

CITY COUNCIL
CITY OF NEW YORK

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TRANSCRIPT OF THE MINUTES

Of the

COMMITTEE ON CIVIL SERVICE
AND LABOR

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September 6, 2022
Start: 1:30 p.m.
Recess: 9:13 p.m.

HELD AT: COUNCIL CHAMBERS - CITY HALL

B E F O R E: Carmen N. De La Rosa,
Chairperson

COUNCIL MEMBERS:

Public Advocate Williams
Erik D. Bottcher
Tiffany Cabán
Eric Dinowitz
Oswald Feliz
Kamillah Hanks
Rita C. Joseph
Julie Menin
Francisco P. Moya
Sandy Nurse
Christopher Marte
Gale A. Brewer
Lincoln Restler
Jennifer Gutiérrez
Keith Powers

A P P E A R A N C E S

Carlos Ortiz
Senior Advisor with the Department of Consumer
and Worker Protection

Elizabeth Wagoner
Acting Deputy Commissioner for the Office of
Labor and Policy Standards

John Rojas
Human Resource Administration

Randa Henry-Jenkins
DC for Home Care Services

Gustavo Rivera
Senator

Richard Gottfried
Assembly Member

Bryan O'Malley
Executive Director for the Consumer Directed
Personal Assistance Association of New York State

Harvey Epstein
Assembly Member

Ron Kim
Assembly Member

Deborah Glick
Assembly Member

A P P E A R A N C E S (CONT.)

Vittoria Fariello
Democratic District Leader in lower Manhattan

Lai Yee Chan
Working 24-hours for CPC for over eight years

Xiao Wen Zhen
In home care since 2005

Nu Jun Zhu
In home care since 2016

Nina Bakoyiannis
Downstate New York ADAPT

Jose Hernandez
Home care worker

Jessica De La Rosa
Marcus Johnson

Jessica Tambor
Disabled requiring care

T.K. Small
Attorney in Disability Rights

Bao Jin Qiu
24-hour shift worker

Gui Zhu Chen
24-hour shift worker

A P P E A R A N C E S (CONT.)

Mary Somoza
Mother of twin disabled daughters

Mahir Rahman
Local Community Member from District 1

Helen Schaub
1199

Francisco Javier Castillo
1199

Stefan Henry
Disabled and needs care

Juliet Emerson-Colvin
Ain't I a Woman Campaign

Health Care at People Care

Ying Fang Wu
24-hour Worker

Beverly Hanson
Testifying for Margaret Glover

Elizabeth Delia Rafisio

Soji Adu

Lia Fiol-Matta

Kathy Fabraio

A P P E A R A N C E S (CONT.)

President of the New York State Association of
Health Care Providers

Vincent Cho
Staff Organizer from Chinese Staff Workers
Association

Simone Mayhew
Director of Elder Care at St. Nicks Alliance Home
Care Agency

Gina Barbara
Representing Downstate New York Downstate New
York ADAPT

Alfredo Cardillo
President of the Home Care Association of New
York State

Kathryn Freed
Former City Council Member

Ki Yu Lee
Candidate in Political Science at University of
Illinois Chicago

Jeannine Kiely
Democratic District Leader downtown and I support
the No More 24 Act

Richard Corman
President of Downtown Independent Democrats

A P P E A R A N C E S (CONT.)

Heidi Siegfried
Health Policy Director at Center for Independence
of the Disabled New York

Bernadette Bird
Personal Assistant for Customer Affiliated with
Concepts of Independence

Elizabeth Valdez

Diane Barnett
Vice President of Government Relations and Public
Affairs at Arch Care

Michael Ring

Marie Hickey

Caret Fanit Fautjamarn
Home Health Aide

Henry Lynn
Student and Researcher in the University of
Chicago

Victoria Hillstum
In Favor of Intro. 0175

Mariama James
911 survivor and an advocate for 911 survivors

Taylor Banning

Mariam Bensman

A P P E A R A N C E S (CONT.)

Anthony Caputo
CEO of Concepts of Independence

Margaret Lee
Testifying on behalf of mother, retired 1199 SEIU
registered nurse

Lily Randall
Resident of Council District 1, testifying in
support of Intro. 0175

Gary
Testifying for Chris Boa

David Eisenbach
Historian and I teach history at Columbia

James Shi
Resident of New York City

Kevin Shi
Resident of New York City in support Intro. 0175

Yolanda Zhang

Karen Low

Vicki New
Resident of City Council District 3

Sonia Ussorio

A P P E A R A N C E S (CONT.)

Anne Kochman
Registered Nurse for 35 years

Simon Kostelanetz
In Support of Intro. 0175

Phoebe Lopez
Supporter of No More 24
Audrey Hill

Joseph Jung
In support of Intro. 0175

Kathy Lu
Rank-and-File Member of the Union DC37

Zeke Lugar
Resident Queens in District 29

Jihye Song
Member of the National Mobilization Against
Sweatshops

JoAnn Lum
Organizer with the National Mobilization Against
Sweatshops

Kiran Chongry
Reading the Testimony of Lois Gonzales

Sarah On
In support of 0175

1 COMMITTEE ON CIVIL SERVICE AND LABOR

2 SERGEANT AT ARMS: This is a sound check for the
3 Committee on Civil Service and Labor. Today's date
4 is September 6, 2022, being recorded by Danny Wong at
5 the Chambers. Quiet down.

6 Good afternoon everyone. Welcome to today's
7 Hybrid New York City Council Hearing of the Committee
8 on Civil Service and Labor. To avoid any
9 interruptions, please place electronic devices to
10 vibrate or silent. If you wish to submit testimony,
11 you may send it to testimony@council.nyc.gov. Again,
12 that's testimony@council.nyc.gov. Thank you for your
13 cooperation. Chair, we may begin.

14 CHAIRPERSON DE LA ROSA: Alright, [GAVEL]. Good
15 afternoon, I am Council Member Carmen De La Rosa,
16 Chair of the New York City Council's Committee on
17 Civil Service and Labor. Shh, please be quiet.
18 Welcome to today's hearing. Please be aware that
19 real time translation of today's hearing is available
20 in the following languages, Cantonese, Mandarin and
21 Spanish.

22 If you would like to hear real time translation
23 of today's hearing, and you are here in person,
24 please proceed to the Sergeant at Arms table, located
25 in the Chamber to get a headset. If you are

3 attending today's hearing virtually, please select
4 the livestream of today's proceedings in the language
5 of your choice on the Council's website. Please
6 note, real time interpretation of today's proceedings
7 will not be provided via the Zoom webinar. If you
8 wish to testify in person or virtually at today's
9 hearing, translation for your testimony is available
10 in the following languages, Cantonese, Mandarin,
11 Spanish, Fujianese and Taiwanese. If you require
12 translation for your testimony, please notify the
13 Sergeant at Arms when you fill out your registration
14 slip and mark your slip with the first letter of the
15 language you require to be translated. In addition,
16 you may alert the Committee when you are called to
17 testify.

