy or electronically to applicants of  
14 public assistance regarding their benefits interview.  
15 The notice would include, at minimum, a confirmation  
16 number, the date, time, and location of the  
17 interview, or the agency phone number from which the  
interview was conducted if the interview was via  
telephone.

18 We recently provided testimony regarding this  
19 legislation during the General Welfare Committee  
20 hearing on December 3rd when it was last noticed by  
21

1  
2 the Council as Introduction 1430 of 2025, and we're  
3 happy to speak on it again today.

4 We support providing applicants with the  
5 information they need as they proceed through the  
6 benefits application process. If I may briefly review  
7 the current process for interviewing for cash  
8 assistance and Supplemental Nutrition Assistance  
9 Program application and recertifi- recertification  
10 interviews, the process proceeds along two tracks.  
11 One track is for linked cash assistance and SNAP  
12 applications and recertifications, and the other  
13 track is exclusively for cash applications.

14 For CA cash, cash assistance, and SNAP  
15 applications and recertifications, the process is as  
16 follows. The client submits an application or  
17 recertification and calls for an on-demand interview.  
18 At the end of the interview, the system automatically  
19 generates the interview kept status notification and  
20 the interview receipt form FIA-1173.

21 The interview kept status notification is  
available on Access HRA for SNAP immediately. The  
interview receipt form FIA-1173 is placed in the  
print-to-mail queue to be mailed and is also

1 electronically added to the case file for both SNAP  
2 and CA.

3 The interview receipt FIA-1173 is physically  
4 mailed within 1 to 5 business days. The interview  
5 receipt, Form FIA-1173, is available on Access HRA  
6 when it has completed the print-to-mail queue. Once  
7 mailed, the document becomes available in One Viewer  
8 or Access HRA. For cash assistance application and  
9 recertification interviews, the interview status is  
10 not currently available online. We would have to  
11 build the functionality to add interview status to  
12 our system.

13 For cash assistance, our assessment thus far is  
14 that 90 days for implementation would not be  
15 sufficient to make adjustments to information  
16 technology systems to implement this change— to  
17 implement the change this proposal requires. DSS has  
18 tried to implement a version of what this bill would  
19 require with Form FIA-1173, which confirms certain  
20 contact with HRA and includes relevant data points at  
21 such, such as the client's name, case number, and the  
description of the type of contact.

We would like to have further discussion with the  
Council about the scope of programs covered and also

1  
2 suggest revisions to the data points required under  
3 the legislation, which are at variance with current,  
4 with current operations.

5 Introduction 232, sponsored by Council Member  
6 Hudson, would require— would reduce the required  
7 housing history from 2 years to 1 year in order for  
8 families with children to demonstrate their  
9 eligibility for entry into the Department of Homeless  
10 Services shelter system. It would additionally  
11 require DHS staff to upload all documents relevant to  
12 an application's housing history to a digital case  
13 record and communicate with an applicant about any  
14 missing documents through electronic methods. This  
15 bill would give families with children at least 30  
16 days in temporary shelter pending a determination of  
17 their eligibility for shelter. Subject to the  
18 approval of the State Office of Temporary and  
19 Disability Assistance.

20 This bill would also require DHS to create an  
21 informational pamphlet listing examples of documents  
that could demonstrate proof of housing history and  
ensure that such pamphlet is posted online and  
distributed to families with children at the PATH  
intake center.

1  
2 We support efforts to enhance services to  
3 families with children households and to streamline  
4 their efforts to apply and obtain temporary housing  
5 assistance. As drafted, this bill presents potential  
6 concerns and may trigger a significant increase in  
7 cost of providing temporary housing assistance.

8 The bill is proposing a change to the temporary  
9 housing assistance application and eligibility  
10 determination processes that are standardized by  
11 state regulation and New York State Office of  
12 Temporary Dis- Disability Assistance, OTDA policy.

13 As this bill recognizes, THA is extensively  
14 regul- regulated by OTDA. For that reason, DSS is  
15 concerned about alterations to eligibility  
16 requirements.

17 By promising at least 30 days of conditional  
18 emergency THA, there is a concern that we are risking  
19 increased length of stays for households that are  
20 ultimately deemed ineligible for THA and regardless  
21 of when DHS completes an eligibility determination.  
New York State does not reimburse New York City for  
THA provided to a household that is ultimately deemed  
ineligible.

1  
2           Currently, DHS is generally able to make  
3 eligibility determinations within 15 days. Exceptions  
4 to this occur under various circumstances, including  
5 when a household is not cooperating with the  
6 evidentiary requirements. The 15-day duration limit  
7 allows DHS to budget temporary shelter not reimbursed  
8 by the state in a somewhat predictable way. The  
9 2-year housing history requirement, which was the  
10 result of extensive negotiations and compromises  
11 between OTDA and advocates, helped DHS strike, strike  
12 a delicate balance between creating a predictable  
13 cost structure for DHS while also helping the  
14 families who need it most.

15           Note that the 2-year housing history requirement  
16 also provides DHS with a more holistic understanding  
17 of client circumstances and the opportunity to afford  
18 families with children, family mediation services  
19 encompassing a 2-year housing history time. Family  
20 mediation serves as a crucial tool that assists  
21 families with avoiding shelter altogether. We want to  
avoid unintentionally reducing families' mediations  
capacity to assist clients in finding an alternative  
to shelter.

1  
2 Overall, reducing the housing history requirement  
3 and extending the duration of emergency placement  
4 will extend the time frame of emergency housing for  
5 households regardless of their eligibility for THA.  
6 Shelter capacity across the city would need to be  
7 increased for families with children as a result of  
8 this bill.

9 Fiscally, Initial estimates note that reducing  
10 the required housing history from 2 years to 1 year  
11 would cost close to \$169 million per year. The  
12 extension of conditional THA from 15 days to 30 days  
13 would be over \$7 million per year.

14 DHS currently publishes pertinent information on  
15 its publicly accessible website about acceptable  
16 evidence for proven housing history and the  
17 eligibility determination process. Producing paper  
18 pamphlets containing the same information would incur  
19 publication and translation costs. However, the  
20 agency is supportive of the Council proposal to  
21 ensure that information is available to applicants—  
is available to ensure applicants are informed about  
the process.

The bill requirement to create a digital case  
record system that is accessible to DHS applicants

1  
2 and clients via a secure website and applications for  
3 phones and mobile devices has a costly impact,  
4 including building out a client-facing digital case  
5 record system and, and regular IT maintenance.

6 Further, the bill does not account for the count-  
7 does not account for the time required to plan,  
8 design, and/or alter existing systems, test, and  
9 launch the digital case record functionality the bill  
10 requires. Given these considerations, we do not  
11 believe this bill proposes an advisable course of  
12 action at this time.

13 Preconsidered Introduction 1352, 1352, sponsored  
14 by Council Member Abreu, would require the Commission  
15 of Homeless Services, in consultation with relevant  
16 New York City agency heads, to develop informational  
17 materials directed to hospitals pertaining to a code  
18 blue or code red alert. The materials would include  
19 information on agency resources during these alerts  
20 for individuals experiencing homelessness,  
21 recommended health hospital procedures during these  
22 alerts, and contact information of the Department of  
23 Homeless Services and other relevant agencies.

24 The commissioner would have to conduct outreach  
25 to provide hospitals with the materials for

1 distribution to patients. Pay- for distribution to  
2 patients. The bill would also require the  
3 Commissioner to make best efforts to coordinate with  
4 the hospitals during these alerts to identify  
5 discharged patients experiencing homelessness, assess  
6 what DHS resources they need, and make the resources  
7 available to them.

8 Example of DHS resources include direction and  
9 transportation to shelters and warming and cooling  
10 centers. We are strongly in support of all efforts to  
11 engage our unsheltered neighbors and help them keep  
12 safe, especially during the extreme weather  
13 conditions that lead to Cold Red and Cold Blue  
14 alerts.

15 DHS has had a longstanding partnership with New  
16 York City hospitals to mutually engage in care  
17 coordination activities for purposes of assisting  
18 individuals who have been in shelter or require DHS-  
19 who have been in or require DHS shelter.

20 In the run-up to Cold Blue and Cold Red seasons,  
21 an agency communication is sent to all local  
hospitals via the Greater New- Great- via the Greater  
New York Hospital Association and New York City  
Health and Po- New York City Health and Hospitals

1  
2 Central Office, which provides a reminder about the  
3 impending Code Blue season. Additionally, the DSS  
4 Chief Medical Officer sends a letter to local  
5 hospitals highlighting the impending Code Blue season  
6 and the role for hospitals in such season.

7 The communication asks that hospitals cooperate  
8 in allowing unsheltered individuals to stay in  
9 emergency rooms or other designated areas to the  
10 extent possible without being registered unless they  
11 present with a medical need or ask to see a medical  
12 provider.

13 DHS is also consistently- DHS also consistently  
14 reminds hospitals not to discharge patients during  
15 Code Blue without having a DHS placement. Regardless  
16 of season, DSS has had a longstanding- has had  
17 longstanding guidance, which is the institutional  
18 referral procedure on hospital discharge, which is  
19 applicable at all times. This guidance was developed  
20 in close collaboration with the Greater New York  
21 Hospital Association, New York City Health and  
Hospitals, and private hospitals.

Hospitals have been trained on the procedure and  
refer over 4,000 individuals a year who are either  
new to DHS or who have not been in DHS shelter for

1  
2 over a year. Hospitals are well aware of this  
3 procedure, and DHS communicates frequently with  
4 hospitals regarding this procedure and individuals  
5 referred via the procedure and provides reminders and  
6 training.

7 In order to further support hospitals, DHS has  
8 also created a dedicated hospital shelter referral  
9 line which is shared on the institutional referral  
10 form. DHS has greatly enhanced this referral program  
11 in recent years to ensure that clients are linked to  
12 care prior to discharge, including to Safe Options  
13 Support (SOS) teams, mental- mobile mental health  
14 teams, and New York City Health and Hospitals Safety  
15 Net clinics, and has implemented a fast-track program  
16 for the most complex clients to enter the most  
17 appropriate shelter for their needs.

18 DHS also works with hospitals on diversion  
19 efforts to help clients with recent housing history  
20 to return to their housing. The referral process  
21 includes the completion and submission of the  
institutional referral form to DHS via encrypted  
email. The form includes pertinent demographic and  
clinical information, as well as the patient's

1  
2 written consent to be referred to DHS— to be referred  
3 to a DHS site.

4 The patient's consent is crucial— is a crucial  
5 component of the referral process. It is what allows  
6 DHS to engage in care coordination in the first  
7 place. DHS reviews these documents within 24 hours,  
8 48 hours if the referral form is from a nursing home.  
9 And as part of this procedure, DHS first determines  
10 if the patient is medically appropriate for shelter  
11 based on their physical and mental health  
12 characteristics, their ability to perform their ADLs,  
13 which is Activities of Daily Living, and available  
14 resources on— and available resources to serve the  
15 patient's needs.

16 Second, DHS works with the hospital to identify a  
17 placement within the system which meets the client's  
18 needs and, where possible, preferences. The vast  
19 majority of referrals are medically appropriate for  
20 shelter. We encourage hospitals to provide  
21 transportation and/or an accompaniant for most  
complex clients.

22 An important note here is that the Code Blue  
23 communication covers clients seen in the emergency  
24 department or admitted and being discharged. The  
25

1  
2 formal institutional referral process only applies to  
3 persons admitted to the hospital. DHS' main  
4 objective, as always, is to assist the most  
5 vulnerable New Yorkers in accessing shelter and  
6 services.

7 We, along with our partners at New York City  
8 Health and Hospitals, do all that is possible under  
9 the law to offer homeless individuals assessing  
10 hospitals a way to connect to services and housing  
11 and to begin transition into permanent housing.

12 At DHS, we are always willing to implement new  
13 ideas and procedures which would further assist our  
14 clients in moving along the trajectory towards  
15 permanent housing. As such, we are eager to have  
16 further discussion with the sponsor and Council about  
17 the contours of this bill.

18 Preconsidered Introduction 1353. Preconsidered  
19 Introduction 1353, sponsored by Council Member Abreu,  
20 would require the Commission of Homeless Services—  
21 did I— is this the right name?— would require the  
Commission of Homeless Services to make best efforts  
to coordinate with hospitals to make available  
supplies to patients experiencing homelessness upon  
their discharge from the hospital.

1  
2 The supplies during a Code Blue alert would  
3 include a Mylar thermal blanket, a set of hand  
4 warmers, a winter hat, and a pair of gloves. The  
5 supplies during the Code Red alert would include a  
6 Mylar thermal blanket, a reusable, a reusable water  
7 bottle filled with cold water, cooling wipes, and a  
8 bandana.

9 At DHS, we believe the best outcomes for our  
10 street homeless clients are achieved through  
11 connecting clients to housing and services. As  
12 discussed above, DHS has a robust institutional  
13 referral procedure designed to allow clients to  
14 seamlessly transition from their hospital bed to a  
15 safe shelter or safe haven bed. Uh, as also noted  
16 above, however, hospitals are only able to contact  
17 DHS about patients who are experiencing homelessness  
18 if the client consents to such contact. This  
19 limitation does lead to concerns about how DHS would  
20 be able to implement this bill.

21 If New York City Health and Hospitals contacts us  
22 about a patient who is experiencing unsheltered  
23 homelessness, we would do everything possible to  
24 connect that client with a bed. If the client does  
25 not allow New York City Health and Hospitals to

1  
2 contact us, we would not have a way to connect the  
3 client to a bed and also could not hand out the  
4 supplies mandated in this bill.

5 The second concern has to deal with the volume of  
6 supplies you would need to give New York City Health  
7 and Hospitals and how we would track such supplies.  
8 We could give New York City Health and Hospitals 50  
9 hand warmers, gloves, hats, and blankets, but we  
10 don't know if they have room to store such items, how  
11 they would track the items being handed out, and how  
12 they would prevent the items from going astray. In  
13 light of these limitations and the fact that New York  
14 City Health and Hospitals also hands out client  
15 clothing and warm weather gear, it might be best to  
16 continue working in coordination to attain the goals  
17 of this legislation.

18 That being said, we would be happy to continue  
19 having conversations with the sponsor and the Council  
20 at large regarding how to meet the goals of this  
21 bill.

Preconsidered Introduction 0008, sponsored by  
Council Member Restler, would require the Department  
of Homeless Services to create a mobile application  
available to DH staff and contractors that do street

1  
2 outreach work that allows real-time tracking and  
3 reporting of all engagement with street homeless  
4 individuals. This bill would also require DHS to  
5 report to the Council quarterly the total number of  
6 unsheltered homeless persons disaggregated by the  
7 location where they were first engaged by staff, the  
8 total number of unsheltered homeless persons who  
9 accepted services during the reporting period  
10 disaggregated by the type of service, and the  
11 aggregate number of engagements that resulted in  
12 temporary placements or permanent housing.

13 For several years, DHS has been working to  
14 improve the digital case management systems for the  
15 unhoused population so that DHS outreach staff and  
16 contracted providers performing outreach services can  
17 enter, save, and access data and information in real  
18 time about the unhoused population.

19 The initial planning for the creation of a mobile  
20 app, essentially an upgrade to the current— which is  
21 essentially an upgrade to the current Street Smart  
application, is already underway.

Street Smart is the database system of record  
used by DHS and contracted outreach providers for the  
street homeless population. It captures engagement

1  
2 and interaction data and follow-up notes on  
3 unsheltered individuals encountered in streets and  
4 subways. Once information is entered in Street Smart  
5 and the— and a record is created, it becomes  
6 available to all DHS staff and contracted providers  
7 who have Street Smart access. DSS is supportive of  
8 efforts to improve and enhance case management  
9 systems and data collection practices so that we can  
10 better analyze and report on needs and trends for the  
11 unhoused population.

12 We would like to work further with the Council to  
13 ensure there's alignment between what the bill would  
14 require DHS to do and what data DHS can actually  
15 collect, produce, and report on. And explain the  
16 technical implications of this bill.

17 We appreciate the opportunity to testify today  
18 and welcome any questions that you may have. Thank  
19 you.

20 CHAIRPERSON HUDSON: Thank you so much. Um, I'd  
21 like to acknowledge that we've been joined by Council  
Member Ung via Zoom and Council Members Mealy,  
Avilés, Nurse, Brewer, Morano. Um, we will get into  
the questions.

1  
2 Um, regarding INTRO 139, after an applicant  
3 currently has an interview with HRA, what type of  
4 confirmation is given to them that they completed the  
5 interview, and is confirmation provided in writing or  
6 electronically?

7 REBECCA CHEW: Thank you, Council Member, for that  
8 question. Um, so clients who apply and complete their  
9 benefits interview, whether it's, uh, in connection  
10 with an application or a recertification interview,  
11 both for cash assistance and SNAP, are provided a  
12 notification both electronically and in writing.

13 Um, and additionally, on Access HRA for SNAP  
14 applicants, there's, uh, an interview kept flag that  
15 pops up. Um, but across the board—

16 CHAIRPERSON HUDSON: Sorry, which type of flag? An  
17 interview -

18 REBECCA CHEW: Kept flag?

19 CHAIRPERSON HUDSON: Oh, uh huh.

20 REBECCA CHEW: Um, but there's a written  
21 notification in the form of an 1173 form, um, that  
serves as proof for the client, um, that their  
interview has been, uh, completed.

CHAIRPERSON HUDSON: Thank you. Thank you. We've  
also been joined by Council Member Restler.

1  
2 Um, okay, I think you just sort of addressed this  
3 a little bit, but does Access HRA currently have the  
4 capacity to provide electronic or hard copy  
5 confirmations to public assistance clients after  
6 their benefits interview?

7 REBECCA CHEW: Uh, yes. So, um, in Access HRA, the  
8 electronic version will appear. Um, it's that 1173  
9 form that has, um, like the head of case name, case  
10 number, the date, um, and it says that their  
11 interview was kept.