18 SERGEANT AT ARMS: Interpreters, would you please
19 provide those instructions now. Thank you.

20 INTERPRETER: Thank you. [SPEAKING IN OTHER
21 LANGUAGE 2:27-4:29].

22 INTERPRETER: SPEAKING IN OTHER LANGUAGE 4:37-
23 5:57.

24 CHAIRPERSON DE LA ROSA: Okay, today the
25 Committee will consider Intro. Number 0175 of 2022,
sponsored by Council Member Marte, which would impose

3 limits on the length and frequency of shifts and the
4 number of hours that employers could assign to home
5 care aides. This legislation is intended to improve
6 the welfare of home care aides whose work is
7 difficult and whose compensation, under state
8 regulations, and the Administration of Medicaid, does
9 not come close to reflecting the crucial role they
10 play in our society.

11 Earlier this year, the Civil Service and Labor
12 Committee held a hearing on the topic of home care
13 aides. At the hearing, we considered Resolution 24
14 of 2022, which the Council swiftly adopted to call
15 upon the state government to enact the fair pay for
16 Home Care Act.

17 If enacted, that important legislation would do
18 much to address the systematic problems we heard
19 about in March and the specific concerns of home care
20 aides and the patients who depend on them. It would
21 increase minimum wages for home care aides by 150
22 percent of their current levels and require a
23 corresponding increase in Medicaid reimbursement
24 rates for their services.

25 Meaningfully increasing the pay of home care work
could dramatically shift the shrinking number of home

3 care aides. Unfortunately, many are leaving home
4 care due to low pay and the high cost for their own
5 welfare from working long, exhausting hours without
6 quality of sleep or down time. Sustained loss of
7 home care aides has created a crisis particularly as
8 demand for home care continues to grow.

9 According to a 2021 CUNY School of Labor Report,
10 over the ten-year period from 2018 to 2028, the Home
11 Care Aide Workforce must grow by one million home
12 care aides in order to meet the demand in New York
13 State. If the current trends hold, most of this
14 projected demand will happen in New York City.

15 Without serious investments in this critical crucial
16 workforce, the growing number of people who need
17 their services will face impossible choices about
18 where to live and how to afford it.

19 And we will collectively face a problem of
20 filling the gap in our health care system with a
21 dearth of home care aides create. Although they took
22 steps to increase pay for home care aides, when it
23 adopted its annual budget, it has not implemented the
24 fair pay for Home Care Act. Wage increases of \$2.00
25 an hour beginning in October of this year to be
followed by another dollar increase next year, are

3 better than nothing. But with our corresponding
4 increases in Medicaid funding, the employers of home
5 care aides could struggle to cover even those minor
6 increases required under state law.

7 As home to the largest population of home care
8 aides, and their patients in the state, New York City
9 must continue to advocate for meaningful change at
10 the state level. It's likely there isn't a single
11 person whose life will not at some point be touched
12 by home care aides. This issue is deeply personal
13 for me because my mother was a home care aide for
14 many years.

15 So, I have witnessed the dedication they show
16 their patients and the sacrifices they make in their
17 own lives to carry out their important work. The
18 ongoing conversation we continue today about their
19 welfare remains a universally relevant one. As
20 promoting their wellbeing reaps a rippling effect of
21 reward for their families, their patients and the
22 broader health care system. And a greater community
23 that depends on the role home care aides play to
24 provide essential care for our loved ones.

25 The Committee looks forward to hearing from the
Administration and the public on the ways that Intro.

3 0175 could affect the groups of people who might be
4 impacted under the shifts and hour limitation. The
5 Committee is also interested as it was in March to
6 continue to learn how the City Council can work with
7 city and state partners to better support home care
8 workers and to grow its vital workforce.

9 I would like to take this opportunity to thank
10 our committee staff for all of their hard work in
11 putting today's hearing together. Committee Counsel
12 Nick Connell and Policy Analyst Elizabeth Arzt. I
13 would also like to thank my own staff, Chief of Staff
14 James Burke and Legislative Director Kiona Dias (SP?)
15 as well as Coms Director Fray Familia (SP?).

16 I will now turn it over to Council Member Marte
17 for his opening remarks to be followed by the Public
18 Advocate. But before we turn to testimony, please be
19 aware of the following administrative matters.

20 Okay, let's hold off on those instructions.
21 Let's hear from Council Member Marte.

22 COUNCIL MEMBER MARTE: Good afternoon. First,
23 I'd like to thank Chair De La Rosa for holding this
24 hearing today, my fellow colleagues for attending,
25 and to the workers and patients who are here today to
stand up for basic labor standards. Intro. 0175 is

3 our city's legally sound tool to end the 24-hour work
4 day for home attendance and improved 24-hour care for
5 patients. 24-hour shifts are nothing short of
6 violent. There are people in this room who will tell
7 you that they are necessary. 24-hour care is
8 necessary. 24-hour work day are not.

9 The justification to keep immigrant women of
10 color working around the clock, that you are here
11 today are economic. Home care agencies will claim
12 that if they had to pay every worker for every hour
13 that they work, which that's what Intro. 0175 would
14 accomplish, they would go bankrupt.

15 In what other industry would we allow the talking
16 points of boss to defeat the rights of workers.

17 These agencies will not mention how despite
18 litigation, they have refused to open up their books
19 and show how much money is going to the salaries of
20 their directors or in-house lobbyists instead of
21 their workers. They won't mention the ever-expanding
22 real estate footprint, their expansion into other
23 social sectors when they can't even treat their
24 existing employees correctly. They won't tell you
25 how their staff will threaten home attendance and
coerce them into 24-hour shifts, but the workers

3 today will tell you this. Other opponents will say
4 that this requires a massive restructuring of
5 Medicaid, while ignoring that 24 hour shifts only
6 represent eight percent of the home care clients in
7 New York City and that no other city in New York
8 despite all having Medicaid patients have these
9 shifts.

10 They will not point that this made seniors in
11 other part of the states are getting more funding
12 than our seniors in New York City. Home care
13 agencies, insurance companies, Medicaid dollars,
14 these funding streams are not obstacles to meet
15 fundamental right of workers. The economic
16 oppression to ending the 24-hour shift is a barbaric
17 and shallow argument. This bill will mandate a
18 quality at a state level, while staying within the
19 confines of the city's ability to regulate working
20 conditions. We have colleagues who represent our
21 communities in Albany here today who testified to the
22 urgency of passing this bill in the city, so that
23 they can continue their work in the state.