12 Um, so that's both electronically available, and  
13 then it's also printed and mailed.

14 CHAIRPERSON HUDSON: Okay, thank you. And after  
15 completing an interview, is an applicant provided  
16 with the contact information for a specific staff  
17 person who they can follow up with on the status of  
18 their application?

19 REBECCA CHEW: So, um, clients call us for the  
20 interview. Um, so it's an on-demand number where  
21 clients will call at their convenience to have the  
interview. So it— we're not doing outbound calls. Um,  
it's kind of called into a central number where we  
have a team of workers who will, um, complete those  
interviews.

1  
2 CHAIRPERSON HUDSON: So they can follow up on the  
3 status of their application by calling that number?

4 REBECCA CHEW: Uh, yes, there's a number listed,  
5 um, on that confirmation, the 1173.

6 CHAIRPERSON HUDSON: Okay and what, if anything,  
7 do you estimate this bill will cost to implement?

8 REBECCA CHEW: Uh, we don't estimate it will cost  
9 anything, and we can leverage existing resources to,  
10 to build it out further.

11 CHAIRPERSON HUDSON: Do you have an understanding  
12 of the wait times when clients call into that number?

13 REBECCA CHEW: Sure. So, um, for cash assistance,  
14 it's, uh, about less than an hour and a half for the,  
15 the dedicated number.

16 For SNAP, it's approximately 20 minutes, and  
17 there's a callback function. So for folks who do not,  
18 uh, wish to wait, um, they can elect to have a  
19 callback.

20 CHAIRPERSON HUDSON: And what would help, uh,  
21 reduce the wait time for both of those lines?

REBECCA CHEW: Um, I think, you know, we're  
continuing always to refine, um, technology and  
solutions and efficiencies. Um, and we'd welcome  
discussion with the Council to, to partner on that.

1  
2 CHAIRPERSON HUDSON: Okay, thank you. Um, I wanna  
3 just pause a moment and allow Council Member Restler  
4 to make a statement on his legislation, then we'll  
5 get back into the questioning.

6 COUNCIL MEMBER RESTLER: Thank you so much, Chair  
7 Hudson. It is, uh, great that you are leading this  
8 Committee, um, and looking out for the most  
9 vulnerable New Yorkers.

10 Um, I'm just reading your testimony on the  
11 legislation. Um, Preconsidered T2026-00008 would  
12 require DSH- the Department of Homeless Services to  
13 implement a single data system accessible via mobile  
14 devices to track all engagement with street homeless  
15 individuals. It would also require DHS to report  
16 quarterly on the number of clients that accepted  
17 services, including housing placement.

18 An audit in 2023 by then-Controller Lander found  
19 that DHS did not have a comprehensive data system for  
20 tracking all engagement with street homeless  
21 individuals, and that technology limitations had  
22 resulted in many outreach providers developing their  
23 own secondary tracking systems.

24 There are over 4,000, at least, street homeless  
25 individuals in the City of New York, many who are

1  
2 struggling with serious mental illness, and we devote  
3 a substantial amount of time and resources and have  
4 massive outreach contracts to support them, as we  
5 should. But without rigorous tracking of outcomes and  
6 coordination across public agencies and our  
7 contractors, outreach workers and service providers,  
8 people with serious mental illness continue to fall  
9 through the cracks and do not get the care that they  
10 need, the care they deserve, and frankly, our efforts  
11 are ineffective.

12 The goal of this legislation is to fill those  
13 gaps by instituting a more comprehensive system to  
14 track engagement with street homeless populations and  
15 ensure effective accountability.

16 You know, I will say, as a Council Member, we get  
17 incoming all the time, uh, every single, you know,  
18 multiple times a week about uh, street homeless New  
19 Yorkers who are struggling on the streets, in the  
20 subways. Uh, we have the largest concentration of  
21 street homeless individuals in District 33 in all of  
Brooklyn and unfortunately, you know, we reach out to  
providers, we reach out to city agencies, and it  
feels like we, we fail to get the results that we  
deserve and the lack of coordination across the

1  
2 outreach provider that's in the subways versus the  
3 outreach provider that's responsible when the  
4 person's outside of the subway station, doesn't make  
5 any sense.

6 Um, and so we do need an integrated system. We  
7 need to make sure that not just DHS, but across DHS  
8 and, uh, other critical city agencies that are  
9 interacting with this relatively small number of  
10 people who are chronically homeless and struggling  
11 profoundly, who cycle through our jails, our  
12 hospitals, our shelters, uh, all the time, uh, that  
13 we are better tracking real outcomes that connect  
14 these individuals to the safe haven shelters and to  
15 the supportive housing that overwhelmingly they  
16 qualify for and deserve.

17 Um, so I'm, I'm hopeful that we'll be able to  
18 find a path forward on this legislation and am  
19 grateful for the hearing topic today as we dig in to  
20 bring greater accountability to our, our street  
21 homeless, uh, situation across the city. Thank you.

18 CHAIRPERSON HUDSON: Thank you, Council Member  
19 Restler. Um, okay, so back to the questioning. Why  
20 does DHS currently require 2 years of housing history  
21 for families with children seeking to, to enter

1  
2 shelter? And I know this was addressed a bit in your  
3 testimony, but if you can, um, provide perhaps just a  
4 little bit more detail about why specifically, uh,  
5 DHS requires 2 years of housing history.

6 AQUEELAH WINSTON: Sure, and thank you for that  
7 question, Council Member. So PATH, which is our  
8 family intake center, um, there's— it's actually an  
9 acronym, and the acronym is Prevention Assistance and  
10 Temporary Housing. And so at PATH, we employ a  
11 prevention-first model. We believe that families are  
12 best supported in communities where they currently  
13 reside, where they have existing networks, um, and  
14 existing connections.

15 And so one of the first things we do is assess  
16 whether there are viable alternatives to shelter  
17 before we pursue shelter, which is obviously, um, a  
18 last resort for families experiencing, uh, what  
19 families who are experiencing homelessness.

20 And so at PATH, we have very thoughtfully and  
21 intentionally designed a resource room which has  
22 skilled workers, including social workers, who assist  
23 families with navigating complex family dynamics, um,  
24 situations that they would not be empowered to do on  
25 their own. And through that assistance, we're usually

1  
2 able to uh, resolve issues such as discord or perhaps  
3 connect them to supports that would allow them to  
4 remain safely housed. And so as part of that look  
5 back, we want to, one, make sure that we're exploring  
6 options to keep the families in settings where they  
7 can thrive, um, where they already have close  
8 connections.

9 And two, we want to assess whether there are  
10 other referrals that the family may need, um, to  
11 support them in their, uh, permanency. And so having  
12 that 2-year housing history, um, helps us to assess  
13 what the instability has been and how to better  
14 support the, the family.

15 CHAIRPERSON HUDSON: Thank you. And what types of  
16 documentation are required as part of the 2-year  
17 housing history verification?

18 AQUEELAH WINSTON: So we don't actually require  
19 documentation um, of housing history. Most families  
20 present with a photo ID, um, and that photo ID would  
21 be sufficient if it covered the past 2 years. If it  
was, like, renewed or issued within the 2 years prior  
to them applying for shelter, that would be  
sufficient.

1  
2 Um, if an ID is not available or does not cover  
3 the 2-year span, then we would ask for any type of  
4 bill that may have been mailed to that resident um,  
5 to just to help us to, um, establish that, that  
6 address, um, is known to them.

7 If a family is not able to provide any  
8 documentation, we are able to conduct extended  
9 searches so, um, we can see if there's anything that  
10 links the family to that address.

11 CHAIRPERSON HUDSON: Okay, thank you. And what's  
12 the process for providing shelter to those who are in  
13 the process of demonstrating their 2-year housing  
14 history?

15 AQUEELAH WINSTON: Sure, thank you for that  
16 question. So when families present at PATH, they are  
17 immediately given a conditional placement, and that  
18 conditional placement is to ensure that families have  
19 an opportunity, one, to have a safe space to sleep  
20 that night while they work on providing the  
21 documentation that we would need to determine their  
eligibility. Um, that Documentation, um, spans beyond  
housing history. Um, we have to make sure that the  
children that they are applying with, um, ah, they

1  
2 actually have verification that those are their  
3 children.

4 So it's things like that. Um, we recognize that a  
5 lot of times clients are, or families are arriving to  
6 us in, in crisis. They don't have all their documents  
7 on them and so we provide them with a conditional  
8 stay of up to 15 days to provide us the documents  
9 that we need to establish their family unit and to  
10 verify their eligibility. I'm sorry, and to determine  
11 their eligibility.

12 CHAIRPERSON HUDSON: How often are families deemed  
13 ineligible for shelter due to being unable to provide  
14 2 years of housing history? So beyond the, the 15  
15 days.

16 AQUEELAH WINSTON: I'm sorry, what was the-

17 CHAIRPERSON HUDSON: How often are families deemed  
18 ineligible for shelter due to being unable to provide  
19 2 years of housing history? So you mentioned you give  
20 them a 15-day window to provide documentation. So  
21 outside of that 15-day window, how many families are,  
or how often are families deemed ineligible for  
shelter simply because they're unable to provide 2  
years of housing history?

1  
2 AQUEELAH WINSTON: So I don't have the exact  
3 number, and we can get it, get that number to you,  
4 but what I will say is that if a family is deemed  
5 ineligible, they can immediately reapply, um, and as  
6 part of our, um, commitment to improving the way our  
7 families receive shelter, if it's their  
8 reapplication, they're not required to go back to  
9 PAF. They can actually reapply over the phone for  
10 their second application. And so families who are  
11 found ineligible can reapply over the phones.

12 CHAIRPERSON HUDSON: And they can do so  
13 immediately?

14 AQUEELAH WINSTON: Yes, immediately.

15 CHAIRPERSON HUDSON: So on, uh, if, if on day 15  
16 they're deemed ineligible, day 16 they can call up  
17 and reapply?

18 AQUEELAH WINSTON: Yes, yes or on day 15 if they  
19 receive notice early in the day, they can immediately  
20 call and request a reapplication and their placement  
21 will not be disrupted.

CHAIRPERSON HUDSON: And do you know, um, how many  
families are, uh, go reapply for eligibility?

AQUEELAH WINSTON: So that number—

1  
2 CHAIRPERSON HUDSON: Like, how many people apply  
3 one time versus more than once, I guess, would be my  
4 question.

5 AQUEELAH WINSTON: Yeah, we do have that number  
6 available. I can provide it to you.

7 CHAIRPERSON HUDSON: Okay. Um, yeah, that would be  
8 the rate of reapplication. Um, and then why is there  
9 a quote investigation into families who are seeking  
10 shelter before they are deemed eligible for shelter?  
11 Is there a reason to believe that families are  
12 fraudulently trying to access the city's shelter  
13 system?

14 AQUEELAH WINSTON: Thank you for that question.  
15 Um, we definitely, uh, do not operate off the premise  
16 that our families are, are being fraudulent about  
17 anything that they're reporting to us. We recognize  
18 that our families actually arrive to us in crisis,  
19 um, and we wanna do our best to support them, uh, but  
20 part of that is making sure that there are no viable  
21 alternatives to shelter because shelter is an option  
of last resort.

Um, and so if someone does have a safe and viable  
housing option in the community, we would encourage  
the family to return there.

1  
2 CHAIRPERSON HUDSON: Okay. Um, does DHS staff  
3 currently upload all documents relating to a family's  
4 housing history into its tracking system?

5 AQUEELAH WINSTON: Yeah, thank you for that  
6 question. Yes, we do. We, um, we use— we have an  
7 electronic case management system where we upload all  
8 documents.

9 CHAIRPERSON HUDSON: And what's the name of that  
10 system?

11 AQUEELAH WINSTON: CARES.

12 CHAIRPERSON HUDSON: C-A-R-E-S?

13 AQUEELAH WINSTON: Yes.

14 CHAIRPERSON HUDSON: I assume it's an acronym?

15 AQUEELAH WINSTON: Yes, it's, uh, Centralized  
16 Assistance and Rehousing Enterprise System.

17 CHAIRPERSON HUDSON: Okay, that's good.

18 AQUEELAH WINSTON: Sorry, it's a lot of—

19 CHAIRPERSON HUDSON: That's good though, you had  
20 it right there. Uh, how does DHS staff communicate to  
21 families if any additional information or  
documentation is required?

AQUEELAH WINSTON: Sure, thank you for that  
question. Um, so we have a number of ways. Um, the  
first is, uh, when the clients are— when the families

1  
2 apply, and I'm sorry, I keep saying clients and  
3 families interchangeably 'cause I, we have a single  
4 adult intake as well.

5 Um, so when families apply, uh, they are provided  
6 with an appointment notice, um, 2 appointment notice  
7 slips that will, um, detail the information that was  
8 collected from today and what additional information  
9 would be required.

10 Um, and so we give them 2 appointment slips, uh,  
11 to be able to provide that information during their  
12 conditional stay. Because again, we recognize that  
13 families who arrive into us in crisis may not have  
14 everything that they need, um, for us to be able to  
15 establish family unit and to make a determination on  
16 their case.

17 We also, um, have recently launched MyFile, which  
18 was— which is a electronic client portal. It's  
19 mobile-based, um, which allows us to, um, provide  
20 clients with, uh, notices electronically, um, as well  
21 as allow clients to upload that documents that we  
would need to access.

CHAIRPERSON HUDSON: Thank you for that. And, um,  
does DHS staff have access to families' HRA  
applications and documentations? How does staff

1  
2 ensure that families applying for shelter are also  
3 applying for other public benefit programs they may  
4 be eligible for?

5 AQUEELAH WINSTON: Thank you for that question.  
6 Uh, so we don't have direct access to their, um,  
7 application, their HRA application, but we can see  
8 through, um, an interface whether that client has a,  
9 um, an active shelter- active HRA case.

10 Uh, we also, um, because we understand the  
11 importance of rehousing, um, we encourage our clients  
12 to apply for public assistance if they're not  
13 currently receiving benefits. That is something that  
14 is routinely done during case management.

15 CHAIRPERSON HUDSON: And would you say, or I  
16 guess, what percentage of families um, that come  
17 through the system are then eligible for other  
18 benefits? Do you have that number?

19 AQUEELAH WINSTON: I don't have it currently, but  
20 we, we do have it. We can get back to you.

21 CHAIRPERSON HUDSON: Okay, and not- I would love  
the number about everybody, not just families, to be  
clear.

AQUEELAH WINSTON: System-wide.

1  
2 CHAIRPERSON HUDSON: Yeah, okay, thank you. Um,  
3 and where can clients applying for shelter currently  
4 seek information on the required documentation and  
5 proof of housing history required when applying for  
6 shelter?

7 AQUEELAH WINSTON: I'm sorry, can you repeat the  
8 question?

9 CHAIRPERSON HUDSON: Where can clients applying  
10 for shelter currently seek information on the  
11 required documentation and proof of housing history  
12 required when applying for shelter?

13 So if all you know to do is look on the website,  
14 is it accessible?

15 AQUEELAH WINSTON: Yes-

16 CHAIRPERSON HUDSON: There?

17 AQUEELAH WINSTON: Yes, it's, it's on the website.  
18 And we also have a general information number, um,  
19 where families can call, uh, for questions related to  
20 the application process or, um, resources that they  
21 can access to help them keep, uh, to help them to  
remain housed in the community.

CHAIRPERSON HUDSON: And you're giving them also  
examples of the documents?

AQUEELAH WINSTON: Yes.

1  
2 CHAIRPERSON HUDSON: Okay, thank you. Um, I'm  
3 gonna move on to some of my colleagues before I  
4 finish up my questions. So, Council Member Abreu.

5 COUNCIL MEMBER ABREU: Thank you, Chair. One  
6 second, pulling up my questions. Your testimony  
7 states that if a client does not consent to contact  
8 with DHS that they cannot be connected to shelter or  
9 offer supplies listed in the bill. Is that correct?

10 AQUEELAH WINSTON: Yes.

11 COUNCIL MEMBER ABREU: Theoretically, would DHS be  
12 able to engage with hospitals and provide a set  
13 number of supplies before these weather events, so  
14 that it would preclude the need for the client to  
15 approve or disapprove of DHS contact?

16 AQUEELAH WINSTON: Thank you for that question.  
17 I'm going to allow my colleague Nirah to answer.

18 NIRAH JOHNSON: Yes, I just want to go back to the  
19 prior question as well. Um, a Client does— or patient  
20 does not need to consent in order to present  
21 independently to shelter. Um, the hospital review and  
discharge planning process involves looking for  
indicators of clinical risk that the person may not  
be, um, able to safely reside in shelter from a  
medical perspective and attempting to coordinate

1 discharge to a higher level of care if the person  
2 needs that.

3 For people who have no other place to go, they  
4 can always come to shelter and they will be evaluated  
5 at intake for placement, um, regardless of what we  
6 say.

7 So, um, in the— and can you just state, restate  
8 the second question?

9 COUNCIL MEMBER ABREU: Yes, so would DHS  
10 theoretically be able to engage with hospitals and  
11 provide a set number of supplies to these hospitals  
12 before these weather events, so that it would  
13 preclude the need for the client to approve or  
14 disapprove of DHS contact.

15 NIRAH JOHNSON: Um, so DHS coordinates very  
16 frequently with hospitals on hospital discharges. We  
17 review over 5,000, um, discharges to shelter each  
18 year for new and returning clients, including people  
19 experiencing street homelessness and we're in a  
20 position where we actually sometimes identify clients  
21 who are hospitalized and street homeless, um, who  
have not had, um, known interaction with street  
outreach teams.

1  
2 So it's an excellent opportunity to put services  
3 in place. Um, it is what we do now, and what we are  
4 always working on enhancing is communicating  
5 discharge best practices with hospitals, including  
6 that the hospital should always discharge with  
appropriate clothing for the weather.

7 COUNCIL MEMBER ABREU: I don't wanna- sorry for  
8 interrupting, my timing is gonna be up soon, so my,  
9 my thing, I'm just- there's- there in your testimony  
10 you mentioned that there's a limitation, which is the  
consent aspect regarding 1353.

11 So theoretically, could DHS provide hospitals  
12 with supplies well before weather events take place,  
13 such that a client's approval or disapproval of DHS  
consent is unnecessary at that point?

14 CASSANDRA WHITE: So, um, DHS potentially could  
15 provide supplies. I think the challenge-

16 COUNCIL MEMBER ABREU: So that's what I'm- so I  
17 guess that's- so that's step one. So you  
18 theoretically could do that and then step two, I know  
19 there's a question on capacity, which is on my next  
question.

20 Um, do you have an estimate of the number of  
21 street homeless individuals that can access care in

1  
2 the city's hospital system during these extreme  
3 weather events?

4 CASSANDRA WHITE: So we don't have that number.  
5 You would have to get it from H&H. Again, we work  
6 with H&H very closely.

7 COUNCIL MEMBER ABREU: Got it.

8 CASSANDRA WHITE: And encourage them to allow all  
9 street homeless individuals to reside, um, in their  
10 waiting areas until the weather emergency is up. Um,  
11 in addition to that, my unit, the Joint Command  
12 Center Street Homeless Solutions, speaks to a minimum  
13 of 4 to 6 H&H hospitals every single night, even when  
14 it's not a weather emergency, to let them know who's  
15 our manager on duty.

16 We get the name of the AOD on duty and we're in  
17 constant contact with them throughout the entire  
18 night from 11:00 p.m. to 8:00 a.m., letting them know  
19 that we can transport folks from the ER to shelter.  
20 So we work with H&H very closely.

21 COUNCIL MEMBER ABREU: Thank you for that.

CASSANDRA WHITE: 365 days a year.

COUNCIL MEMBER ABREU: Okay, and we'll try to get  
that information from H&H. Um, regarding the storage  
capacity, um, would you agree that providing

1  
2 hospitals proactively, let's say with a kit of 20, 20  
3 supplies, would be something that hospital- that the  
4 city has capacity to coordinate individually? Because  
5 you mentioned it could be- it's a concern for the  
6 agency, the storage capacity, but 20 or 50, you know,  
7 kits doesn't seem to be a limiting factor given how  
8 massive these hospitals are.

9 CASSANDRA WHITE: We don't think it's a limiting  
10 factor. Again, our concern was just we wanted to make  
11 sure that everyone who needs to get this could get  
12 it, and because there are confidentiality issues,  
13 many folks who are in the working area who are in  
14 emergency room tell H&H they do not wanna be  
15 connected to shelters, so we we don't have that  
16 information. But if it's a matter of if the resources  
17 are available and can we make sure H&H gets them,  
18 that is not a problem. But H&H would have to agree to  
19 receive them, store them, and track them.

20 COUNCIL MEMBER ABREU: Certainly, certainly. Well,  
21 thank you so much for your testimony, and just want  
to let you know that I'm also just as eager as you  
are to work on 1352 as well and get to a good place  
on that. Thank you so much, Chair.

1  
2 CHAIRPERSON HUDSON: Thank you so much, Council  
3 Member. And I'd also like to recognize that we've  
4 been joined by Council Member Stevens Uh, Council  
5 Member Brewer has some questions.

6 COUNCIL MEMBER BREWER: Thank you very much. Um,  
7 in terms of street outreach in Manhattan, just- I  
8 just don't know how you coordinate it. Maybe it's  
9 fine, but you've got the District Attorney with  
10 individuals, you've got the street outreach, Goddard  
11 or others, and then you have- I guess the Mayor's  
12 Office has people going out for the encampments.

13 My encampments are going now- they've been there  
14 so long, they now go to block association meetings.  
15 Just so you know. But, um, so those 3 at least. So  
16 how does that coordinate? Is that working, that kind  
17 of coordination?

18 CASSANDRA WHITE: I wanna make sure I understand,  
19 um, first, thank you for the question. Is the  
20 question how we coordinate with the, uh, District  
21 Attorney's Office and other agencies -

COUNCIL MEMBER BREWER: Agencies doing outreach,  
right?

CASSANDRA WHITE: So the way that DHS coordinates  
is that we primarily focus on housing. So anyone who

1 reaches out to us, to access a Safe Haven  
2 stabilization bed or shelter bed will be granted  
3 access.

4 Um, in terms of the work that happens with the  
5 DA's office, I believe they have navigators. We don't  
6 directly work with them, but they do have access to  
7 refer individuals to our sites. And, um, when called  
8 upon, we do joint operations with the navigators and  
9 other folks who are not contracted to DHS.

10 COUNCIL MEMBER BREWER: Does it seem, does it seem  
11 to be getting more individuals with extra efforts to  
12 go to shelter?

13 CASSANDRA WHITE: We don't have the numbers  
14 specifically for the navigators, but I can tell you  
15 the DHS efforts in partnership with, say, DOHMH, H&H,  
16 uh, contracted outreach providers, and the general  
17 public does bring more folks into shelter.  
18 Partnerships are important.

19 COUNCIL MEMBER BREWER: Okay, second question.  
20 We're lucky to have a Westside Campaign Against  
21 Hunger. They're in our office once a week and they  
help with benefits because they have the ability to  
do that. So my question is how many nonprofits are  
helping? Because that means the person doesn't have

1  
2 to go downtown, they don't have to go online because  
3 the seniors don't often know how to go online, etc.

4 So is that program pretty extensive? How many  
5 nonprofits are part of it, etc.? They have the  
6 capacity to do the same benefits operation that an  
7 HRA staff member would.

8 CASSANDRA WHITE: That's for HRA benefits,  
9 correct? Okay.

10 COUNCIL MEMBER BREWER: Yeah, SNAP, uh, cash  
11 assistance, blah blah blah.

12 REBECCA CHEW: Oh, uh, thank you, Council Member.  
13 We, we'll get back to you on that number. It's  
14 through New York City Benefits, I think, right?

15 COUNCIL MEMBER BREWER: Yeah, right.

16 AQUEELAH WINSTON: We can get back to you.

17 COUNCIL MEMBER BREWER: But do you— do not— do a  
18 lot of nonprofits participate? Just generally, does  
19 it help you? Does it not help? Because it certainly  
20 helps us. I mean, with my constituents.

21 REBECCA CHEW: Right? Um, I don't have that off  
the top of my head, but we can get back to you on  
that and we are very much, uh, grateful for the  
partnership we have with nonprofits and CBOs, um,

1  
2 who, you know, um, support, um, populations in  
3 harder-to-reach areas with applying for HRA benefits.

4 COUNCIL MEMBER BREWER: Okay, it would just seem  
5 to me more nonprofits to participate because then  
6 more people would feel comfortable and would, you  
7 know, a trusted partner, so to speak.

8 So you're not— are you doing outreach to get more  
9 nonprofits to do that work?

10 REBECCA CHEW: Um, that's a different area of the  
11 agency that we can, um, find out and get back to you  
12 on.

13 COUNCIL MEMBER BREWER: All right, the other  
14 question is when you have— when parents come to PATH,  
15 how do you work in terms of the school? Because  
16 obviously you want school-aged children to be— how  
17 does that get as a priority? In other words, you want  
18 to be in a shelter near a school, near the school, if  
19 they're school-aged.

20 AQUEELAH WINSTON: Yeah, thank you for that  
21 question, Council Member. And so at PATH, we  
22 prioritize placing the youngest school-aged child,  
23 um, in the, in a shelter that's in close proximity to  
24 their school. Um, and so generally for us it's around  
25 children age 5, um, we will place them in a shelter

1  
2 if we can, capacity permitting, that is in the, um,  
3 close proximity.

4 COUNCIL MEMBER BREWER: Do you have any percentage  
5 as to how many times you're able to do that or not do  
6 that? Is that something that you track?

7 AQUEELAH WINSTON: We can— I can, I can go back  
8 and see if that's the number we can provide.

9 COUNCIL MEMBER BREWER: Okay, um, the Housing  
10 First program, does that still exist? That whole  
11 notion that, you know, housing comes first. It  
12 existed for a while. In other words, trying— we have  
13 this pilot that existed for Housing First. In other  
14 words, it's controversial. People say if you give  
15 people housing before they go through the process,  
16 then they're all going to come and want housing and  
17 blah blah blah. That was Bloomberg's position.

18 So I'm just wondering, is that - it's a pilot.  
19 Did it work? Does it still exist? Do you know?

20 CASSANDRA WHITE: Is this the Street to Home pilot  
21 that we had?

COUNCIL MEMBER BREWER: Yes, yeah.

CASSANDRA WHITE: So, um, it does not still exist.  
I'm hearing that there are conversations happening  
now. I can tell you that we were big supporters of

1  
2 the pilot. There were challenges, uh, once  
3 individuals were, um, placed in getting folks to  
4 continue to move through the trajectory to get the  
5 necessary documents documentation because it was a  
6 supportive housing unit.

7 So there's things that people have to do, but we  
8 were successful at getting individuals inside. We  
9 cle- we filled the units within a couple of months,  
10 but I can tell you there definitely was challenges.  
11 There was a study done on it, and I think the biggest  
12 challenges were that individuals once inside really  
13 struggled with meeting the documentation compliance,  
14 um, and actually going through the process, and folks  
15 just, you know, chose to do to other things.

16 So I- but I do hear - that there's more  
17 conversations about looking at other ways to consider  
18 that type of a policy and/or program again.

19 COUNCIL MEMBER BREWER: Could you get any study to  
20 the Committee? Could it be shared with the Committee,  
21 the study?

CASSANDRA WHITE: Yes, uhm, mm.

COUNCIL MEMBER BREWER: Okay, just one last quick  
question. The, um, technology, again, is a larger  
topic. Do you need any- or technology, is it working?

1  
2 Is there other kinds that you could be using? We  
3 always talk about AI as if it's kind of magic, which  
4 it's not but is there any kind of— always to me, it's  
5 still— you're filling out a lot of forms, blah, blah,  
6 blah. There's a lot of duplication. Is there some way  
7 that you're looking at the technology issue  
8 differently for filling up all of this across the  
9 board?

10 AQUEELAH WINSTON: So yes, thank you for that  
11 question, Council Member. Yes, at DHS, we are  
12 constantly looking at ways to improve the way we  
13 deliver our services in the way that our, um, most  
14 vulnerable New Yorkers access those services. And so  
15 to answer your question, yes, we are looking at ways  
16 that, uh, ways that technology can, uh, leverage the  
17 work that we currently do, um, and make it more  
18 efficient.

19 And, um, we will remain committed to that. There  
20 are a number of different pilots that we're  
21 exploring, um, to improve access to information.

22 CASSANDRA WHITE: And to your, uh, question, um,  
23 Council Member, we just received \$1.5 million towards  
24 the encampment work for technology improvements,  
25 which will allow us to really do the encampment work

1  
2 in our system of record to have really robust  
3 information about specific encampments as well as  
4 individuals on site.

5 So we're constantly looking at technology and how  
6 we make it meet our needs at the current moment.

7 COUNCIL MEMBER BREWER: Okay, thank you and I  
8 would love to hear even more about that in the  
9 future. Thank you.

10 I've got 2 encampments if anybody's interested.  
11 They're there forever, I think. Thank you.

12 CHAIRPERSON HUDSON: Thank you, Council Member.  
13 Um, I will move on to Council Member Restler.

14 COUNCIL MEMBER RESTLER: Brilliant. Thank you so  
15 much, Chair Hudson, uh, and thank you to the DHS team  
16 for your hard work on a, uh, what is, you know, a  
17 challenging situation. Um, so just to make sure that  
18 I understand properly, Street Smart is the data  
19 system we have for tracking engagements with street  
20 homeless individuals.

21 CARES is the system we have for tracking folks  
who are in, um, DHS shelter. Is that right?

AQUEELAH WINSTON: Correct.

COUNCIL MEMBER RESTLER: And none of the outreach  
providers who were doing outreach to street homeless

1  
2 New Yorkers have access to any of the information in  
3 CARES?

4 CASSANDRA WHITE: No, they have access to all of  
5 it. So they have access to Street Smart and they have  
6 access to CARES. So DHS, our 5 contracted outreach  
7 providers who do above-ground work and subway work,  
8 as well as DOHMH and the state SOS teams, have access  
9 to CARES and Street Smart.

10 COUNCIL MEMBER RESTLER: So when someone is- do  
11 they have mobile access? Like-

12 CASSANDRA WHITE: Correct, they do not have mobile  
13 access.

14 COUNCIL MEMBER RESTLER: Got it. So there's access  
15 for somebody in a headquarters somewhere at a  
16 Breaking Ground office or a BRC office, but for the  
17 outreach worker who's on the ground talking to an  
18 individual in the subway or on the street, they don't  
19 know anything about that client's history.

20 CASSANDRA WHITE: Correct.

21 COUNCIL MEMBER RESTLER: And you think it would be  
helpful for them to better understand that client's  
history?

CASSANDRA WHITE: Absolutely. We support the, the  
idea of looking at, um, expanding our technology to

1  
2 meet the needs. We know that street homelessness is a  
3 really, um, complicated, um, issue and that our folks  
4 who are on the street have experienced severe trauma.  
5 And so we understand that having, um, important  
6 information in real time, regardless of who's  
7 engaging with them, is really important to move them  
8 along the trajectory to come aside.

9 COUNCIL MEMBER RESTLER: Yeah, I, you know, I'll  
10 say the one thing that unifies just about every  
11 street homeless New Yorker is that they've been  
12 through the DHS system and they're deciding to be on  
13 the street. And so we've got a lot of work to do  
14 upstream, as our former Mayor might have said, um,  
15 thankfully former Mayor, uh, that, you know, that we  
16 have to be doing a better job of providing  
17 high-quality services and delivering better, uh,  
18 conditions in our shelters and improved safety to  
19 prevent street homelessness.

20 And I really think that as we look to the  
21 priorities of the Mamdani Administration, this has to  
be near the top of the list, um, as a way to  
effectively reduce street homelessness long-term. But  
I, I just wanna share an example. There's a gentleman  
who lived on the streets of Boerum Hill for decades.

1  
2 And, you know, come in, he'd use our office to, to,  
3 uh, use the bathroom, our sink for essentially his  
4 shower. Um, we were finally able to get him into a  
5 safe haven and wanna thank the team at BRC for— team  
6 at Breaking Ground for their help on that. But we  
7 were told, uh, there was no record of him in the DHS  
8 system for being homeless despite having lived on the  
9 streets of our neighborhood for well over a decade  
10 and speaking regularly with service providers, they  
11 claimed they didn't have a history with him, which  
12 made it more challenging for us to get him into  
13 supportive housing.

14 So I just— I, I, you can't speak to the  
15 specifics, and I don't need to get into this  
16 gentleman's personal history any more than I already  
17 have. But I just mean to say, I feel like there's a  
18 lack of coordination that, that happens here on a  
19 regular basis that makes it really hard.

20 Um, you know, and I'll, I'll give another, you  
21 know, there are a number of whole street homeless  
individuals in our community, chronically street  
homeless, live in the same locations. We, you know, I  
see them every day and have— many have serious mental

1 health issues causing public safety concerns for  
2 folks in the neighborhood.

3 Um, when we share information with the outreach  
4 providers and say, hey, there's a gentleman outside  
5 the Clark Street station. He's there all the time. He  
6 threatens people. We think he's gotten into fights  
7 before. We have a lot of concerns. The outreach  
8 provider will show up at 2 AM and say we couldn't  
9 find the person, and that'll be that. And I just find  
10 myself so frustrated because the level of engagement,  
11 the consistency of engagement, and the efficacy of  
12 the engagement just doesn't seem to yield the results  
13 that we all want. And so, it's just really  
14 frustrating as somebody who's trying to lean on our  
15 outreach providers. I re- I know a dozen, 15 staff at  
16 every one of them that we all work closely with to  
17 try to get help and it just- the number of times that  
18 we actually move people off of the streets and off of  
19 the subways into shelter feels, um, impressively  
20 rare.

21 Um, so just wondering, how do we more effectively  
coordinate with our outreach providers to, to  
actually reach them, the clients who need help, and  
actually get them connected to the safe haven

1  
2 shelters or the supportive housing that will make a  
3 difference?

4 CASSANDRA WHITE: So thank you for that, Council  
5 Member. I wanna say that one of the things we are  
6 clear about is that street homelessness is extremely  
7 complicated.

8 Um, we're in a space where we are meeting folks  
9 where they're at, engaging them repeatedly, um,  
10 offering, um, the best available options in safe  
11 haven, small settings, single rooms, double rooms,  
12 rooms. We try to put, um, offers in the location  
13 that's in close proximity.

14 So if you're on 42nd Street, we're trying to give  
15 you the single or double room on 55th Street or 46th  
16 Street, whatever we have closest. So we're really  
17 doing our best to, um, understand that the folks that  
18 we're working with have been traumatized and have  
19 fallen through many cracks, and, and some of them are  
20 really struggling and don't trust.

21 And so I think the biggest thing we, we see now  
is that beds are being offered, um, we're trying to  
understand how we can move people along, but we're  
running into a situation where we're dealing with a  
lot of severe mental illness, a lot of substance use

1 disorder, and we're working now really closely with  
2 the Administration to make sure that we're  
3 prioritizing mental and physical health, that we're  
4 ensuring that these resources are being brought to  
5 the street because right now with outreach, a person  
6 can be engaged once and come inside, or you can be  
7 engaged every week for 4 years and not come inside.  
8 It depends on how the person feels, what their  
9 challenges are, and how much they're willing to be-  
10 willing to connect with us and trust us with their  
11 care.