24 I beg my colleagues here to stay for the duration
25 of this hearing and look into the faces of these home
attendants. Listen to their voices as they testify

3 today. Women whose fingers are forever crooked from
4 turning over their patients so that they don't get
5 bed sores. Women whose back are forever stoop from
6 bending down hour after hour, day after day helping
7 these patients sit, stand, use the bathroom and
8 bathe. Women's whose minds are forever at work, who
9 suffer from insomnia, always hearing their patients
10 voices crying for them whether they are work or home.

11 Women whose children, like I was, waiting for
12 their mother to come home, wondering why when they
13 finally do, they are always too tired to do anything
14 else. Our other interest in this room will tell you
15 that this issue is nuance but the freedom of 24-hour
16 work day is one that has been enjoyed by almost every
17 other worker since the ending of slavery. They'll
18 draw figures and charts and circles around these
19 shifts, without ever connecting the dots, a straight
20 line from who allows these shifts to continue, to how
21 they will end them.

22 We are not here to dilute blame. We are here to
23 assign it. We are not here to be another notch in a
24 long timeline of this struggle but to be the end
25 point. Workers and patients should be united in
ending the 24-hour shift. The love and care that

3 these home attendants feel towards their patient,
4 should not be exploited to excuse working condition
5 that exists in almost no other industry. Instead,
6 groups that profit off these shifts, will use miss
7 leading and flat-out inaccurate information to scare
8 patients into thinking that they have to choose
9 between their own health and the health of their home
10 attendant. This is a disgusting tactic and a false
11 choice. Patients who need 24-hour care deserve to
12 have home attendants that are alert and attentive to
13 their physical and emotional needs. Not women who
14 are injuring themselves because they are so
15 exhausted.

16 Patients who tell you that their home attendant
17 love working 24-hour shifts, need to recognize that
18 despite their disabilities, they are still a
19 consumer, and the home attendant is still their
20 worker. We wouldn't ask a Chipotle customer to
21 dictate the working conditions of a Chipotle worker.
22 You wouldn't even ask a patient in a hospital how
23 long a nurses shift should be. Workers voice
24 matters. Whether you're guided by reason or by
25 compassion, I think the hearing today will prove that

3 24-hour work day is a violent racist practice that
4 women of color have been forced to bear the brunt of.

5 Members of this Committee, we cannot look at
6 these broken bodies and minds and turn the other way.
7 We cannot look at these wounded women who are still
8 the fiercest organizers behind this bill and tell
9 them to wait a day longer for justice. We must pass
10 this law. We must enforce this law and New York City
11 must end the 24-hour work day forever. Thank you.

12 CHAIRPERSON DE LA ROSA: Thank you so much
13 Council Member Marte. Public Advocate Williams.

14 PUBLIC ADVOCATE WILLIAMS: Thank you so much. As
15 mentioned, my name is Jumaane Williams, Public
16 Advocate of the City of New York. I want to thank
17 Chair De La Rosa and the members of the Committee on
18 Civil Service and Labor for the opportunity to share
19 my statement and thanks to Council Member Marte for
20 putting forth this legislation for this important
21 conversation and his passion around it.

22 First and foremost, and in discussing the issues
23 at hand today, we must ensure we center the voices
24 and needs of home care workers. Many of whom are
25 immigrants and women of more color, like my friends
and family from the Island of Grenada. They have the

3 distinct living experiences that we are discussing,
4 and it is my hope that this hearing will provide them
5 with a platform and an opportunity to speak and
6 share.

7 Home care workers have long been ignored,
8 disregarded and deeply undercompensated, despite
9 their essential work, especially throughout this
10 ongoing pandemic. And we must make space for them
11 today and always moving forward. Home care workers
12 have spoken of their extremely long hours including
13 multiple 24-hour shifts. A large portion of those
14 hours are uncompensated due to state regulations
15 around living shifts but also possibly wage theft, as
16 a number of home care workers have claimed.

17 The reality of these 24-hour shifts is that the
18 home care worker does not get in eight hours of
19 uninterrupted rest as is expected. If their patient
20 needs around the clock care, that need for care does
21 not simply vanish. So, home care workers continue
22 working and tending to their patients despite not
23 being compensated for this additional work.

24 As a result of long work hours, completing
25 physical tasks and getting little to no rest, home
care workers themselves have developed chronic

3 conditions that endanger themselves and the quality
4 of care they can provide to their patients. As we
5 know, the home care industry is facing a shortage in
6 home care workers. These long work weeks are a part
7 of what is driving home care workers out of the
8 industry. It is not sustainable and perpetuates a
9 cycle where more and more workers will quit unless
10 work conditions and realistic salary requirements
11 change.

12 The splitting of shifts and capping of work hours
13 as outlined in Intro. 0175 are intended with the goal
14 of having home care workers who are not overworked
15 and who are able to maintain proper care for some of
16 the most vulnerable people who need their services.
17 With the requirement, we must work with the state and
18 home care agencies operating in New York City to
19 ensure patients who require around the clock care
20 provided with split shift home care aides and not
21 left alone.

22 We must also keep the state accountable in making
23 sure patients are not forced into long-term care
24 facilities without their consent. Furthermore, we
25 cannot allow home care workers to choose between
working unconscionable hours just to make a living

3 versus preserving their health and safety but risk
4 losing income. We cannot get to a place where we are
5 normalizing a person working upwards of 90 hours just
6 to make ends meet. Especially knowing that a portion
7 of those hours worked will not be compensated.

8 With today's hearing, we are sending a message
9 that overworking people is unacceptable, especially
10 an industry that employees, mostly immigrants and
11 women of more color. Who already bear witness to
12 unequal pay and treatment in the workplace across a
13 wide range of industries.

14 Lastly, the owners of this problem lies in the
15 system, including the pay structure for home care
16 workers. I acknowledge there are components to this
17 conversation that need to involve the state on the
18 city level. I believe we can still initiate change.
19 I am also cognitive of the complexities of this issue
20 in the groups Intro. 0175 has the potential impact.
21 And I welcome ongoing conversations to best serve all
22 those involved, especially home care workers who are
23 at the heart of this issue. Thank you.

24 CHAIRPERSON DE LA ROSA: Thank you so much Public
25 Advocate Williams. I also want to acknowledge our
colleagues who are here with us and have been from

3 the beginning of this hearing, Council Member Moya,
4 obviously, Council Member Marte, Council Member
5 Nurse, Council Member Joseph, Council Member
6 Bottcher, Council Member Gutiérrez and Council Member
7 Feliz.