11 And so what we've seen is that while we've  
12 expanded the beds, we've, you know, built out more  
13 safe havens, we try to have as many beds and all of  
14 the right locations that we can, um, and our outreach  
15 teams are out 24 hours a day, 7 days a week,  
16 regardless of the weather, right? You have DHS that's  
17 out there, you know, lockstep.

16 The reality is that when we're dealing with folks  
17 who have been traumatized, we don't- it is only- the  
18 right time is only when a person says it's the right  
19 time. And what we find is that if we bring the  
20 resources to them, if we bring the healthcare, if we  
21 bring the mental health, if we say to our partners

1  
2 who have those resources. This is a full-on  
3 partnership. We're hoping that that will help us  
4 because the people who want to access our services  
5 do, but some of our most vulnerable don't, right? Or  
6 they come in for one day.

7 We've had folks we place on a Monday 5 blocks  
8 from where they're at in a single room, and we come  
9 back on a Thursday and they're back outside. That's  
10 trauma, right? Because you're in a warm space, you  
11 have a bed, there's no requirement, no sobriety  
12 requirement or anything, and yet 4 days later you're  
13 back outside.

14 So that's a signal to us that this is way bigger  
15 than just access to low barrier beds. This has to be  
16 a comprehensive all-out war on giving all of the  
17 resources to save people and to make sure that we're  
18 dealing with this from a mental and physical health  
19 perspective, including making sure those resources  
20 are available on the street, not just in shelter.

21 COUNCIL MEMBER RESTLER: I, I really appreciate  
everything you just said, and I agree with you. It's  
really hard work, and you got to meet people where  
they're at, and, and ultimately, street homeless New

1  
2 Yorkers are making the decision when they want to  
3 come inside.

4 If we recognize that just having the safe haven  
5 capacity— and I'm proud that we opened, I think, the  
6 largest safe haven in Brooklyn in my district as  
7 Council Member. I'm proud we've opened the largest  
8 supportive housing development in Brooklyn in my  
9 district as the Council Member, and I would love to  
10 do more.

11 So we'll, we'll make them happen but if we were  
12 telling me that people are struggling severely with  
13 mental illness and substance use challenges, and just  
14 having the low barrier beds with privacy is not  
15 enough, what else do we need to do to actually make a  
16 difference? Because I will tell you, as Council  
17 Member for 33rd District, I got more incoming from  
18 constituents about chronic street homelessness  
19 conditions in the last 6 months of the Adams  
20 Administration than I did during any of these 4  
21 years.

22 So I don't think we're doing better than we were.  
23 Um, I think as things are, are tough and they're  
24 entrenched, what will make a difference if it's not  
25 just going to be low barrier beds?

1  
2 CASSANDRA WHITE: Well, one of the things we're  
3 doing now, um, is that we are expanding the ability  
4 to connect with individuals. So we're going out,  
5 especially if a person's at an encampment, we're  
6 going to be going out every single day.

7 Um, and we think that that rapport building  
8 Although they may be annoyed by us, I think us being  
9 there every single day gives us a higher probability  
10 that we'll catch them when they're ready. So  
11 definitely more intense, more frequent engagement.  
12 The other thing that's happening is that we're  
13 looking at how we work with our agency partners. Uh,  
14 we've been piloting a program with H&M, uh, where  
15 they're sending out the show vans because guess what?  
16 You may not wanna talk to the outreach worker about,  
17 um, getting a safe haven bed today, but you may wanna  
18 talk about that wound on your knee. You may wanna go  
19 figure out how you refill your prescriptions. So how  
20 do we look at the mental and physical health aspect  
21 of this work to get folks to start to trust us,  
right? Because at the end of the day, it is all about  
trust. It is all about rapport building, and it has  
to be comprehensive because again, these are not  
light challenges.

1  
2 If this was just about access to a bed, there  
3 would be a lot more people people inside. This is  
4 bigger than just access to a bed. We have to lean in,  
5 we have to build rapport, we have to bring the  
6 resources to the street, and we have to be consistent  
7 and deliberate every single day until folks are ready  
8 to accept our help and trust us. I appreciate all  
9 that, and I, I support it. I would say that we're  
10 asking people to come back to a DHS system they've  
11 been to before where they've too often had not good  
12 experiences.

13 And so if we're going to address this issue long  
14 term, we need to also focus on improving the  
15 conditions in our shelters, providing more privacy,  
16 providing better services, providing more substance  
17 use and mental health treatment, um, reducing safety  
18 issues. If we can do those things on the front end, I  
19 think we will reduce street homelessness, and also it  
20 will be easier to get people to come inside, uh, down  
21 the line when, when those— when that does occur.  
Thank you very much, Chair, for the, for the leniency  
on the time.

CHAIRPERSON HUDSON: Thank you, Council Member.  
Um, okay, just some more questions from me, um,

1  
2 regarding, uh, Council Member Abreu's bills. Do DHS  
3 contracted outreach workers follow up with  
4 individuals who they support in getting care at  
5 hospitals, and if yes, what does that follow-up  
6 entail?

7 CASSANDRA WHITE: Yes, so anyone who is admitted  
8 to the hospital, if we're notified, um, by some other  
9 collateral source, then we will contact the hospital.  
10 If the hospital notifies us, then we immediately, or  
11 within a certain timeframe, report to the hospital  
12 and try to participate in discharge planning.

13 We ask the hospitals to not discharge any street  
14 homeless person known to our contracted outreach  
15 providers without coordinating with our team from the  
16 Office of the Medical Director and the Joint Command  
17 Center to make sure the person actually goes to the  
18 safe haven and is stabilized.

19 CHAIRPERSON HUDSON: And do you find that they—  
20 that H&H complies with that request?

21 CASSANDRA WHITE: Yes, but the, the challenge is,  
and, and Aqueelah will speak more to this, she's the  
lead in the unit that does this, but The biggest  
challenge is that, um, if I'm a street homeless  
person, I've been traumatized, um, and I do not feel

1  
2 like speaking to DHS that day, I can say to the  
3 hospital, I don't want— don't contact DHS. And then  
4 the hospital's hands are tied and we won't know that  
5 the person is actually being discharged to the  
6 hospital unless there's some other collateral  
7 information. And even at that point, when we contact  
8 the hospital, they will not give us any information  
9 because they are held by, you know, confidentiality.

CHAIRPERSON HUDSON: Okay, that's very helpful.

Did you have anything you wanted to add?

10 NIRAHA JOHNSON: Um, I would just like to share  
11 that what we've been trying to do with the  
12 institutional referral program to address these  
13 issues is to, um, use the time of hospitalization  
14 where the person is in an institution, is in contact  
15 with the healthcare system to try to put supports in  
16 place while they may have benefited from being on  
17 treatment while hospitalized. They may be in a more  
18 stable mental and physical state and be able to make  
19 a better choice at that moment, to encourage them to  
20 engage in programs like the street outreach programs  
21 if they aren't already connected, or, um, the, uh,  
OMH, um, Safe Options Support Program that provides  
mental health services on the street, as well as, um,

1  
2 helps with transitions indoors to shelter and safe  
3 haven and also supports applications for supportive  
4 housing. Um, we try to put those services in place  
5 before they leave the hospital, and then these  
6 programs also can provide some of the resources that  
7 have been discussed and also accompany the client to  
8 the safe haven or shelter placement to help them  
9 settle in, um, meet the social service staff on site  
10 on the day of discharge, and immediately initiate  
11 their continuity of care plan so that they don't miss  
12 treatments, they don't miss doses of medication and  
13 immediately decompensate.

14 So we believe this is the best way to help people  
15 make the transition indoors from the hospital to  
16 shelter.

17 CHAIRPERSON HUDSON: What about, um, patients who  
18 are referred to hospitals rather than admitted? Does  
19 DHS follow up with them?

20 NIRAH JOHNSON: Yes. So DHS, um, is a very varied  
21 system. There's over 550 shelters. So the way it  
works, uh, currently is that, um, new, new clients to  
shelter, people do not have an active shelter case,  
are referred to DHS through the institutional  
referral program, which is the central program. If a

1 client is hospitalized either from street or from the  
2 shelter, the party that was involved in the  
3 hospitalization, whether that be the shelter  
4 leadership or the street outreach teams, should be  
5 communicating with the hospital on the day of, um,  
6 they're sent to the hospital via EMS or by calling  
7 the hospital to provide collateral information, the  
8 condition of the client, advocate for the appropriate  
9 treatment, and then, er, ideally immediately begin  
10 discharge planning at that time to support  
11 transitions back to that shelter or indoors in the  
12 case of street homelessness. And then we would try to  
13 put all of the same supports in place.

14 So while they're in the hospital, get Shelter  
15 Partnered Act in place, SOS in place, something in  
16 place to help provide that extra supportive service  
17 to help them be more successful in the shelter on the  
18 next try.

19 CHAIRPERSON HUDSON: Okay, thank you. Um, what  
20 supplies are currently made available to patients  
21 prior to discharge who may be experiencing  
homelessness?

NIRAH JOHNSON: Ah, okay. So the other thing is  
we've talked a lot about H&H here, but, um, through

1  
2 our Institutional Referral program, we work with all  
3 hospitals in New York City, and only approximately  
4 30% of the referrals we receive come from H&H.

5 So it's really critical to note that this really  
6 applies to all hospitals, um, and any hospital may,  
7 um, receive a person experiencing street homelessness  
8 for care. Um, so the hospitals do varying different  
9 things with regard to providing clothing and supplies  
10 when leaving the hospital. Um, I, I'm not the best  
11 person to speak, but each party does. But I know that  
12 H&H does make a great effort to provide, uh,  
13 especially warm clothing or appropriate clothing for  
14 the weather.

15 Um, and, uh, we always routinely recommend that  
16 hospitals discharge after a full meal in appropriate  
17 clothing for the weather of all types, including  
18 those that were suggested in the, in the bills. Um,  
19 and, uh, we provide, um, instructions to have the  
20 clients transported to the shelter. So whether that  
21 be shelter intake or Safe Haven, so that they are not  
exposed to weather conditions before coming to  
shelter.

CHAIRPERSON HUDSON: Um, Okay, I'm gonna come back  
to some of that in a second, but what is DHS's, uh,

1  
2 FY26 budget for supplies distributed to unsheltered  
3 homeless persons, and how much has been spent thus  
4 far in FY25?

5 CASSANDRA WHITE: I don't have the number offhand,  
6 but we can, we can get it.

7 CHAIRPERSON HUDSON: You can follow up?

8 CASSANDRA WHITE: Uhm, mmm.

9 CHAIRPERSON WHITE: Okay.

10 CHAIRPERSON HUDSON: So, um, just going back to  
11 the, the hospital piece, you said 30% of referrals  
12 apply to H&H, which would imply 70% go to private  
13 hospitals or other non-H&H hospitals. Um, but the  
14 notification information training, everything that  
15 you all do goes to all hospitals, to be clear?

16 NIRAH JOHNSON; Yes, we offer guidance and  
17 training to all hospitals and other referring  
18 providers, so.

19 CHAIRPERSON HUDSON: Do you offer it? I mean,  
20 okay, you say you offer it, do you give it? Because  
21 it's one thing to offer, and if they don't accept the  
offer, then it doesn't happen, so.

NIRAH JOHNSON: I understand, yes. Um, so we  
routinely provide, um, trainings through- in  
partnership with the Greater New York Hospital

1 Association for all providers. And we, um, we  
2 actually currently, um, accept requests for training,  
3 but have a plan to have a monthly training with  
4 hospitals, um, this year beginning and we also have  
5 created a new toolkit, and then we constantly are  
6 pushing that out to providers through emails and, um,  
7 our usual communications.

8 I will say that we have a pretty small  
9 institutional referral program with just a few people  
10 and are largely focused on keeping up with the case  
11 reviews and providing individual guidance to  
12 hospitals on each case. Um, the clients are  
13 incredibly complex, and although some of the broad  
14 overarching guidance is helpful to every situation,  
15 we find that we really need to kind of negotiate and  
16 sort of in-depth back and forth conversations to  
17 address each issue that arises. So we do a lot of our  
18 work, um, on a case basis, but we do provide regular  
19 trainings.

20 CHAIRPERSON HUDSON: It sounds like you're saying  
21 it's challenging to engage with the hospitals. I  
don't want to put words in your mouth, but that's  
what I took from that.

1  
2 NIRAHA JOHNSON: Well, hospitals are a highly  
3 pressured environment as well, and so they are often  
4 very focused on discharging as quickly as possible,  
5 and they will often send us the referral just 1 to 2  
6 days, or even on the day of discharge, and we still  
7 make every attempt to create— to work on a safe  
8 discharge plan for those individuals, um, under some  
9 pressure to discharge.

10 CHAIRPERSON HUDSON: Okay, so more time is needed  
11 in order to prepare for adequate discharge, I guess,  
12 would be—

13 NIRAHA JOHNSON: Definitely and in particular for  
14 street homeless individuals, in particular for people  
15 who may have been involuntarily removed from the  
16 street or subway because there's public safety  
17 concerns.

18 CHAIRPERSON HUDSON: Right, okay, and, um, you  
19 referenced this and, and the, uh, the former  
20 Commissioner referenced this in our hearing, um, I  
21 guess was that maybe a month and a half ago or so,  
22 um, the, the emails and notification that's sent out,  
23 so specifically with regard to Code Blue or enhanced  
24 Code Blue emails, is there any sort of, um, in-person  
25 direct engagement or outreach to some of these

1  
2 hospitals, somebody who's going in and giving  
3 reminders or trainings?

4 Um, I know, you know, staff resources are  
5 limited, but I'm just wondering specifically, you  
6 know, in advance of, like, a, a- or even enhanced  
7 Code Blue or Code Blue, is somebody going into the  
8 hospitals and saying, you know, "Hey, just wanna  
9 remind everybody who's working here that these are  
10 sort of the expectations"?

11 NIRAH JOHNSON: Sure, I totally understand, and I  
12 just wanna share that I would really like to be able  
13 to do this. Um, I would really like to have this  
14 capacity in the Central Institutional Referral  
15 Program and again, I mentioned we have a small team  
16 of case-focused individuals, so most of our  
17 communications are online via live trainings and  
18 webinars.

19 CHAIRPERSON HUDSON: And sorry, what's the size of  
20 that team and what's the name again? Central  
21 Institutional Referrals?

22 NIRAH JOHNSON: Uh, it's our Institutional  
23 Referral Program, which is in the central office at  
24 DHS and it's really, um, only a team of approximately  
25 3 full-time staff, and then we've sort of been able

1  
2 to work with, um, additional cases, um, by leveraging  
3 temp resources.

4 Um, despite that, we review 5,000 referrals a  
5 year so really, um, doing the best we can. Um, but,  
6 um, have a long history of developing training  
7 programs and would love to be able to provide more  
8 proactive trainings to hospitals, both online and in  
9 person, and also, um, you know, more enhanced  
10 guidance. But in any case, um, we also— we  
11 communicate online, and then there's an organi— uh, a  
12 program through the Office of Mental Health called  
13 the Hospital Care and Transitions Program that, um,  
14 provides some guidance for hospitals on discharge  
15 planning.

16 So we partner with them as well to try to get the  
17 guidance out there and to troubleshoot various  
18 questions that hospitals have.

19 CHAIRPERSON HUDSON: Okay, great, thank you. Um,  
20 I'm gonna go to Council Member Nurse and then come  
21 back with my last bit of questions.

COUNCIL MEMBER NURSE: Um, slightly off topic but  
on topic, um, I just wanted to follow up on Council  
Member Brewer's Housing First questions. Um, I had  
Volunteers of— I have Volunteers of America in my

1  
2 district where the pilot was in the 81 participants  
3 went through, um, and we actually understood the  
4 challenges of folks get their keys, they're in there,  
5 um, but then there's all these forms and things that  
6 need to be filled out and is really challenging for  
7 them.

8 Um, we later introduced, uh, a bill which we  
9 haven't reintroduced, but to look at the 2010-E form,  
10 and I'm just wondering if you all have spent any time  
11 kind of auditing all the things that people are  
12 required to prove, um, particularly with the, the  
13 identified group of folks that are chronically  
14 homeless who have compounding issues, may or may not,  
15 right?

16 Um, but that for that particular group of folks  
17 who might not be able to chase down documents, um,  
18 has there been a review in the- I guess since that  
19 program was, uh, ended or the pilot didn't continue  
20 to look at where we can eliminate some of this need  
21 for documents, um, that would make this more  
successful again.

22 CASSANDRA WHITE: So any review that would have  
23 been done would have been done through HRA, through  
24 the supportive housing unit, so we could follow up

1  
2 with them and find out, you know, if they did an  
3 assessment and autopsy to figure out, ah, what the  
4 challenges were. I believe they did. We got a lot of  
5 feedback from them about, you know, what the  
6 challenges were as well as, um, you know, things that  
they thought could be improved.

7 Um, so I- we could definitely speak to them. I  
8 can also tell you as part of, um, the resources that  
9 we just received at DHS, uh, the current  
10 Administration afforded us, I believe, uh, 4, um,  
11 housing specialists who will also be able to work in  
12 tandem with folks on the streets to connect them, um,  
13 um, to permanent housing and supportive housing.

14 So we will plan to use those resources to support  
15 if in fact this- a program like this is rolled out  
16 again.

17 COUNCIL MEMBER NURSE: Yeah, no, I just, uh, I, I  
18 guess I don't really have any further questions, but  
19 I just wanna advocate for- I think, you know, I think  
20 that program was short-lived. I think it was a  
21 mistake not to continue it. I understand that things  
needed to be worked out operationally, but we should  
be looking for ways to reduce the amount of things  
that people gotta come up with.