8 So, before we turn to testimony, please be aware
9 of the following administrative matters. As a
10 reminder, real time translation of today's hearing is
11 available in person and on the Council's website in
12 the following languages: Cantonese, Mandarin and
13 Spanish. If you would like to hear real time
14 translation of today's hearing and you are attending
15 in person, again, please proceed to the Sergeant at
16 Arms table located in the Chambers to get a headset.
17 If you wish to testify at today's hearing,
18 translation for your testimony is available in the
19 following languages: Cantonese, Mandarin, Spanish,
20 Fujianese and Taiwanese.

21 If you require translation for your testimony,
22 please notify the Sergeant at Arms when filling out
23 your registration slip and mark the slip with the
24 first letter of the language you require to be
25 translated. In addition, you may alert the Committee
when you are called to testify. If you are

3 registered to testify, please listen for your name to
4 be called. Witnesses names will be called in groups
5 to facilitate Council Member questioning.

6 Additionally, if you are testifying via Zoom,
7 Council staff will unmute you when it is your turn to
8 speak. Please be patient if you are not immediately
9 unmuted. In order to accommodate the large number of
10 witnesses registered for today's hearing, each
11 witness will be limited to two minutes. If you
12 require a translator, you will be limited to four
13 minutes, to be shared between you and your
14 translator. Please stop your testimony when the
15 Sergeant at Arms calls time. Your understanding of
16 these procedures is appreciated as we ensure everyone
17 has the opportunity to be heard today.

18 And as a reminder, everyone can submit written
19 testimony to testimony@council.nyc.gov up to 72 hours
20 after the conclusion of today's hearing. Now, we
21 will hear from our first witness Carlos Ortiz, Senior
22 Advisor with the Department of Consumer and Worker
23 Protection who will testify on behalf of the
24 Administration. In addition, Elizabeth Wagoner,
25 Acting Deputy Commissioner for the Office of Labor
and Policy Standards, John Rojas, Human Resource

3 Administration and Randa Henry-Jenkins, DC for Home
4 Care Services will be available for Council Member
5 questions. Sorry if I butchered any of your names.

6 Committee Counsel will now administer the oath.

7 COMMITTEE COUNSEL: Will each of you please raise
8 your right hands. Do you affirm to tell the truth,
9 the whole truth and nothing but the truth in your
10 testimony before this Committee today and to respond
11 honestly to Council Member questions? Carlos Ortiz?

12 CARLOS ORTIZ: I do.

13 COMMITTEE COUNSEL: Elizabeth Wagoner?

14 ELIZABETH WAGONER: I do.

15 COMMITTEE COUNSEL: John Rojas?

16 JOHN ROJAS: I do.

17 COMMITTEE COUNSEL: Randa Henry-Jenkins?

18 RANDA HENRY-JENKINS: I do.

19 COMMITTEE COUNSEL: Thank you. You may begin
20 your testimony.

21 SERGEANT AT ARMS: Quiet down please.

22 CARLOS ORTIZ: Thank you. Good afternoon Chair
23 De La Rosa, Members of the Committee, Council Member
24 Marte and Public Advocate Williams. My name is
25 Carlos Ortiz, and I am a Senior Advisor with the
Department of Consumer and Worker Protection. Today,

3 I am joined by DCWP's Acting Deputy Commissioner for
4 the Office of Labor Policy and Standards Elizabeth
5 Wagoner, and our colleagues from the Human Resources
6 Administration. Thank you for the opportunity to
7 testify today on Introduction 0175, relating to
8 maximum working hours for home care aides. Home care
9 aides are some of our most essential workers,
10 dedicating their lives to taking care of our loved
11 ones. Approximately 325,000 home care workers in New
12 York City provide vital assistance, comfort and
13 dignity to people in their care, while working long
14 hours and performing emotionally and physically
15 difficult labor out of the public view.

16 Since 2017, DCWP has been the home of the City's
17 Paid Care Division. A first in the nation initiative
18 to focus on the needs of low wage paid care workers.
19 Since then, DCWP has combined outreach, advocacy and
20 enforcement to uphold and expand the right to paid
21 care workers in New York City.

22 SERGEANT AT ARMS: Quiet down please.

23 CARLOS ORTIZ: Through the Paid Care division,
24 DCWP has built relationships with paid care advocates
25 and paid care providers to help connect with workers
and educate them about their rights. In 2018, this

3 informed our reports, making paid care work visible
4 and lifting up paid care work that shed light on the
5 experiences of paid care workers in New York City and
6 better standards for their working conditions. DCWP
7 has been at the forefront of advocating for enhanced
8 protections for paid care workers.

9 In 2018, in response to proposed rule, we
10 submitted comments to the New York State Department
11 of Labor advocating for safeguards against wage theft
12 for paid care workers schedule to work 24-hour
13 shifts. In 2019, we testified before the Council
14 alongside our sister agency, the City Commission on
15 Human Rights in favor of expanding the city's human
16 rights law to cover domestic workers. And during the
17 early month of the pandemic, we worked to update the
18 city's paid, safe and sick leave law to allow
19 domestic workers to accrue and use their safe and
20 sick time at the same rate as other workers in New
21 York City.

22 DCWP has also proactively used this enforcement
23 authority to go after unlawful workplace activity in
24 the pay care industry. In 2017, our team
25 investigated 42 health care agencies across the city
who collectively employed more than 50,000 workers

3 for violations of the city's paid safe and sick leave
4 law. DCWP uncovered evidence of widespread labor
5 violations by paid employers and a follow-up joint
6 investigation with the New York State Attorney
7 General's Office resulted in settlements and secured
8 over \$18 million in restitution, as well as mandates
9 to improve compliance with the law.

10 DCWP frequently partners with state and federal
11 authorities to identify and investigate complaints
12 relating to labor reductions outside of our
13 jurisdiction.

14 Today's legislation focuses on how certain home
15 care workers are scheduled for their shifts when
16 providing care as home care aides. Currently, the
17 New York State Department of Labor allows for home
18 care to be scheduled for 24-hour shifts. For each 24
19 shift, an employer is required to pay the workers for
20 at least 13 hours. If the worker is allowed three
21 hours for meal breaks and an eight-hour sleep break.
22 Five of which must be uninterrupted sleep. If the
23 worker does not receive these sleep and meal breaks,
24 the worker must be compensated for the entirety of
25 the 24-hour shift. Regardless, the structure around
the expectation that a worker generally will receive

3 only 13 hours of pay for each 24-hour sleep and
4 shift. Our understanding is that many home care
5 patients pay for their care through Medicaid
6 reimbursements. That Medicaid funding is directed to
7 health insurance providers or local municipal
8 agencies. These entities contracted with local home
9 care providers employ the home care workers for the
10 patient. And depending on the needs of the patient,
11 a home care aide could be scheduled for a 24-hour
12 live-in shift, for which the aide would typically
13 only be paid for 13 hours of work.

14 Introduction 0175 would eliminate the practice of
15 scheduling home care aides for 24-hour shifts by
16 prohibiting shifts longer than 12 hours, consecutive
17 12 hours or shifts totaling more than 12 hours in a
18 24-hour period. It would also cap a workers
19 scheduled hours at 50 hours per week. Although an
20 employer could assign two additional hours per day,
21 up to ten hours per week, due to unforeseen
22 circumstances. The legislation would be enforced by
23 DCWP and by a private right of action.

24 DCWP believes that workers should be paid for all
25 the hours they work. As we discussed in our 2018
comments to the Department of Labor, the practical

3 realities of paid care make it common for home care
4 workers sleep and meal periods to be interrupted.
5 And certain workers have described that even when
6 they report to meal interruptions, they are routinely
7 not compensated for the full 24 hours because their
8 employers focus on keeping costs down. Many of the
9 workers in this industry also identify as one of
10 color and are immigrants, who have expressed fears of
11 retaliation or have in fact experienced retaliation
12 when they report that their rest periods have been
13 interrupted or that they have not been fairly
14 compensated.

15 Working with the state to prohibit 24-hour shifts
16 would help address these fundamental concerns workers
17 are raising around lack of rest and wage theft, as
18 well as improved care conditions for New Yorkers.
19 However, prohibiting 24-hour shifts through this
20 legislation could have unintended consequences on
21 patients and workers.

22 As I mentioned earlier, the New York State
23 Department of Labor allows one worker to be paid for
24 at least 13 hours for a 24-hour live-in shift. In
25 prohibiting 24-hour shifts, this legislation would
effectively require home care providers to pay at

3 least two workers to cover an entire day for a home
4 care patient. Unless there is additional funding,
5 this would create added financial liability for home
6 care providers that could result in reduced shifts
7 for workers and reduce care for patients, including
8 continuity of care. Outcomes that would make both
9 workers and patients worse off.

10 I would like to thank the Council for today's
11 hearing and its commitment to addressing workplace
12 issues that impact New York City's home care workers.
13 As I mentioned at the beginning of my testimony, paid
14 care workers are some of the most essential workers
15 in our lives. DCWP and the administration are
16 committed to continued collaboration with workers,
17 advocates and policy makers to improve working and
18 care conditions for all New Yorkers.

19 I look forward to our discussion and any
20 questions you may have.

21 CHAIRPERSON DE LA ROSA: Thank you so much for
22 your testimony. I also want to make sure my
23 colleagues know you have five minutes to ask
24 questions. If you'd like to get on that list now,
25 please let Nick know and we'll put you on the list.
I do have some questions to begin with. First, I

3 want to ask about – you spoke a little bit about it
4 during your testimony but as you know, home care
5 aides play a crucial role in supporting the aging
6 population and people with disabilities in our city's
7 health care system. They significantly reduce the
8 need for alternative supported living arrangements
9 and make feasible the preference of most people to
10 stay in their homes. What policy or services has the
11 administration implemented to address working
12 conditions and the welfare of home care aides?

13 CARLOS ORTIZ: Thank you Chair. As I mentioned
14 you know, one of the fundamental visions that we have
15 at agency is the paid care division, which is a first
16 in this nation initiative that has over the course of
17 the years, really focused on education, advocacy,
18 delving into the issues that impact workers in this
19 industry, to better understand how policy makers
20 across the city and state could help address and
21 improve their working conditions.

22 The agency over the years has also advocated for
23 legislation to improve the rights of paid care
24 workers. This includes legislation relating to the
25 Human Rights law, which is the paid safe and sick
leave law and we on the portion side, have also used

3 our authority within our jurisdiction to investigate
4 health care agencies that might be in violation of
5 certain laws like the paid safe and sick leave law
6 and let me, let me pass it over to my colleague
7 Elizabeth Wagoner who can describe more about what
8 those investigations look like.

9 CHAIRPERSON DE LA ROSA: Okay.

10 ELIZABETH WAGONER: Thank you Council Member.
11 So, my colleague described our 2017 initiative into
12 the home health care industry and as part of that
13 initiative, our sort of primary purpose there was to
14 enforce the paid safe and sick time law, which is the
15 law under our jurisdiction but obviously as we all
16 know, there are violations beyond that outside of our
17 jurisdiction that workers are also experiencing in
18 this industry. So, we develop partnerships with both
19 the State Department of Labor and with the New York
20 State Attorney General's Office to ensure that there
21 was a pathway to enforce these other wage and hour
22 laws for workers effected by them.

23 And so, one of our largest enforcement actions
24 there was a joint investigation with the State
25 Attorney General's Office, which resulted in a
settlement of over \$18 million, which covered not

1
2 only the sick time violations but also the wage and
3 hour violations. And a big piece of that was the 24-
4 hour shift issue. And it is critical to us to ensure
5 that you know where there are laws that are outside
6 of our jurisdiction, workers are still able to
7 vindicate their rights with other agencies who are
8 our partners.

9 CHAIRPERSON DE LA ROSA: Great, you know 2017 was
10 always ago. Since then, we've been hit obviously by a
11 brutal pandemic that I think has increased the need
12 for some home care services across our state. Are
13 there any forthcoming plans from the administration
14 on you know, ensuring the workers are protected and
15 you know have the benefits that they need?

16 CARLOS ORTIZ: Thank you Chair. Let me say, we
17 certainly uhm, in our enforcement posture, we focus
18 on complaints we're receiving and as I mentioned,
19 also affirmative litigation and we are developing as
20 well, a new initiative that can serve paid care
21 workers in New York City. Particularly under the
22 leadership of Mayor Adams, we've been able to secure
23 additional resources to fully, more fully flush out
24 our paid care division to strengthen its work and
25 advocacy but also, in a new initiative based on

3 mediation, which let me pass it over to Liz, who can
4 also describe further what that mediations going to
5 look like and how it can help workers in this space.

6 ELIZABETH WAGONER: Before talking about that, I
7 do want to clarify that although that proactive
8 initiative was in 2017, the work continued and
9 continues through the present to investigate these
10 cases and not only look at the sick time issues, but
11 other violations that workers are experiencing and
12 that continues to this day.