1  
2 I mean, if you're sleeping in a tent and you've  
3 been there for a year, they're not going to chase  
4 down this stuff and if we had the right, you know,  
5 platform that everybody can see— we've been engaging  
6 this person for 4 years, they don't need to prove it  
7 to us because we know— that would be really, really  
8 great. And I hope this administration can really,  
9 really prioritize making Housing First, um, a  
10 priority again, because it works and at least there  
11 are organizations that are, are ready to do it, and,  
12 and we've even tried to do it when we've had, um,  
13 supportive housing units on public land that we're—  
14 that are going through ULURP. We can't even advocate  
15 for those to be, um, street-to-home because of all of  
16 these layers of things that need to be cut out, um,  
17 in between. So I just wanted to comment that I hope  
18 this gets picked up again.

15 CASSANDRA WHITE: Thank you.

16 COUNCIL MEMBER NURSE: Thank you.

17 CHAIRPERSON HUDSON: Thank you, Council Member,  
18 uh, Council Member Morano.

19 COUNCIL MEMBER MORANO: Thank you very much. Thank  
20 you for your testimony and for all the great work  
21 that you're doing. Uh, a couple of questions on the

1  
2 legislation, uh, and if we have time, uh, one or two  
3 other areas regarding other work DHS is doing.

4 Your testimony says that reducing the housing  
5 history requirement from 2 years to 1 could cost  
6 roughly \$169 million a year plus another \$7 million  
7 from extending temporary housing placements.

8 At a time when New Yorkers are already paying  
9 quite a bit in taxes, wondering if you can explain  
10 why expanding eligibility for shelters should be the  
11 priority instead of investing in policies that  
12 actually help people leave the system.

13 AQUEELA WINSTON: I'm sorry, can you repeat the  
14 last part?

15 COUNCIL MEMBER MORANO: Well, why, why should we  
16 be investing in policy? Why shouldn't we be investing  
17 in policies that help people leave the system, given  
18 the increased cost of moving the housing history  
19 requirement from 2 years to 1?

20 AQUEELA WINSTON: So thank you for the question. I  
21 want to make sure that I'm understanding it  
correctly. Um, as I read the testimony, the, the  
proposal was to reduce the housing history from 2  
years to 1 year, and we provided some cost estimates  
around what we thought the implications would be.

1  
2 Um, and it sounds like the last part of your  
3 question is why are we looking to reduce it to 1  
4 year?

5 COUNCIL MEMBER MORANO: Well, basically, given the  
6 enormous cost of the shelter system already, I'm  
7 wondering why expanding eligibility for shelter is  
8 the right priority rather than investing in policies  
9 to help people exit homelessness permanently.

10 AQUEELAH WINSTON: So we're not expanding  
11 eligibility for homeless, uh, homeless families, um,  
12 but there has been a massive investment in assisting  
13 families and exiting shelter. Um, City FHEPs, which  
14 is the housing subsidy, um, that our families use to  
15 subsidize rent, has been, uh, uh, er, there's been a  
16 substantial, um, investment into— in that over, um,  
17 the past years to assist families with moving out of  
18 shelter.

19 COUNCIL MEMBER MORANO: On, uh, Intro 139, your  
20 testimony indicates that the system already generates  
21 interview receipts and notifications. If that's the  
case, are we solving a real problem here or simply  
adding another bureaucratic requirement that might  
cost time and money but not necessarily improve  
outcome for either taxpayers or applicants?

1  
2 REBECCA CHEW: Yeah. Hi. So, um, yeah, the, that  
3 form notification, the 1173, is both electronic and  
4 written. Um, and it, it kind of already exists. Um,  
5 you know, and so I think the Council may have been  
6 looking for a few additional data fields that we're  
7 happy to kind of, uh, discuss and, you know, how  
8 operationally it, it might kind of not really fit  
9 into our calling in on demand and kind of, I think it  
10 more looks at outbound calling, which really isn't  
11 the, the operational processes that we have in place,  
12 but most of the elements, um, are already exist in  
13 that form. So, yeah.

14 COUNCIL MEMBER MORANO: A-already without new  
15 existing legislation. So on, uh, Intro 0008, uh, that  
16 legislation proposes new tracking systems and data  
17 reporting for outreach efforts, but the, the real  
18 question I think for a lot of folks is outcomes. What  
19 percentage of people that your outreach teams engage  
20 with actually accept shelter or services and I'm  
21 wondering how you think this bill might materially  
improve that number.

CASSANDRA WHITE: So I don't have the numbers  
offhand of how many people, but we do have that, that  
information. Um, I do think that this bill could help

1  
2 us because the goal is to have a mobile app. We've  
3 already had conversations about it. I think the  
4 challenge has been funding. Um, we've received a  
5 couple of different estimates, and the lowest lowest  
6 has been \$3 million. The highest was \$10 million, um,  
7 and then there was one in between, and that did not  
8 include, uh, the annual, um, cost to keep it, you  
9 know, functional.

10 Um, and we know that it's important to have that  
11 annual support because ultimately these systems have  
12 to be cleaned, recalibrated, and there's a lot of  
13 technical stuff that happens. But we absolutely think  
14 a mobile app, um, could be a, an, um, an opportunity  
15 for us to do this work. Would have a lot more  
16 information at our fingertips while we engage folks  
17 who are challenging.

18 COUNCIL MEMBER MORANO: You mentioned the  
19 Institutional Referral process between hospitals and  
20 DHS. How often do hospitals discharge patients  
21 directly into the shelter system, and are we  
confident that we're not unintentionally turning  
shelters into a, a default discharge plan?

NIRAH JOHNSON: We are always looking as, um, at  
that and so, as I mentioned earlier, um, we receive

1  
2 about 5,000 referrals that are mostly new to shelter,  
3 um, and some complex returning clients. And, um, the  
4 sh- the policy is that if a client is a- active and  
5 is sent to the hospital, they should be, um, planning  
6 discharge with the shelter itself that they're  
7 assigned to.

8 So there's a far higher number of people who are  
9 hospitalized and return to shelter than 5,000 per  
10 year. Um, and hospitals are supposed to, um, look at  
11 the patient's available options and the level of care  
12 they need and discharge to that level of care but it  
13 is extremely challenging for hospitals to discharge  
14 to nursing home or assisted living facility,  
15 particularly for people with very serious behavioral  
16 health histories, histories of incarceration, um, and  
17 other barriers.

18 So, um, shelter unfortunately does become  
19 sometimes the, um, easiest option for the most  
20 challenging clients. Um, and so we look at our data  
21 on, um, successful discharge to shelter each year,  
and we see that about 30% of the total hospitals-  
hospital discharges actually present to shelter or  
Safe Haven.

1  
2 Um, we don't have information as to where the  
3 others end up going. Some certainly end up going to  
4 the street despite, despite all of our efforts. But,  
5 um, I, I'm sharing this to illustrate that more could  
6 be done to enhance the collaboration between  
7 hospitals to support successful discharges for people  
8 experiencing homelessness.

9 And, um, to answer kind of a question that came  
10 up earlier, there are gaps in our system. So shelter  
11 is is not, you know, a medical facility, um, and does  
12 not have robust onsite mental health, medical  
13 treatment, or, um, home healthcare services that you  
14 would, um, like, many people might need a home health  
15 aide to help them with their activities of daily  
16 living or medication management.

17 Um, and that being said, there are very few  
18 assisted living or, um, places that provide this sort  
19 of home health care, um, available to our clients. So  
20 they end up with us, though it's not the best option,  
21 because there's no other option for them.

18 COUNCIL MEMBER MORANO: And Chair, if you'll  
19 permit me, one final question. This is somewhat  
20 local, but it's in line with what you testified  
21 about. Your testimony suggests these proposals could

1  
2 increase the need for shelter capacity across the  
3 city. Uh, my constituents —on Staten Island are  
4 currently dealing with a, a proposed 160-bed men's  
5 shelter on Arthur Kill Road.

6 Before expanding policies that increase demand  
7 for shelters, has DHS evaluated whether communities  
8 like Staten Island or other communities, uh, are  
9 being asked to observe a disproportionate share of  
10 new facilities?

11 CASSANDRA WHITE: So the answer to that question  
12 would come from our capacity division. We could  
13 absolutely ask them, um, to get back to you with the  
14 answer to that.

15 COUNCIL MEMBER MORANO: Thanks very much.

16 CHAIRPERSON HUDSON: Thank you, Council Member. A  
17 couple of quick follow-up questions on, uh, two  
18 previously asked questions.

19 One is, um, following up on Council Member  
20 Nurse's line of questioning about the shelter, uh,  
21 VOA says that they're still operating the program but  
DHS isn't sending folks to their units, and they have  
a vacancy of 16 units. Can you just explain or  
clarify why DHS may not be utilizing those units?

1  
2 CASSANDRA WHITE: So, um, I was not aware that  
3 we're not using those units. Um, we had filled the  
4 building to capacity. Um, if there are units that are  
5 vacant and no one is accessing them, the challenge  
6 may be that when we refer folks, they do not want to  
7 go to the location.

8 Um, the reality is that, you know, folks have a  
9 right to autonomy. Um, and so if they visit the  
10 location, um, and, and it's someplace that they're  
11 not interested in, or if we are engaging them either  
12 in the subway or at our welcome center, um, and we  
13 tell them about the location and they choose not to  
14 accept, uh, there isn't much we could do but continue  
15 to work work with them.

16 I have an assistant commissioner directly under  
17 my purview who refers to the units, um, for VOA. And  
18 so if we have a vacancy of 16, believe me, it's not  
19 because DHS is not trying. It just means that  
20 individuals are not accepting, um, those, those, uh,  
21 rooms.

CHAIRPERSON HUDSON: Okay, but maybe you could  
look further into that.

CASSANDRA WHITE: Absolutely, and I'll get back to  
you.

1  
2 CHAIRPERSON HUDSON: Okay And then we were talking  
3 earlier about the phone number for clients to call  
4 and reapplying. How many times can clients reapply  
5 given that specific phone number? My understanding,  
6 um, from, from some advocates is that they can call  
7 one time to reapply, but perhaps if they're calling a  
8 second or a third time, meaning they've already  
9 applied the initial time and this is the second or  
10 third time that they're using the phone call, uh, the  
11 phone number, to reapply and then they're being  
12 denied or they're being sent to a different number or  
13 something.

14 AQUEELAH WINSTON: Sure, happy to answer that. So  
15 just to clarify, the second application-- the second  
16 reapplication, we do allow that to be done over the  
17 phone. If there is a third application or any  
18 subsequent applications, it would have to happen in  
19 person, but there is no limit on how many times a  
20 family can reapply.

21 Our goal um, is that during the conditional  
process, the families, uh, gain greater clarity on  
what is being asked of them, um, and that they are  
able to provide that documentation so that we can  
make a determination within that conditional period.

1  
2 Um, on average, we're able to make a determination on  
3 a family case within 16 days, which is very close to  
4 the conditional period.

5 And so, um, the families, most families are able  
6 to, um, produce what is needed and like I said  
7 earlier, it's generally limited to, um, the  
8 verification of the child, the birth certificates,  
9 things like that, photo ID.

10 Um, the housing history, it, it can be just  
11 writing out the address because even if they don't  
12 have documentation that they live there, we still can  
13 conduct an investigation by-

14 CHAIRPERSON HUDSON: Right.

15 AQUEELAH WINSTON: Doing a field investigation,  
16 speaking with the, the primary tenant and so there  
17 isn't a lot of burden, um, on a client for physical  
18 documents. Um, but if they are not able to produce,  
19 uh, documentation or they don't cooperate with the  
20 process, the first reapplication is over the phone.  
21 Any subsequent applications are in person.

Um, but again, our hope is that between the first  
and second application that they understand what is  
being asked of them and that we understand what we

1  
2 can do to assist them so that we can make a  
3 determination on their case.

4 CHAIRPERSON HUDSON: Uh, I just want to push back  
5 a little bit because if the idea around the second-  
6 the first reapplication, but the second application,  
7 the first phone call after they visit in, in person,  
8 and, and the idea is to lessen the burden on the  
9 client and allow them the opportunity to reapply via  
10 telephone, I would make the argument that if they  
11 still need to apply subsequent times, a third or  
12 fourth time, then they probably need- they're  
13 probably already overburdened and probably could use,  
14 um, you know, it would be easier for them to reapply  
15 a third or fourth time via telephone.

16 So to make them come in person the first time,  
17 reapply by phone the second time, and then have to  
18 come back in person the third or subsequent time to  
19 me seems like a lot. And so if there's a way to allow  
20 subsequent reapplications after the second time via  
21 telephone, I think that would probably be helpful.

AQUEELAH WINSTON: Thank you, and that's something  
that we can, uh, consider.

CHAIRPERSON HUDSON: Okay, thanks. Um, Council  
Member Avilés.

1  
2 COUNCIL MEMBER AVILÉS: Thank you so much, Chair.  
3 Um, I was surprised you were getting questions, uh,  
4 political questions around why we should do either  
5 or, but clearly we need to do everything to make sure  
6 that New Yorkers get housed and get the services that  
7 they need because they deserve that, um, because they  
8 are human and we dignify all people.

9 Um, I'd like to, uh, I'd like to know, um, a  
10 slightly off topic, um,

11 CHAIRPERSON HUDSON: I'll allow it.

12 COUNCIL MEMBER AVILÉS: Yeah, I know thank you  
13 Chair, you're the best. Um, for recently, uh,  
14 supporting a constituent in her application for HEAP.  
15 The telephone number on the application— we, we sat—  
16 she sat in my office for 3 hours on the phone, and  
17 then we, we did all the rest of the stuff.

18 Um, this is her third attempt at trying to get on  
19 the phone to get a fair hearing and sat on the phone  
20 for several hours. I think akin to, um, folks having  
21 to resubmit the paperwork over and over again for a  
whole range of services, um, in the agency. It is  
truly a burden, and I think if we were to potentially  
even have all the Council Member staff who spend time  
resubmitting paperwork work for a wide range of

1  
2 services to the agency, we are spending oodles of  
3 money.

4 So I am- I'd love to hear, have you heard this  
5 before? Can you look into this? Why is someone  
6 sitting on a phone for 3 or 4 hours, um, with not  
7 getting any service? And then ultimately, um, it is  
8 true that we need to remove all these additional  
9 barriers, particularly for a vulnerable community  
10 who's not carrying around paperwork and can't- is not  
11 gonna fax things 5 or 6 times.

12 Um, so I just would like to hear from you if you  
13 could talk to us about what, what's going on here.

14 REBECCA CHEW: Thank you, Council Member, for that  
15 question. We'd be happy to look at that individual  
16 case to really dig in and find out, understand more  
17 what, what the delays might have been and what was  
18 causing that.

19 COUNCIL MEMBER AVILÉS: So thank you. There's no  
20 reason for anyone to be on a phone for 3 hours on  
21 hold, an unending hell vortex of- I don't even know  
if there was music on there because I didn't have the  
patience to wait. Um, thank you.

In terms of the, um, in terms of the system that  
would help efficiency, obviously there was a

1  
2 proposition here that why would we— we are not  
3 expanding homelessness in New York City. It is  
4 happening and so we are recognizing that we have to  
5 work more efficiently. We have to get, um, we have to  
6 make sure we get these vouchers online so that we can  
adequately house people.

7 In terms of the, um, in terms of the expansion  
8 of, uh, the tech in order to help the agency do  
9 better, \$3 million cost seems relatively nominal in  
10 the grand scheme of things. Um, is that— is, is it—  
11 is the agency of the opinion that this is a good  
investment to, you know, you gotta move slow to move  
fast?

12 CASSANDRA WHITE: Um, we are of the opinion that  
13 it's a good investment. Um, we absolutely believe  
14 that, um, again, a mobile app would allow, um,  
15 individuals to have real-time information about very  
complex needs of, of our vulnerable Population.

16 I can tell you that we have historically, um,  
17 expanded and, and worked on Street Smart. Street  
18 Smart was stood up many years ago and then left  
19 without the necessary supports. Um, and we have year  
20 over year, um, even including using funding from  
21 other state resources or whatever we could get,

1  
2 expanded on what's available in Street Smart, the  
3 quality of our data, um, the information that's being  
4 put into the system, right?

5 We are consistently, um, trying to make sure that  
6 our data and reporting is, is clear, that it's  
7 collecting the right data, that it's driving how we  
8 do outreach, how we connect folks to services, and  
9 where we deploy our resources.

10 So we absolutely believe that any investments in  
11 technology, especially if it allows us to, um,  
12 support really vulnerable folks in real time with  
13 accurate information, is important.

14 COUNCIL MEMBER AVILÉS: And thank you, and thank  
15 you for the work that you all do.

16 CASSANDRA WHITE: Um, one point of correction, um,  
17 Council Member Hudson, uh, my Assistant Commissioner  
18 confirmed to me that we are actively referring to  
19 VOA. So I will get a date for the last referral, but,  
20 um, what was reported to you doesn't add up with what  
21 my team is saying. They're saying we're actively  
reporting consistently.

We have not stopped in any vacancies. We're  
referring, uh, folks to those beds, so we'll find out  
exactly what those—

1  
2 CHAIRPERSON HUDSON: Okay, that would be great, if  
3 you could follow up with me and Council Member Nurse.  
4 That would be great.

5 CASSANDRA WHITE: Will do.

6 CHAIRPERSON HUDSON: Thank you. Okay, I have, um,  
7 more questions, so we're, we're almost there before  
8 we get into public testimony. Um, and this is, uh,  
9 all related to Council Member Restler's, um,  
10 legislation.

11 So do DHS outreach workers currently track the  
12 total number of engagements with unhoused individuals  
13 that result in temporary placement into shelter?

14 CASSANDRA WHITE: Yes.

15 CHAIRPERSON HUDSON: And then is that after their  
16 shift?

17 CASSANDRA WHITE: Um, uh, so—

18 CHAIRPERSON HUDSON: Versus in real time, right?

19 CASSANDRA WHITE: So they have phones and they  
20 have tablets, so the information is uploaded on the  
21 phone and the tablet into a spreadsheet and then  
moved into our system of record.