13 That is part of the Blue Print Initiative, for
14 which we received additional funding from the
15 administration to focus specifically on paid care
16 workers and to do workplace wide enforcement. When
17 we find workplace wide violations in the industry, an
18 additional piece of that initiative is a mediation
19 program that would actually enable us to take wage
20 and hour violations in addition to sick time
21 violations to mediation at oath, so that we're able
22 to achieve resolutions for domestic workers through a
23 voluntary, nonconfrontational process. And where
24 that is mediation is not successful, we would then
25 follow the path that we've traditionally followed to

3 get workers to an agency or private counsel who can
4 assist them with those violations.

5 CHAIRPERSON DE LA ROSA: Thank you. So, I'm
6 going back to the 2021 CUNY report for the CUNY
7 School of Labor. Over the next ten-year period from
8 2018 to 2028, the state workforce must grow by one
9 million home care aides in order to meet the demand
10 if the current trends hold. Does the Administration
11 currently have a forecast of demand for home care
12 aides in New York City?

13 CARLOS ORTIZ: Thank you Chair. DCWP itself does
14 not currently have a forecast for the home care aide
15 demand in the state. With that said, my
16 understanding is the Department of Labor does provide
17 regular statistics on this matter and we're happy to
18 work with your team to pull that data, especially it
19 should help further this conversation around this
20 legislation.

21 CHAIRPERSON DE LA ROSA: Are you aware of what
22 factors have led to the home care shortage?

23 CARLOS ORTIZ: I believe in the report you
24 mentioned, you know upon our review, we saw a lot of
25 it was around wage and benefit concerns. I think as
we look further into this matter, we would like to

3 dive into it more and to understand the extent and
4 the magnitude and what the primary drivers are of
5 that shortage too.

6 CHAIRPERSON DE LA ROSA: Great. HRA plays a role
7 in administering Medicaid by approving 24-hour shifts
8 and 12-hour split shifts for patients of home care
9 aides. How does HRA make these determinations and
10 what other roles does the administration play in
11 administering home care plans for patients?

12 RANDA HENRY-JENKINS: Good afternoon, thank you
13 for that question. So, HRA's role is very specific
14 in that, we're tasked with for the population that
15 comes through HRA, completing a clinical assessment
16 to determine what that persons needs are in terms of
17 personal care.

18 We have nurses, registered nurses, as well as
19 case management staff who are tasked with viewing the
20 consumer, looking at their medical condition and
21 comparing their medical conditions to the New York
22 State Department of Health regulations and finding
23 where that individuals needs are and determining how
24 much time is required to complete those needs.

25 So, HRA basically is tasked with completing a
plan of care that has been transmitted to our

3 contracted home care agencies who are responsible for
4 sending out their registered nurses with our plan of
5 care, meeting with the family, going over the plan of
6 care, and ensuring that the plan of care as assessed
7 and determined by HRA is actually implemented.

8 CHAIRPERSON DE LA ROSA: So, does HRA administer
9 Medicaid provider agreements?

10 RANDA HENRY-JENKINS: I'm sorry.

11 CHAIRPERSON DE LA ROSA: Medicaid provider
12 agreements. Does HRA administer the agreements with
13 Medicaid?

14 RANDA HENRY-JENKINS: What HRA does is we
15 contract with State Department of Health licensed
16 providers, so that when we do the completed
17 assessments, we have a direct line to give that to
18 the home care agencies who then provide the service
19 to the patients.

20 CHAIRPERSON DE LA ROSA: So, if HRA were to
21 determine that a patient needs 24-hour care.

22 RANDA HENRY-JENKINS: Yes.

23 CHAIRPERSON DE LA ROSA: Uhm, if this law were to
24 be enacted and passed, how would HRA contend with
25 that change in law when administering the appropriate
care?

3 RANDA HENRY-JENKINS: So, because HRA's strictly
4 responsible for creating a plan of care, not for the
5 actual implementation of the plan of care, we would
6 continue to utilize the State Department of Health
7 regulations, which dictate to us, how we're supposed
8 to access someone and how we're supposed to determine
9 their needs and we would then transmit that again to
10 the providers who would be tasked with implementing
11 it.

12 CHAIRPERSON DE LA ROSA: Do you know what
13 percentage of home care aids are regularly assigned
14 24-hour care. I know we heard from Council Member
15 Marte, about eight percent but does HRA have those
16 numbers or the Administration?

17 JOHN ROJAS: Good afternoon, thank you for that
18 question. To provide some context, currently there
19 about 234-235,000 home care cases, personal care
20 cases in New York City. Of those 235,000
21 approximately 6,600 are administered by HRA. As you
22 can see the vast majority, about 228,000 are not
23 administered by HRA. They're administered by managed
24 care health care plans, which are not within the
25 purview of HRA and are directly with the New York
State Department of Health. Of those 6,600 cases

3 that are in HRA offices, about 964 are 24-hour cases.
4 And of those 964, 454 are live in and 510 are split
5 shift.

6 CHAIRPERSON DE LA ROSA: 510?

7 JOHN ROJAS: Correct. So, the live in cases, the
8 24-hour cases shall I say, represent less than one
9 percent of the total 235,000 cases, personal care
10 cases, home care cases in New York City.

11 CHAIRPERSON DE LA ROSA: Okay, so just to
12 clarify, is HRA required to approve 24-hour shifts by
13 the federal and state governments? Are you all
14 required by state law and federal law to approve the
15 24-hour shifts if that need is determined?

16 RANDA HENRY-JENKINS: If the need is determined,
17 yes we are required to provide the individual with a
18 plan of care that meets their clinical needs.

19 CHAIRPERSON DE LA ROSA: Okay, thank you. And
20 then I wanted to ask about around DCWP. Has the
21 agency consulted or collaborated with other city
22 agencies who serve you know needy populations that
23 may be effected by this legislation, such as you
24 know, obviously HRA is here but DFTA, MOPD, and of
25 those agencies were consulted?

3 CARLOS ORTIZ: Yes, thank you Chair. It
4 certainly has been a hallmark of this Administration
5 to ensure that there is uhm, close communication
6 between city agencies and with respect to this
7 hearing, we work closely with obviously HRA but our
8 partners at MOPD and DFTA to better understand the
9 nuances of this issue, particularly the
10 vulnerabilities that workers face but also that
11 patients might be facing. Likewise, you know we in
12 preparation of this hearing, met closely with
13 advocates in the industry as well to better
14 understand their concerns with the legislation and
15 that we surface with you all today. And I am
16 certainly encouraged by the room today as well and to
17 hear from workers themselves to hear from patients
18 themselves about how they feel the legislation could
19 impact them and what questions and answers they may
20 have for the Council that could better help the
21 legislative process moving forward.

22 CHAIRPERSON DE LA ROSA: Thank you so much. I'm
23 going to turn it over to my colleagues for questions
24 but before I do, I want to recognize Council Member
25 Dinowitz has joined us as well as Majority Leader
Powers. Council Member Marte for questions.

3 COUNCIL MEMBER MARTE: No questions at this
4 moment.

5 CHAIRPERSON DE LA ROSA: No question at this
6 time. Council Member Nurse.

7 COUNCIL MEMBER NURSE: Thank you Chair. For the
8 moment, I just had a couple of questions for DCWP.
9 You testified that you all found widespread evidence
10 labor violations by paid care employers. And I'm
11 just wondering if you could elaborate on that in
12 terms of how many workers experienced wage theft?
13 You gave the settlement amount but not the number of
14 cases and then how many violations are being
15 investigated annually on average, specifically
16 related to 24-hour shifts and wage theft or other
17 violations? Just to get a scale of what we're
18 talking about.

19 ELIZABETH WAGONER: So, I can speak to that
20 particular case, a case that we settled in April of
21 this year jointly with the New York State Attorney
22 General's office. And I can't speak to the number of
23 workers who experience the 24-hour shift violation
24 exactly. It was a significant portion of that case,
25 and we can get the assurance of discontinuance that

3 the State Attorney General entered into to give you
4 those exact numbers and exactly those terms.

5 On the paid sick time side, I believe it was
6 6,000 workers who were receiving compensation for
7 paid sick time. We'll have to check on that number
8 to get you the exact number of workers who are
9 getting restitution and many more, about 10,000 who
10 were receiving compensation for wage and hour
11 violations.

12 And so, those are different pieces of restitution
13 for the different pieces of the case. It's a little
14 bit complicated. So, many, many workers who were
15 effected by that case and the employers there were
16 amazing home care and intergern health care services.

17 COUNCIL MEMBER NURSE: So, can you just uhm, the
18 last piece was about how many cases come before you
19 all annually on average? I mean, you could talk
20 about pre-pandemic because I know the pandemic might
21 be a particular set of time but if you could give a
22 sense just on average specifically related to the 24-
23 hour shift.

24 CARLOS ORTIZ: I don't have that on the 24 shift
25 on how many complaints we received there but with
26 respect to home care aides and paid safe and sick

3 leave complaints, we receive on average about I'd say
4 anywhere between 300 and 250 annually complaints that
5 we look into. For example, but let me say this, is
6 that when we investigate a workplace, we're not
7 investigating a singular complaint. When we go into
8 investigate a workplace, it's a workplace wide
9 investigation typically. Because we understand that
10 if one workers rights are being violated, that many
11 of - it's possible that many of the workers' rights
12 are being violated. So, that's kind of the posture
13 that we utilize when we are conducting an
14 investigation.

15 COUNCIL MEMBER NURSE: Okay, so just for the
16 follow-up can we request that data be provided?

17 CARLOS ORTIZ: Sorry, could you say that again
18 Council Member?

19 COUNCIL MEMBER NURSE: So, for the follow-up, can
20 we just request that a little more, the numbers be
21 provided?

22 CARLOS ORTIZ: Yes, of course, Council Member,
23 we're happy to get that data for you.

24 COUNCIL MEMBER NURSE: Thank you. That's all my
25 questions for now Chair.

3 CHAIRPERSON DE LA ROSA: Thank you Council Member
4 Nurse. Council Member Marte.

5 COUNCIL MEMBER MARTE: Yeah, thank you both
6 Council Member De La Rosa and Nurse for your
7 questions. Based off of Council Member Nurse's
8 questions, how many actions have you enforced? I
9 know you said you're still figuring out how many
10 numbers of complaints you got but how many
11 enforcement have you done for violation of the 13-
12 hour rule?

13 CARLOS ORTIZ: Let me clarify Council Member is
14 that we do not enforce the 13-hour rule or violation
15 of the 13-hour rule in New York City. Our primary
16 jurisdiction, our primary law that we enforce in New
17 York City is the paid safe and sick leave law. So, I
18 think, I do want to clarify between those two
19 different laws. With respect to a wage and hour law,
20 what we do is we partner closely with the – it could
21 be the New York City Attorney General's Office to
22 ensure that those state laws are enforced, and we
23 encounter them in the course of our investigations.

24 You know, often times for example, if a worker is
25 not getting their paid safe and sick leave, they
might be getting – they're probably not getting their

1 minimum wage and that's something that we commonly,
2 we encounter.
3

4 So, I don't necessarily have specific data on
5 violations of the 13-hour rule. I will say it is a
6 party for us, you know for the agency, that workers
7 should be paid for all the hours that they work. And
8 so, when we encounter those, we make sure that they
9 have a referral to get to the appropriate source that
10 they need to.

11 And just to clarify, uhm, uh, a number I provided
12 earlier to Council Member Nurse, we have about 250 on
13 average complaints overall for paid safe and sick
14 leave. And then for home care workers, it's about
15 200 over the past few years that we received
16 specifically for that industry. But I can definitely
17 provide you a yearly breakdown of that data following
18 that hearing as well. Apologies for that.

19 COUNCIL MEMBER MARTE: How does the
20 Administration address fear tactic used by home care
21 agencies to force home attendants to accept 24-hour
22 shifts, if any?

23 CARLOS ORTIZ: So, I can say that again,
24 typically, we are not — we do not have enforcement
25 authority over the 24-hour shifts in the 13-hour

3 rule. With that said, during the course of our
4 investigations, we do encounter workers who have
5 described to us a fear of retaliation or who have
6 described the actual retaliation against them. For
7 us, I think it's important that those workers are
8 directed to the appropriate source for their claims
9 to be addressed. Because we recognize that
10 retaliation could have an extreme chilling effect on
11 the workers' rights and worker ability to exercise
12 their rights. Notwithstanding that you know workers
13 who are in these 24-hour shifts, they are facing
14 incredibly difficult situations that have emotional
15 and physical tolls on their lives and there's
16 frequent claims of wage theft and it's important that
17 for us, that those workers have an ability to have
18 those claims addressed.

19 COUNCIL MEMBER MARTE: Thank you. Does the
20 Administration believe that it's our city's job to
21 strengthen workers protection when the state level
22 regulations aren't working?

23 CARLOS ORTIZ: I think historically what we have
24 done is work closely with our partners in this
25 industry, both the providers but also the workers to

3 ensure where our advocacy could best be placed as a
4 city.