CHAIRPERSON HUDSON: Okay, thank you. What's the  
average number of engagements with an unhoused

1 individual by a DHS street outreach worker before  
2 they accept placement into shelter?

3 CASSANDRA WHITE: That is an extremely complicated  
4 question. If you were to ask me—

5 CHAIRPERSON HUDSON: Give me an extremely  
6 complicated answer.

7 CASSANDRA WHITE: And I'm about to give it to you.  
8 So if you were to say, here's John Smith, how many  
9 times has he spoken to a contractor outreach  
10 provider, um, or DHS worker before he came inside? I  
11 could give you that number.

12 If you ask me about everybody we spoke to in the,  
13 the past year, that would be a very difficult number.  
14 And the reason is because, again, street homelessness  
15 is extremely complicated. We have folks that we meet  
16 on the first day in the subway system and they accept  
17 the bed. And we have people who have been on the  
18 street for 4 years straight being engaged 3 times a  
19 week and they refuse to accept the bed.

20 In addition to that, say you accept the bed today  
21 and you go into shelter, you're going to stay in  
Street Smart. So even if you are in shelter, we will  
still count you as street homeless because guess  
what, the outreach team is still working with you in

1  
2 shelter and when you get discharged to permanent  
3 housing, you will get support for 6 months after. And  
4 so what happens is that your Street Smart record runs  
5 the gamut, and so it's really difficult to say that  
6 even when we're engaging with you, that you're not  
necessarily already in transitional housing.

7 CHAIRPERSON HUDSON: Okay, so hold on. So for  
8 that— for 6 months or beyond the 6 months?

9 CASSANDRA WHITE: For a person in permanent  
10 housing, it is 6 months or, or further if the  
11 outreach team determines that you need more supports,  
12 yeah.

13 CHAIRPERSON HUDSON: So shouldn't we be able to  
14 identify those people as unique individuals outside  
15 of everybody else who might fall into that category  
16 for better tracking purposes?

17 CASSANDRA WHITE: Yes, absolutely and again, the,  
18 the challenge would be there are people— if you look  
19 at, for example, certain programs, there are people  
20 who accept a bed day 1, day 10, day 8. There are  
21 people who accept the bed 3 years, 4 years later, or  
who have accepted beds intermittently throughout the  
4 years, right? They went in for a month, came back  
out.

1 CHAIRPERSON HUDSON: Right.

2 CASSANDRA WHITE: So it's not that the numbers  
3 can't be pulled, but if you really want an accurate,  
4 um, understanding, it really has to be, uh, looked at  
5 individualized because we could say John Smith  
6 accepted a bed 25 times, stayed in shelter 250 days,  
7 and spent 300 days on the street. We could tell you  
8 that about John Smith, but to throw John Smith in  
9 with everyone else-

10 CHAIRPERSON HUDSON: Right.

11 CASSANDRA WHITE: It's - the variance is so big  
12 because of the complications. It's just really  
13 difficult to say that the numbers will make sense  
14 when a person received them.

15 CHAIRPERSON HUDSON: It might be helpful though to  
16 have at least categories then of some of these  
17 numbers. So if there are clients like John Smith,  
18 let's say there are 50 clients like John Smith, and  
19 we have 50 extremely complicated, you know, sort of  
20 recurring clients, blah, blah, blah, that fit into  
21 that category. Outside of that though, um, you know,  
the average number of engagements with an unhoused  
individual before they enter permanent housing is X,  
while they're in transitional housing is Y, you know,

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it would be helpful if maybe you can disaggregate some of the data in that way.

CASSANDRA WHITE: Understood. Understood. Yes.

CHAIRPERSON HUDSON: Okay, thank you. Um, and that can be, you know, it doesn't have to be immediate, obviously, but it would be good, you know, over some short to medium amount of time if we could work together on trying to—

CASSANDRA WHITE: Absolutely.

CHAIRPERSON HUDSON: To get there. Okay, thank you. Um, what data points are DHS outreach workers currently recording in Street Smart?

CASSANDRA WHITE: So they, um, record, um, first and foremost, whatever um, identifying information a person is willing to provide. And again, that, you know, varies from person to person, but it is, uh, name, uh, date of birth, um, the location, um, any other, um, information that would help us identify the person, including, um, if the person doesn't wanna give a name, we have a person in the system called Deborah Eyeliner or, um, Lady on Park Bench was still here, this park, right? We take whatever information we can to try to identify folks because

1 oftentimes it takes a bit of time for people to give  
2 you their name, right?

3 CHAIRPERSON HUDSON: Right.

4 CASSANDRA WHITE: Um, and so we're collecting  
5 basic information initially, and then as they agree  
6 to services, more and more information— name, Social  
7 Security, date of birth, whatever they're willing to  
8 provide. Um, and then once they're inside, of course,  
9 there's a whole other level of engagement that  
10 happens to try to get the information necessary for  
11 permanent housing.

12 So it is basic demographic information and then  
13 the necessary information for permanent housing as  
14 they move through the trajectory.

15 CHAIRPERSON HUDSON: Okay, thank you. What's the  
16 current protocol for street outreach teams to record  
17 engagement with street homeless individuals?

18 CASSANDRA WHITE: Um, so for— when you say  
19 protocol, is it how, how soon do they have to put the  
20 information that they have in the system?

21 CHAIRPERSON HUDSON: Correct.

CASSANDRA WHITE: Um, so for DHS staff, it is um,  
as soon as they send a report, the information is  
entered, and we have staff who are, um, collecting

1  
2 that information via email and inputting, um, you  
3 know, the, the person accepted transitional housing  
4 and whatever information was provided, um, as part of  
5 the, um, initial email requesting the shelter  
6 placement.

7 For the contracted outreach providers, um, I  
8 believe they have to put it in by the end of the  
9 shift, um, but before the next shift. But I can  
10 confirm that for you.

11 CHAIRPERSON HUDSON: Okay, great, thank you. And  
12 is the Street Smart application developed and  
13 maintained internally by DHS, or is it contract-  
14 contracted out?

15 CASSANDRA WHITE: Uh, so the, um, DHS has, uh, 5  
16 contracted outreach providers. Uh, BRC is Below  
17 Ground, they have the entire subway system. And then  
18 we have Bronx Works for the Bronx, Breaking Ground  
19 for Queens, Brooklyn, um, and Project Hospitality for  
20 Staten Island. And then we also work very closely  
21 again with the state SOS teams, um, as well as the  
DOHMH, um, response teams.

CHAIRPERSON HUDSON: Okay, I counted 4: BRC, Bronx  
Works, Breaking Ground, Project Hospitality. Was  
there a 5th?

1  
2 CASSANDRA WHITE: And what— and MOC, sorry,  
3 Manhattan is MOC, sorry.

4 CHAIRPERSON HUDSON: Okay, thank you.

5 CASSANDRA WHITE: I should have known MOC.

6 CHAIRPERSON HUDSON: MOC?

7 CASSANDRA WHITE: Yes, MOC, Manhattan Outreach  
8 Consortium.

9 CHAIRPERSON HUDSON: Thank you. Um, did DHS issue  
10 an RFP, and when was the last RFP?

11 CASSANDRA WHITE: Yes, we're excited. We just, ah,  
12 released a couple of weeks ago our subway RFP. Um,  
13 and so we will start the process necessary to award  
14 that contract for the next fiscal year coming up. Um,  
15 and then the year after, the street, um, uh, RFP will  
16 come out. They received a 1-year extension on their  
17 contract, so their RFP will come out, I believe,  
18 Fiscal Year '28. But the subway is for fiscal year  
19 '27, and that was just released and so folks are now  
20 applying and going through the process to be awarded  
21 that contract.

22 CHAIRPERSON HUDSON: Thank you. Sorry, bear with  
23 me here one second. Um, do you have any staff  
24 internally that work on maintenance or, or  
25 improvement of the system?

1 CASSANDRA WHITE: We do.

2 CHAIRPERSON HUDSON: You do? Okay.

3 CASSANDRA WHITE: We do have a Street Smart team.

4 CHAIRPERSON HUDSON: How many?

5 CASSANDRA WHITE: Um, so when you say internally,  
6 do you mean internally to DHS or internally-

7 CHAIRPERSON HUDSON: DHS or HRA staff?

8 CASSANDRA WHITE: Uh, yes, DHS has a, um, it's  
9 DSS, they have a team, uh, the last I heard, and  
10 Keith, correct me if I'm wrong, was 8 to 10 people  
11 who work on Street Smart. Yes.

12 CHAIRPERSON HUDSON: Okay. And- okay um, are there  
13 any capital projects in the Preliminary Capital  
14 Commitment plan related to this system?

15 CASSANDRA WHITE: The last I heard, there were  
16 none.

17 UNIDENTIFIED: There, there is some money for that  
18 could help with the mobile.

19 CASSANDRA WHITE: Okay, Keith is saying there is  
20 some money that could help with the mobile, or  
21 capital project money, but it has to be applied for.

CHAIRPERSON HUDSON: Okay, some. Can you maybe  
follow up and let us know?

CASSANDRA WHITE: Yes.

1  
2 CHAIRPERSON HUDSON: How much? Okay and generally,  
3 how many DHS or HRA staff currently work on IT  
4 projects related to DHS technology systems upgrades  
5 and maintenance?

6 CASSANDRA WHITE: I think that's something I will  
7 have to get back to you on.

8 CHAIRPERSON HUDSON: Okay.

9 CASSANDRA WHITE: Yeah.

10 CHAIRPERSON HUDSON: And what are the number of  
11 vacant DHS IT positions? You can follow up.

12 CASSANDRA WHITE: Yes.

13 CHAIRPERSON HUDSON: And the budget for those DHS  
14 IT positions in FY 2024? Would also be great to have.

15 CASSANDRA WHITE: Got it.

16 CHAIRPERSON HUDSON: Great, thank you. And does  
17 DHS use contracted technology services?

18 CASSANDRA WHITE: Yes, we do. Mhm.

19 CHAIRPERSON HUDSON: Okay, for which systems and  
20 with which vendors?

21 CASSANDRA WHITE: Uh, we would have to follow up  
on which vendors.

CHAIRPERSON HUDSON: Okay.

1  
2 CASSANDRA WHITE: Uh, but, but all systems are  
3 using, uh, contractors, but we can get the  
4 information.

5 CHAIRPERSON HUDSON: All systems, so there's no  
6 internal or internally owned sort of, or run? I mean,  
7 I guess you have staff that runs and manages and  
8 maintains them, but none of it is owned by the city.

9 CASSANDRA WHITE: We'll get back to you on that.

10 CHAIRPERSON HUDSON: Okay, and when you get back  
11 to me, I would love to also know why the decision was  
12 made to use an external vendor in these instances. Is  
13 it because we don't have the ability or we don't have  
14 the money or, ah, what's the reason why we're using  
15 so many outsourced software systems?

16 CASSANDRA WHITE: No, we will get back to you.

17 CHAIRPERSON HUDSON: Okay, great.

18 CASSANDRA WHITE: One, um, point of clarification.  
19 So, uh, DHS staff send in their emails with client  
20 information immediately. Uh, for our contracted  
21 outreach providers, um, the monitor team said the  
information is usually put in the same day, but they  
have a maximum of 48 hours to upload client  
information in the system of record.

1  
2 CHAIRPERSON HUDSON: Okay, very helpful. Thank you  
3 all so very much. I'm the last person standing, so  
4 there are no other questions. Thank you.

5 PANEL: Thank you.

6 CHAIRPERSON HUDSON: I'll be right back for public  
7 testimony.

8 Alrighty, thanks for everyone's patience. I now  
9 open the hearing for public testimony. I wanna remind  
10 members of the public that this is a government  
11 proceeding and that decorum shall be observed at all  
12 times. As such, members of the public shall remain  
13 silent at all times. The witness table is reserved  
14 for people who wish to testify. No video recording or  
15 photography is allowed from the witness table.

16 Further, members of the public may not present  
17 audio or video recordings as testimony, but may  
18 submit transcripts of such recordings to the  
19 Sergeant-at-Arms for inclusion in the hearing record.  
20 If you wish to speak at today's hearing, please fill  
21 out an appearance card with the Sergeant-at-Arms and  
wait to be recognized.

When recognized, you will have 2 minutes to speak  
on Introductions 139 and 232 and the 3 Preconsidered  
bills on our agenda.

1  
2 If you have a written statement or additional  
3 written testimony you wish to submit for the record,  
4 please provide a copy of that testimony to the  
5 Sergeant-at-Arms. You may also email written  
6 testimony to testimony@council.nyc.gov within 72  
7 hours of this hearing.

8 Audio and video recordings will not be accepted.  
9 And the first panel— we can change the, the time to 3  
10 minutes. Okay.

11 Um, the first panel is Alison Wilkey, Julia  
12 Casey, Chris Mann, and Catherine Trapani.

13 ALISON WILKEY: Get started? Yep. Good afternoon.  
14 My name is Alison Wilkie. I'm the Director of  
15 Government Affairs and Strategic Campaigns with the  
16 Coalition for the Homeless. Um, thank you, Chair, for  
17 holding this hearing, and thank you for the Council  
18 for really caring about people who are unsheltered  
19 and providing oversight for what the city is doing to  
20 help people who are unsheltered and also to help  
21 those who are seeking shelter.

I'm gonna focus my comments on some of the  
specific bills here, um, starting with Intro 232, uh,  
to reduce the required housing history. Uh, the  
Coalition for the Homeless and the Legal Aid Society

1 support, um, you know, all efforts to reduce the  
2 amount of housing history required by people seeking  
3 shelter.

4 Just some numbers here from January 2025. So only  
5 35.2% of families with children who sought shelter  
6 from DHS were deemed eligible during the month of  
7 January and on top of that, 38% of families applying  
8 for shelter in January had to submit 2 or more  
9 applications before being found eligible, and 5% had  
to submit 4 or more applications.

10 And while people are given temporary placements  
11 while eligibility is determined, during that period,  
12 they remain ineligible for benefits like City FHEPs  
13 or other things that could help speed them out of  
shelter.

14 So speeding up the eligibility determination can  
15 have a materially positive effect on the amount of  
16 time it takes for people to get those resources in  
17 place. Um, you know, we would note that reducing the  
18 housing history from 2 years to 1 year would align it  
19 for the adult families system for people without  
20 children, uh, which only requires a 1-year housing  
21 history. And I think it would, you know, help people

1  
2 access shelter or families in particular access  
3 shelter b-better.

4 You know, while DHS said that they don't require  
5 a lot of documentation, the reality is, is that a lot  
6 of families seeking shelter have been moving around  
7 for, you know, some time before they finally go to  
8 the shelter system. And so really providing that  
9 documentation can be quite difficult for families  
10 that have been bouncing around.

11 Um, speaking to Intros 1352 and 1353, the  
12 Preconsidered Intros, you know, we support all  
13 efforts to, you know, for DHS and hospitals to  
14 coordinate more, but we would really urge the Council  
15 to go a step further and require that outreach  
16 workers go to hospitals and staff hospitals during  
17 Code Blue, Code Red, and Code Gray events.

18 You know, that would solve some of the issues  
19 with the time, you know, and hospitals trying to  
20 discharge people. You know, DHS workers could also  
21 then bring supplies with them during, you know, while  
they're staffing that shift, you know, eliminating  
some of the issues that DHS raised and we would  
support an expanded list of supplies that outreach

1 workers have on them at all time, not just during  
2 Code Blue and Code Red, but all the time.

3 You know, this is part of, you know, meeting  
4 people where they're at and developing relationships  
5 of trust by actually bringing them and being able to  
6 offer people the things that they need in that  
7 moment.

8 Um, so I will stop there. We're gonna submit  
9 written joint testimony with Legal Aid Society, and  
10 Mr. Goldfein will clean up anything that I missed.

11 CHAIRPERSON HUDSON: Okay, awesome. I'm gonna have  
12 a, a, a question or two after. Thank you.

13 JULIA CASEY: Good afternoon. My name is Julia  
14 Casey, and I'm a Senior Policy Analyst at the  
15 Federation of Protestant Welfare Agencies. I wanna  
16 thank Chair Hudson and Members of the Committee for  
17 the opportunity to provide testimony. And we are here  
18 today in support of Proposed Legislation Intro number  
19 0139, which would require the Department of Social  
20 Services to provide a benefits interview confirmation  
21 notice.

Over the past several years, we have conducted  
research to better understand the challenges that New  
Yorkers face in accessing benefits. And as part of

1 this work, our 2024 report shares findings from a  
2 series of interviews we conducted with New Yorkers  
3 who receive cash assistance.

4 Participants provided extensive accounts of the  
5 barriers they have experienced while trying to access  
6 this program. Um, and among them are the barriers  
7 related to the eligibility and recertification  
8 interviews.

9 New York City data from Fiscal Year 2024 shows  
10 that more than 108,000 cases were denied because an  
11 applicant was unable to complete the eligibility  
12 interview. And this represents the largest category  
13 of all cases denied. And in addition, more than  
14 23,000 cases were closed because the recipient was  
15 unable to complete the recertification interview.

16 One of the New Yorkers we spoke with who started  
17 receiving cash assistance after she became homeless  
18 reported that she lost benefits because her  
19 caseworker forgot to document that she had completed  
20 the recertification interview. And as a result, she  
21 and her young daughter went without benefits for over  
a month and a half, um, during which time they  
struggled to afford food and other necessities.

1  
2 Another participant reported extensive challenges  
3 with the recertification process, and at the time we  
4 had spoke with him, he had not received his benefits  
5 from the previous month despite having done 3  
6 separate recertification interviews.

7 Thus, if the proposed legislation were enacted,  
8 these individuals would have, have received  
9 confirmation within 24 hours of their interview and  
10 failing to receive such a notice would have alerted  
11 them to follow up with a case manager.

12 They also would've had the opportunity to  
13 potentially rectify any issues earlier in the  
14 process, which may have prevented them from losing  
15 benefits or having to repeat steps in the process to  
16 apply.

17 While this change may seem simple, we, we  
18 recommended it in our previous report because  
19 applicants and recipients of cash assistance, as well  
20 as many advocates we spoke with recounted numerous  
21 instances in which staff neglected to log interviews  
and the applicant was never informed, and this  
resulted in New Yorkers being wrongly, wrongly denied  
benefits, recipients having their cases erroneously  
closed.

1  
2 Um, in addition, we also, um, heard a number of  
3 different but related issues related to the interview  
4 process. Um, and so we look forward to working with  
5 the Council to, um, not only pass the proposed  
6 legislation, but also to address some of the other  
7 access and retention barriers in the program. Thank  
8 you.

9 CHAIRPERSON HUDSON: Thank you so much.

10 CATHERINE TRAPANI: Good afternoon. Um, I'm  
11 Catherine from Volunteers of America Greater New  
12 York.

13 Before I get into my testimony, we have  
14 submitted, uh, written for the record. I just want to  
15 thank you, Chair Hudson, for the clarifications made  
16 about the questions regarding our Street to Home  
17 program. We went from Oh no, that program's not  
18 running anymore to, of course, we're sending you  
19 referrals all the time.

20 So I think you can see this hearing really  
21 brought out this disconnect, um, that we have and  
really the orientation of street outreach teams  
continuing to exclusively function in emergency mode  
instead of being able to do two things at once and  
help people to get stable. Um, and, and I think we

1  
2 need to address that. So I look forward to the  
3 follow-up and sincerely thank you for the real-time  
4 kind of corrections and so on.

5 Um, but onto the legislation for today and what I  
6 prepared testimony about, um, certainly wanna, um,  
7 underscore our support for the, the legislation that  
8 would provide receipts to help people follow up with  
9 the HRA appointments. Um, so we support Intro 139.  
10 Um, for Intro 232, um, the team at our Family Shelter  
11 Division would like to thank you for this  
12 legislation. Um, the families that are in conditional  
13 status at the Volunteers of America shelters that we  
14 operate are really struggling to meet all of the  
15 documentation requirements and cycling through, you  
16 know, multiple reapplications is just really  
17 disruptive.

18 So, I think the additional time in conditional up  
19 to 30 days plus the reduction of the required housing  
20 history will just make that bar easier to meet and  
21 very pragmatic. So I think it's a common sense  
solution that will really make the system function,  
um, better. And so we thank you for that.

1  
2 Um, I also have, um, extensive comments on the  
3 Preconsidered Introduction regarding the mobile  
4 application for Street Smarts.

5 Um, I, I think the intent is right. I don't know  
6 that it goes far enough. There are not— there are so  
7 many overlapping and disparate teams that are  
8 conducting street outreach that merely codifying a  
9 mobile version of Street Smart probably isn't enough  
10 to overcome all of that.

11 So I think it's a really important first step.  
12 But in the written testimony that I probably don't  
13 have time to go through, we, um, sort of did a little  
14 mini case study for the Council saying like, you  
15 know, if this person is outreached during a shift by  
16 these 5 different organizations, it is highly likely  
17 that no one staff member trying to support that  
18 individual will know what the others are doing. And  
19 so in addition to real-time updates in a mobile app,  
20 I think we also need to really look at requiring, um,  
21 data sharing agreements across agencies and ensuring  
that those agencies not only have read access to  
Street Smarts, um, but can also input their own notes  
into the app, which is currently not possible on the  
current desktop application.

1  
2 So just really thinking through how we can make  
3 sure that our safety net has no holes and that we're  
4 doing this robust care, um, for folks that are  
5 attempting to access the life-saving shelter and  
6 housing supports that groups like mine offer. Um, and  
7 really looking forward to working with the Council  
8 and figuring all this stuff out. So, thank you.

CHAIRPERSON HUDSON: Thank you.

8  
9 CHRIS MANN: Good afternoon. Uh, thank you, Chair  
10 Hudson, members of the General Welfare Committee for  
11 the opportunity to testify. My name is Chris Mann.  
12 I'm the AVP of Policy and Advocacy at advocacy at  
13 WIN, which is the largest provider of shelter and  
14 supportive housing for families with children in New  
15 York City.

14  
15 Tonight alone, nearly 3,600 children will sleep  
16 in a WIN shelter. Reforming the PATH intake center is  
17 a top priority for our clients. They find the current  
18 process to be grueling and traumatic, uh, and the  
19 biggest hurdle they face is having to prove their  
20 housing history.

19  
20 Families in acute crisis fleeing domestic  
21 violence, lockouts, or street homelessness often  
cannot produce 2 years of paper documentation.

1  
2 Because of this, 43% of our families last year had to  
3 apply for shelter multiple times. One family had to  
4 apply 20 times, uh, to shelter.

5 Instead of getting help, families are stuck in  
6 conditional status, forced to reapply at PATH every  
7 10 days, which is in person after the first  
8 reapplication. So they can reapply once from- right.  
9 Shelter, but then they have to go back. Um, uh,  
10 luckily they don't have to bring their kids anymore.  
11 Thank you, City Council.

12 Um, it takes an average of 41 days for families  
13 to be found eligible. One family at WIN waited 314  
14 days. Uh, without shelter eligibility, families  
15 cannot access rental assistance like City FHEPs, and  
16 these bureaucratic bottlenecks trap families in  
17 shelter for much longer than they need to be there.  
18 Um, we urge the City Council to pass Intro 232, and  
19 we thank you, Chair Hudson, for sponsoring that  
20 legislation.

21 Um, we also urge the Council to pass accompanying  
legislation, uh, to allow families to attest to their  
housing history as well, um, and create, uh, a  
virtual shelter intake process so they don't have to  
continue to, to go back to PATH.

1  
2 It's time to ease the, the burdens for families  
3 during the most traumatic moments of their lives. And  
4 again, we thank you for, uh, the opportunity to  
5 testify on this.

6 CHAIRPERSON HUDSON: Thank you. Can you just, um,  
7 without getting into too much detail, can you tell me  
8 why a family would have to wait 314 days or apply-  
9 was it 20 or 30 times?

10 CHRIS MANN: 20 times.

11 CHAIRPERSON HUDSON: 20 times. Like, what the  
12 issue is there?

13 CHRIS MANN: So usually the issue is that a third  
14 party can't verify their housing history. So, um,  
15 they have told, you know, DSS what their housing  
16 history is, um, but DSS can't independently verify  
17 that. So they get stuck in this loop where, you know,  
18 they've said that they- this is where they lived, but  
19 because DSS can't verify it, then they're just stuck  
20 in conditional status.

21 CHAIRPERSON HUDSON: And, I mean, from my  
perspective, if you're- no one- I've, I've- let me  
rephrase and say I have not yet met somebody  
clamoring to get into the shelter system.

CHRIS MANN: Absolutely not.

1  
2 CHAIRPERSON HUDSON: So given that, if a family is  
3 applying for shelter and we know they are there,  
4 therefore without housing, and DSS is saying they  
5 can't verify the previous address or whatever it may  
6 be, we should just let them into the shelter system  
7 regardless.

8 CHRIS MANN: Couldn't agree more.

9 CHAIRPERSON HUDSON: Okay. Um, uh, hold on, sorry,  
10 let me keep track of my questions.

11 Um, Catherine, to your knowledge, is data sharing  
12 included in RFPs?

13 CATHERINE TRAPANI: Um, it would depend on which  
14 RFP. So this is actually the problem with the many  
15 different agencies that have decided to put their hat  
16 in the ring to do street homelessness.

17 So for the DHS shelter, uh, I'm sorry, DHS  
18 outreach RFPs, they are required to participate in  
19 Street Smarts, um, and share data with DHS. I don't  
20 have the knowledge to answer your question of what  
21 H&H, for example, requires if they're bidding their  
work out or SOS, Safe Options Supports, or like any  
of the other SHAP which is a volunteer-led group.  
Like, I, I, I feel like there's just a lot of cooks  
in this kitchen. And so, one, I don't know that it's

1  
2 the best use of resources. I think we're all paying  
3 for duplicative services that don't really improve  
4 outcomes. And that's just sort of problem A.

5 Um, but I think government could work better  
6 together to sort of talk to their counterparts that  
7 are releasing their RFPs to see if they could come up  
8 with something but I don't know what the state  
9 requires. I don't know if my fellow panelists do.

10 CHAIRPERSON HUDSON: Okay, thank you. Um, and then  
11 Alison, um, do you know if, if there are any  
12 additional services or resources that folks are  
13 eligible for while deemed ineligible for shelter?

14 ALISON WILKEY: No, I mean, I think one of the  
15 issues that we see from people coming to our crisis  
16 program is there actually isn't even enough, like,  
17 sufficient enough help at PATH for people managing  
18 that intake process. So people are often lost, you  
19 know, immediately on it but until you're found  
20 eligible for shelter-

21 CHAIRPERSON HUDSON: Wait, hold on a second.  
22 There's, there's not enough help -

23 ALISON WILKEY: From DHS staff-

24 CHAIRPERSON HUDSON: From DHS staff.

1  
2 ALISON WILKEY: Yeah, who man, you know, the PATH  
3 system, like we do have people come into our office  
4 with, you know, a lot of questions and not really  
5 clear what's going on, not clear why their first  
6 application was denied. And I mean, a point I wanted  
7 to make is that while we support creating more  
8 digital systems, those are definitely not a  
9 substitute for like live in-person help and  
10 increasing the amount of help that people get at PATH  
11 to try and navigate these eligibility determinations.  
12 But while someone is, is in a temporary placement,  
13 you're not eligible for rental assistance, um, and  
14 other programs that will help you, uh, leave shelter.

15 CHAIRPERSON HUDSON: Okay, I'm like a little  
16 baffled because, you know, DSS claims that there's,  
17 there's so many staff members and there's so much  
18 help and there's so many resources, particularly at  
19 intake centers. That, that doesn't jive with clients  
20 saying they're leaving, you know, without a clear  
21 understanding of what's going on or the status of  
their case or what they might be eligible for, etc.,  
etc.

1  
2 ALISON WILKEY: But yeah, we, we get those  
3 families in our office trying to figure out what's  
4 going on. I don't know if others wanna-

5 CATHERINE TRAPANI: Yeah, it diverts a lot of  
6 resources. So when a family has a conditional  
7 placement, they're living with us even though they're  
8 not technically eligible. And so our case management  
9 staff at our shelter have had to become expert at  
10 eligibility because there really isn't the support of  
11 the PATH Center. And so when we should be helping a  
12 parent plan for her future, um, moving on to  
13 permanent housing, we find ourselves really trying to  
14 help them navigate this complex process of  
15 essentially proving a negative.

16 CHAIRPERSON HUDSON: Right?

17 CATHERINE TRAPANI: Because you have to approve  
18 that there isn't a place.

19 CHAIRPERSON HUDSON: Right.

20 CATHERINE TRAPANI: Um, which is really hard to  
21 do, particularly as Alison, um, testified, you know,  
our folks, it's rarely a straight line to shelter  
from your past stable residence. I mean, people do  
everything to try not to have to resort to the  
shelter system. So it's often a really winding road

1 where you're sort of cashing in every favor that you  
2 can, and it's very difficult to document that.

3 So certainly surprised to hear that people will  
4 just take like a DMV, uh, card as proof of residency  
5 that's unexpired. That's certainly not been the  
6 experience of the folks in our shelter. If they're  
7 doing that, that's phenomenal, but that's just not  
8 what we see. Um, and our case managers spend quite a  
9 bit of time, um, trying to support, uh, PATH  
10 applications.

11 CHAIRPERSON HUDSON: Okay. One thing that I'm  
12 particularly interested in is, um, streamlining a lot  
13 of these systems and, uh, making it easier for people  
14 to get benefits, particularly when we know that  
15 they're eligible for said benefits. And so, um, would  
16 love to, you know, just hear from you all, not in  
17 this moment, but we can follow up, um, about ideas  
18 and, you know, that you have and ways that we can  
19 further enhance the systems that we have to make sure  
20 that people are getting connected more efficiently to  
21 the benefits. So thank you, thank you all, appreciate  
your testimony. Thank you.

PANEL: Thank you.

1  
2 CHAIRPERSON HUDSON: Okay, the next panel is  
3 Brandon Lloyd, Graham Horn, Joshua Goldfein-  
4 Goldfine- and Lucy Carney.

5 BRANDON LLOYD: Uh, good afternoon, Chair Hudson  
6 and members of the Committee on- excuse me- on  
7 General Welfare. Thank you for the opportunity to  
8 testify today.

9 My name is Brandon Lloyd and I'm the Director of  
10 Government Affairs at the Urban Resource Institute,  
11 uh, also known as URI. URI is the largest provider of  
12 domestic violence shelter services in the nation and  
13 a leading provider of transitional housing for  
14 families across New York City.

15 Every day we create pathways to safety,  
16 stability, and healing for survivors of domestic  
17 violence and families in crisis. Um, I'd also like to  
18 thank Council Members Hudson and Louis for their  
19 continued leadership and partnership on behalf of our  
20 residents in their districts. URI is proud to operate  
21 shelters in both of their communities, and we deeply  
appreciate their ongoing support for the families and  
the pets that we serve.

On any given night, URI has the capacity to  
provide safe and stable housing to nearly 4,000

1 residents, um, as one of our— at one of our 24  
2 shelter locations. We also provide residents with  
3 access to comprehensive wraparound services including  
4 case management, housing placement support, and  
5 educational services for children to help families  
6 stabilize and move towards permanent housing.

7 URI strongly supports Intro 232, which would  
8 improve the process by which families with children  
9 are assessed and referred for temporary housing  
10 assistance. Families who arrive at PATH intake center  
11 are often in the midst of profound crisis. Many are  
12 fleeing domestic violence, unsafe living conditions,  
13 or sudden housing instability. In these moments,  
14 bureaucratic barriers can prolong trauma and delay  
15 access to safety.

16 Intro 232 takes meaningful steps to remove these  
17 barriers while remain— while maintaining program  
18 integrity. By reducing these, uh, the required  
19 housing history from 2 years to 1 year, this bill  
20 recognizes the reality that families in crisis may  
21 not have access to extensive documentation,  
especially when living in— when leaving unsafe homes.  
It also ensures that families with children can  
remain in temporary shelter for at least 30 days

1 while their eligibility is assessed, providing  
2 critical stability during a period of uncertainty.

3 The bill's requirement that the New York City's  
4 Department of Homeless Services maintain digital case  
5 records and notify applicants electronically about  
6 missing documentation is another significant  
7 improvement.

8 Clear communication and accessible records can  
9 prevent unnecessary delays, reduce repeated intake  
10 visits, and allow families to better navigate a  
11 complex system at a time when they're already under  
12 immense stress.

13 For families experiencing housing instability,  
14 regardless of the reason, crucial time matters. Every  
15 additional day spent navigating unclear procedures or  
16 gathering documentation can mean prolonged exposure  
17 to danger or homelessness. This uncertainty is  
18 particularly challenging for children, who make up  
19 60% of folks in our shelters.

20 Intro 232 represents a practical, compassionate  
21 reform that will make the system more transparent,  
more efficient, and more responsive to the realities  
families face when seeking shelter.

1  
2 Thank you. URI is proud to support this  
3 legislation, and we respectfully urge the Council to  
4 pass Intro 232 to ensure families with children can  
5 access emergency housing quickly with dignity. Thank  
6 you.

7 CHAIRPERSON HUDSON: Thank you so much. We can go  
8 to Graham.

9 GRAHAM HORN: Sure. Um, good afternoon, um, Chair  
10 Hudson.

11 CHAIRPERSON HUDSON: Can you just lean into the  
12 microphone please?

13 GRAHAM HORN: Oh sure, please, please.

14 CHAIRPERSON HUDSON: Thank you.

15 GRAHAM HORN: Um, good afternoon, Chair Hudson,  
16 staff members who were here before. Um, thank you for  
17 the opportunity to testify and for these, these bills  
18 under consideration.

19 Um, my name is Graham Horn. I use he/him  
20 pronouns. I'm a coordinating attorney with the  
21 Shelter and Economic Stability Project at New York  
Legal Assistance Group.

Um, I just want to start by saying, Chair Hudson,  
I, I can't thank you enough for 232. I, I have dealt,  
um, supported with— supported so many families

1 through this application process at PATH. Um, these  
2 changes would make such a difference in their lives  
3 and their ability to access as, as many of the  
4 members of the former panel suggested, access to City  
5 FHEPs, all the things that we understand to help  
6 these families that are held from them while this  
7 process goes on.

8 I don't have, uh, a number to compete with Chris  
9 Mann's, you know, whatever, 360 days it was, but I  
10 have had many clients over half a year waiting for  
11 this. And, and Chris was suggesting the ways in which  
12 it can be related to third parties failing to  
13 respond, basically, which ends up being labeled the  
14 family as non-cooperative in the process.

15 I have seen cases where DHS PATH just mislabeled—  
16 there is a date match problem between the documents  
17 submitted and the documents they put in their system.  
18 So they have a date range of March 15th to April 27th  
19 for a housing placement that on the letter says March  
20 15th to April 25th, and that is enough to kick it out  
21 of the system and cause— and, and the same  
communication problems we were hearing about where  
the families aren't told this. They aren't— it isn't  
specifically said to them, all you have to do is

1  
2 either have the letter changed to match the dates we  
3 have in our system, or we have to change the dates in  
4 our system to match your letters, which is obviously  
5 the way that it should work. But oftentimes we feel  
6 the problem is that the people who our clients are  
7 interacting with face to face at PATH don't have the  
8 ability or the wherewithal, whatever it is, to change  
9 the dates in the system such that they just keep  
10 being asked to apply again.

11 Um, and, and I also wanna, you know, emphasize  
12 the fact that, as has been said as, ah, before, if a  
13 family were not in fact homeless, in need of shelter,  
14 we don't believe that they would be coming and trying  
15 to access a shelter system.

16 So, um, we also think that there should be no  
17 eligibility process of this, of this housing history  
18 nature in order for families to enter shelter, just  
19 as it is in the single adult system. Um, and if there  
20 need to be eligibility investigations, DHS should  
21 perform them in a different way.

22 First, by complying with its duty to assist  
23 applicants in obtaining the necessary documentation.  
24 And also, we would support, uh, a system that would  
25 allow for self-attestation, at least as proof of, of

1 street homelessness, which they also need documentary  
2 evidence to prove if within that 2-year period  
3 they've been on the street.

4 Um, uh, you know, a family experiencing  
5 homelessness who is found ineligible for shelter will  
6 continue to be homeless. Uh, and instead, by, um,  
7 passing this bill and other, uh, other methods to  
8 improve that eligibility process, we can help  
9 families move into, into stable and permanent  
10 housing. So I thank you very much for that and, and  
11 for the opportunity to testify.

12 CHAIRPERSON HUDSON: Thank you so much. We'll,  
13 we'll work towards no eligibility.

14 GRAHAM HORN: Well, this is a-

15 CHAIRPERSON HUDSON: But this is a good, yeah,  
16 good step in the right direction.

17 GRAHAM HORN: Definitely.

18 CHAIRPERSON HUDSON: Joshua.

19 JOSHUA GOLDFEIN: Uh, thank you, Chair. Thanks,  
20 staff, um, and members. Uh, we- my name is Josh  
21 Goldfein. I'm a staff attorney at the Legal Aid  
Society. I use he/him pronouns.

As you heard earlier, we will be submitting joint  
written testimony with our client Coalition for the

1  
2 Homeless. We are, um, in, in support, at least in  
3 spirit, of, um, all the bills on, on the agenda  
4 today. We have some um, notes that you'll see in our,  
5 in our written comments on, on some of them  
6 technically.

7 Um, I just wanna highlight in particular, um, as  
8 Alison testified earlier, there is the, the  
9 department recognizes 3 categories of Emergency Code  
10 blue, uh, as we just experienced, Code Red, which is  
11 coming up, and also they have a Code Gray for when  
12 air quality is hazardous, which we're very concerned  
13 is going to be, ah, become an increasing feature of  
14 our city, and as we've seen.

15 Um, we also really wanna thank the, the Committee  
16 again, um, in these hearings, uh, just through your  
17 questioning, we have learned so much, um, today, for  
18 instance, about the, uh, the Street to Home program,  
19 but in, in also, uh, about the WARM program at the,  
20 at the, uh, hearing on the Code Blue, um, events  
21 earlier. And, uh, we actually would not have known  
about that had you not asked those questions.

Um, that has led to a series of meetings with H&H  
and others about that program and how it worked, and,  
uh, demonstrated that that was in fact a far superior

1  
2 model, um, than the way outreach has been conducted  
3 in the past.

4 Um, and a key feature of that is not just that  
5 the, um, that the staff were able to provide the kind  
6 of support and supplies that previously, uh, outreach  
7 contractees were not— contractors were not able to  
8 offer to people, um, but also because they had direct  
9 access to low barrier bed placements. And so when you  
10 can offer somebody something that they want, like a  
11 bed, uh, or permanent housing even, um, that is what  
12 really, uh, is necessary to make the difference.

13 Um, I think that Council Member Nurse was asking  
14 about this earlier in regard to the barriers to  
15 getting people into supportive housing. Um, and, uh,  
16 and similarly, we see that with the outreach  
17 programs. If they can, you know, they can approach  
18 the person, they can try to build a relationship of  
19 trust. If they don't have a low barrier bed to offer  
20 them, the people are not gonna come off the street.  
21 And Commissioner Park, former Commissioner Park  
acknowledged this in her, uh, recent, uh, exit  
interview with City and State.

Um, she specifically said, you know, that if we—  
that one of the obstacles to getting the people off

1 the street is the lack of, of having these low  
2 barrier beds, which is the thing that people want.  
3 Um, and that's what they're looking for.

4 So, you know, we have seen, thanks to your  
5 hearings, uh, a much better model. Um, but the key is  
6 really to provide housing to people, whether it's,  
7 uh, short-term low barrier beds or supportive housing  
8 or, uh, permanent affordable housing in the  
9 community. Um, that's really what we're gonna need to  
solve this. Thank you.

10 CHAIRPERSON HUDSON: Thank you. Lucy.

11 LUCY CARNEY: Hello and good afternoon, uh,  
12 Committee Chair Hudson and members of the Committee.  
13 My name is Lucy Carney. I use she/her pronouns. I'm a  
14 Licensed Master Social Worker and Residential Social  
15 Worker at Encore Community Services, where I work  
16 directly with homebound older adults in supportive  
17 housing on Manhattan's West Side.

18 I'm here today to talk about food, specifically  
19 the gap between what the city funds and what  
20 homebound older New Yorkers actually need to stay  
21 healthy and be able to stay home. The city currently  
funds one meal a day, five days a week. Older adults  
have come to rely on this program and supplemental

1  
2 meals from crucial partners like City Meals on  
3 Wheels. But I can tell you from personal experience  
4 that for too many older adults, this program has  
5 gaps.

6 For the people I work with, that gap is  
7 dangerous. Long stretches without a meal worsen  
8 chronic- worsen chronic conditions, interfere with  
9 medications that need to be taken with food, and  
10 force people to make impossible choices about what  
11 little- with what little funds they have.

12 I realize that this issue may seem off topic for  
13 today's hearing, but I understand and see that this  
14 is relevant to everything I heard in today's hearing.

15 Um, on a personal note, I worked at the Paul's  
16 Place Safe Haven on 14th Street a few years back, and  
17 now I work in a supportive housing site in the Times  
18 Square area and I've seen how prioritizing housing in  
19 the Housing First model, um, in the Safe Haven  
20 placement has given older adults hope to gain safety,  
21 stabilization, and the freedom to focus on deeper  
fulfillment in their lives. But how can one- I'm  
sorry, um, you know, how can one really focus on  
expanding their lives when they have 5 out of 21  
meals a week accounted for and secured?

1  
2 So right now we fill that gap with private  
3 charity. Organizations like City Meals on Wheels do  
4 extraordinary work, and we are very grateful, but we  
5 should be clear-eyed about what that arrangement  
6 means.

7 The city has defined its obligation narrowly and  
8 then relied on nonprofits and donors to quietly cover  
9 what it won't. We can do more. Our ask is  
10 straightforward: fund home-delivered meals 7 days a  
11 week at the true cost of delivering them every day,  
12 not 5 out of 7. The research on this is unambiguous.  
13 Consistent nutrition keeps older adults out of  
14 hospitals, out of nursing facilities, and living  
15 independently longer. That saves the city money and  
16 more importantly keeps people fed.

17 New York City has an opportunity in the 2027  
18 fiscal year budget to make a real commitment here,  
19 and we urge the Council to press for it and I thank  
20 you for your time.

21 CHAIRPERSON HUDSON: Thank you so much. Can, um,  
I'd like to just ask a question, um, and anyone can  
answer, um, but in the, in the city's testimony, they  
said that shelter capacity across the city would need  
to be increased for families with children as a

1  
2 result of, um, my bill, Intro 232. And so I'm  
3 wondering if, um, you can maybe speak to that and,  
4 and give your perspective on why you think they might  
5 claim that, um, shelter capacity would need to be  
6 increased.

7 JOSHUA GOLDFEIN: I, I was pretty surprised by  
8 that answer because I took it as an admission that  
9 people are not becoming eligible and are being lost,  
10 essentially, um, because they're unable to navigate  
11 this process. And if we make the process, um, uh, you  
12 know, more, um, accessible to them, um, we will have  
13 to serve more people. Um, and I, I thought that was a  
14 pretty remarkable response.

15 CHAIRPERSON HUDSON: Right and we're, we're  
16 currently not serving all of the people with the  
17 need.

18 JOSHUA GOLDFEIN: Oh, we know that. Yes.

19 CHAIRPERSON HUDSON: Right, right.

20 JOSHUA GOLDFEIN: Look at the number of people who  
21 are doubled up, people who are staying in dangerous  
situations, people who are, uh, calling the, uh,  
domestic violence, uh, shelter hotline and being  
told, I'm sorry, there are no beds available. You  
could go to the regular Department of Homeless

1  
2 Services system tonight, and then they don't, um, uh,  
3 because they're- they don't- wouldn't feel safe  
4 there. I mean, we know that there are many ways in  
5 which people are not, uh, being served because  
6 they're unable to get through the system.

7 CHAIRPERSON HUDSON: Thank you. Anyone else to  
8 add? Yeah, okay, great. Thank you all so much for  
9 your testimony. I appreciate it.

10 PANEL: Thank you.

11 CHAIRPERSON HUDSON: Okay, we'll now move to  
12 virtual testimony. Please wait for your name to be  
13 called to testify, and please select unmute when  
14 prompted. We will start with Alexis Foote.

15 SERGEANT AT ARMS: You may begin.

16 ALEXIS FOOTE: Good afternoon, um, Chair and  
17 members of the Committee on General Welfare. Thank  
18 you for the opportunity to testify.

19 My name is Alexis Foote, and I'm the Founder of  
20 the Real Edgemere Community Land Trust, a community  
21 activist, a mom of 3, and a survivor of domestic  
22 violence at the hands of my husband.

23 My estranged husband weaponized the New York City  
24 Police Department, the MTA, and his aids to have me  
25 arrested. My estranged husband and I are in a

1  
2 horrible custody battle case for my 2 youngest  
3 children.

4 My oldest child and I are living in a- in- are  
5 living at the Community Housing Innovations that is  
6 getting paid \$5,000, \$128 for Alexander and me. What  
7 I find disturbing is that there aren't any housing  
8 vouchers for families, um, that are in the shelter.  
9 Human Resources, the Department of Homeless Services,  
10 the Department of Social Services all need to be  
11 fired, audited, and replaced with individuals that  
12 really wanna take care of families, um, like mine.

13 My son and I have been in the shelter system for  
14 a year now because the system isn't working, um, for  
15 our best interest. I'm very disappointed with the  
16 following agencies: Human Resources, Department of  
17 Homeless Services. Um, I have been on the phone line  
18 trying to do my recertification so me and Alexander  
19 could stay here, and I've been on the phone for more  
20 than 5 hours.

21 Um, the system has reported that I've been  
non-compliant. Um, right now I'm fighting to get a  
voucher, and they say that because me and Alexander  
make too much, we don't qualify for City FHEPs. The  
computers, equipment, software CARES, all need to be

1  
2 updated to service the clients and make life easy for  
3 the employees. Not only are the clients stressed out,  
4 but the employees that work for, um, the shelters  
5 that I've been in, like Acacia, um, Community Housing  
6 Innovations, they are stressed because every time  
7 they try to do something, CARES, um, either locks  
8 them out or everybody else who's in the shelter  
9 system is trying to use CARES.

10 We are being told to use our own money to move  
11 out of the shelter or SODA because there's not  
12 enough, um, City, city, city FHEP vouchers doesn't  
13 meet the needs of families like mine.

14 It's, it's, it is 2026, and there should be  
15 several types of housing vouchers and home, home  
16 ownership programs supporting the city's most  
17 vulnerable residents and homeowners in New York City.  
18 The Governor needs to fund the, um, how- more, more  
19 housing vouchers. She needs to open up Section 8. A  
20 lot of families like mine and immigrant families are  
21 not going to get housing if we do not get Section 8  
vouchers. Landlords do not wanna deal with SODA. Um,  
not only that, family court, housing court, and  
criminal court also have a part in why I believe  
there's a lot of street homeless, um, adults and I

1 say that as somebody who was in the foster care  
2 system and ended up being homeless at 17, 'cause my  
3 mother kicked me out. And me and my beautiful birth  
4 mother, we reunited. And that's another thing, my mom  
5 was, uh, um, was one of your vulnerable populations,  
6 and you let her down when you allowed my husband to  
7 arrest me, and her feeling like she was reliving her  
8 life.

9 Not only that, I had to be her case manager when  
10 it came to finding her and her, um, spouse, um,  
11 housing. And honestly, they're both gone.

12 SERGEANT AT ARMS: Time expired.

13 ALEXIS FOOTE: Okay, I'll put everything else in  
14 testimony.

15 CHAIRPERSON HUDSON: Yeah, you, you can submit it,  
16 uh, via, via email. Thank you so much though for  
17 sharing that.

18 ALEXIS FOOTE: Thank you so much, Miss Hudson.  
19 This means so much to me and my families that are in  
20 this shelter. We want to get out. We want housing,  
21 and I'm not here because I wanna be. I'm not here  
because I wanna be.

CHAIRPERSON HUDSON: I, I, I, I know that. I know  
that to be true. Um, and we will, we will follow up

1 with you, and, and please do submit the rest of your  
2 testimony in writing, and thank you for sharing.

3 Um, Christopher Leon Johnson.

4 SERGEANT AT ARMS: You may begin.

5 CHRISTOPHER LEON JOHNSON: Yeah, thank you, Chair  
6 Hudson. My name is Christopher Leon Johnson. I  
7 support every bill on the ticket. Uh, but I wanna  
8 make this clear that, uh, going forward, I think like  
9 next week, I think in the next few weeks, I know  
10 you'll be asking, uh, the new DSS Commissioner about  
everything that they need for the budget.

11 Um, I believe that the DSS need to start going  
12 forward and requesting that the City Council  
13 introduce a bill to make it where that the nonprofits  
14 are no longer allowed to, um, issue out city FHEPs  
15 and, and City FHEP vouchers to prospective, uh,  
16 tenants because a lot of corruption that's going on  
17 and they only gonna hand 'em out to the people that  
18 they believe that it's gonna be able to push their  
agendas on at these rallies and these steps to City  
Hall, mainly Vocal New York and CAMBA.

19 There's a lot of these nonprofits that do it. Um,  
20 going forward, I, like, the only way you could really  
21 solve street homelessness is really dedicating

1 housing to, uh, people that are, um, houseless and I  
2 think there should be a big priority for that.

3 Instead of— when it comes to affordable housing, they  
4 need to be a real priority for people that are  
5 homeless in the City of New York?

6 Uh, why is it only where when it comes to  
7 affordable housing, they only prioritize the people  
8 that really just get these people to let the, let  
9 the, to, um, a political office? And it's all  
political.

10 So going forward, um, look, it's— this is a big,  
11 big process when it comes to, uh, solving the  
12 homeless issue in New York City and worldwide. But  
13 the start in this budget, I believe that this be the  
14 end of the nonprofit industrial complex's control of  
15 City FHEPs and any of these other vouchers in the  
16 City of New York. Uh, I'm not against— I'm not  
17 against supportive housing, I'm not against anything  
18 like that, but I'm against these nonprofits that does  
19 nothing for the city while they take away the money,  
20 while the people that are homeless suffer, or the  
21 people that are on the verge of homelessness suffer.  
And, uh, going forward, um, the City Council needs to  
start asking the former speaker Christine Quinn what

1  
2 justifies her making over \$500,000 as a CEO of WIN  
3 NYC, while the people that live in those shelters  
4 they, they call guests suffer every day where there's  
5 no hope of getting out the shelter system. The only  
6 way you're out the shelter system is you're on the  
7 street, you're on the street, or the, the MTA subway,  
8 I mean, Long Island Railroad subway.

9 So it, it shouldn't be like that in New York  
10 City, um, where people have— the only way you're safe  
11 is sleeping on the floor of Grand Central Station,  
12 um, as a homeless person. It's more safe on the  
13 streets than it's safe inside the shelter system.  
14 There's a big— there's a big, big process with that  
15 and, um, I support everything, and I hope that you,  
16 Chair, do the right thing, unlike the last Chair, um,  
17 Diana Ayala, didn't do anything, who was just, uh,  
18 appeasing the Speaker and the people suffering.

19 So, uh, I hope that next week or the few weeks  
20 after when we have these hearings, Preliminary Budget  
21 hearings, that, um, this be rectified, this be asked  
by you, Chair Hudson. And, um, like I said, stop all  
these nonprofits, stop the NPIC, like Vocal New York  
and CAMBA, from, um, running the city, because the  
people are suffering because these nonprofits—

1 SERGEANT AT ARMS: Time expired.

2 CHRISTOPHER LEON JOHNSON: So uh, thank you.

3 CHAIRPERSON HUDSON: Thank you and I would like to  
4 say for the record that I am proud to follow in the  
5 footsteps of Council Member Ayala, who Chaired this  
6 Committee before I did.

7 Thank you to everyone who has testified. If  
8 there's anyone present in the room or on Zoom that  
9 has not had the opportunity to testify, please raise  
your hand.

10 Seeing no one else, I would like to note that  
11 written testimony, which will be reviewed in full by  
12 Committee Staff, may be submitted to the record up to  
13 72 hours after the close of this hearing by emailing  
it to [testimony@council.nyc.gov](mailto:testimony@council.nyc.gov).

14 Thank you so much to everyone who testified  
15 today. Thanks to the Administration and all the  
16 advocates and service providers. As is usually the  
17 case, we always learn something new, um, from these  
18 hearings and so I just wanna encourage everybody,  
19 including members of the public, to continue to  
20 engage with the New York City Council and show up to  
21 these hearings, so that we can continue to glean much

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COMMITTEE ON GENERAL WELFARE

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more information. Thank you so much, and this hearing  
is adjourned.[GAVEL]

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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 April 24, 2026