5 In the past, you know in our reports and in our
6 public comments, we have described the injustice that
7 exists in a for example, 24-hour shift who are
8 workers not getting fully compensated for the hours
9 they work. Particularly in a moment, you know, I
10 think it's, it's - I think it's well understood that
11 sleep interruptions can commonly occur and that
12 workers - that is emotionally trying for a worker to
13 be working not only almost 24 hours but then, to have
14 a person that they are caring for in a moment of
15 difficulty and I think we're incredibly sensitive to
16 that and we would always stand ready to work with our
17 partners to make sure that advocacy is happening at
18 the state, to get improved working conditions and
19 improved wage conditions for workers.

20 COUNCIL MEMBER MARTE: Thank you.

21 CHAIRPERSON DE LA ROSA: Thank you. I want to
22 recognize we've been joined by Council Members Brewer
23 and Cabán. And I want to pass it over to Council
24 Member Bottcher for questions.

25 COUNCIL MEMBER BOTTCHEER: Good afternoon. Just
I'm seeking some clarity on your testimony. So,

3 you're testifying against this bill but also saying
4 that you believe that the current system is not just
5 and needs change. Is that accurate?

6 CARLOS ORTIZ: Yes, Council Member. I think what
7 our testimony reflected is that we have often had the
8 position that workers should be paid for all the
9 hours that they work and that these 24-hour shifts
10 can pose serious problems to their health. And to
11 what we would describe as a fair workplace setting.
12 However, because of the legal and the funding
13 implications that really occur at the state level, we
14 do have concerns that the bill as is, could have
15 these unintended consequences. Namely that providers
16 will not offer shifts to workers because they're not
17 able to cover the cost or because there will be some
18 added impact on the care for patients and namely the
19 continuity of care.

20 So, those concerns that we want to surface with
21 the Council to ensure that we are all operating uhm,
22 I mean, I think to ensure that the legislations don't
23 have unintended consequences that would harm workers
24 and patients.

25 COUNCIL MEMBER BOTTCHEER: The Administration
doesn't believe that the current system is just. But

3 what are you doing as an Administration to change it
4 then. If it's not this bill, in your testimony, you
5 say that working with the state to prohibit 24-hour
6 shifts is the way to go. How is the administration
7 working with the state to prohibit 24-hour shifts?

8 CARLOS ORTIZ: Thank you Council Member. I think
9 for us, its long been a – we've long advocated for an
10 end to these 24-hour shifts. I think the Council
11 Members referenced earlier that there has been
12 legislation in the past in the state legislature to
13 address the 24-hour shift issue. I think as we enter
14 a new legislative session at the state and you know
15 an upcoming budget, it's something that we're always
16 happy to again partner again with our stakeholders in
17 this industry to ensure that we are, we are fighting
18 for fair working conditions.

19 COUNCIL MEMBER BOTTCHEER: Thank you.

20 CHAIRPERSON DE LA ROSA: Council Member Nurse.

21 COUNCIL MEMBER NURSE: Oh, I realized I had a
22 question that I didn't ask. So, can you – I don't
23 know if this is something you can answer but can you
24 describe a little bit more how a home aide worker
25 tracks when there's an interruption during their
sleep or meal time break. So, is it in an app? Is

3 it based on what the employer system is? In general,
4 what are the mechanisms, the logistical mechanisms.
5 I'm supposed to be asleep, now something's happening.
6 I need to get up. How do I track that either in real
7 time - just in general, like elaborate a little bit
8 more about that process.

9 CARLOS ORTIZ: Yeah, I think my understanding is
10 that it is very disparate across the different
11 employers of how they would have a worker report,
12 those interruptions. And in fact, I think when we
13 have commented in the past, we have noted that the
14 onus and the burden should not be upon the worker for
15 that type of reporting.

16 And for that reason, as well, I think that's why
17 have so strongly said that when a worker is not able
18 to get that compensation after the interruption that
19 we would work closely with them. We are happy to
20 work closely with them to make sure that they are
21 connected with somebody who can advance that claim.
22 But going back to your original question, I think it
23 really is disparate, which the kind of a lack of
24 consistency, which I think it also an issue that
25 workers have surfaced to us.

3 COUNCIL MEMBER NURSE: Thank you. Have you all
4 put forth any recommendations for making a
5 consistency or some kind of clinical universal
6 standard across the industry to prevent the
7 discrepancies or the different ways, the various ways
8 in which people have to report?

9 CARLOS ORTIZ: So, I think I referenced a report
10 that we had done a while back, which really created
11 model standards for the workless conditions of these
12 workers. We did that in close coordination with
13 worker advocacy organizations as well as employer
14 organizations and I'm happy to share that report with
15 Council as well. It has a number of standards in
16 there. Such as you know, rights to a safe workplace,
17 rights to collective action, which think are
18 fundamental to any worker situation but in this
19 particular industry, have been hard to come by you
20 know. I think workers in this space have a
21 particular difficulty. Number one, that they operate
22 out of the public view, as well as folks that are
23 often immigrants and have fear of retaliation. I
24 think these are all, these are all issues that are
25 particularly more salient for this industry and that
is what the model standards attempts to address.

3 COUNCIL MEMBER NURSE: And this is it but just to
4 clarify, so in those model standards, this
5 specifically addresses reporting interruptions in
6 sleep and meal times.

7 CARLOS ORTIZ: I'm not sure if it says the
8 reporting mechanisms but I do know it says that we
9 should have fair wages for workers, and they should
10 be compensated for all hours.

11 CHAIRPERSON DE LA ROSA: Well, piggybacking on
12 that question then, if there is retaliation, what is
13 the recourse for the worker right now? If there's a
14 retaliation by an agency or an employer, what is the
15 recourse right now with the city? Is there any?

16 CARLOS ORTIZ: So, in this case, if there's - let
17 me take a step back. If there's retaliation with
18 respect to a paid safe and sick leave violation,
19 which we enforce, then we can get in there and we can
20 help that worker possibly get their job back or
21 definitely work with them in terms of restitution.

22 If there's a violation with respect to uhm, 24-
23 hour shifts and 13-hour rule or a lack of wage and
24 hour compensation, I think that would have to be
25 directed to the state, as they are the regulatory
authority for those type of violations.

2 CHAIRPERSON DE LA ROSA: Got it, thank you. I
3 want to call on Council Member Feliz for a question.

4 COUNCIL MEMBER FELIZ: Thank you so much. Good
5 afternoon everyone. I'm Council Member Oswald Feliz.
6 I want to thank Chair Carmen De La Rosa for this
7 hearing. Thank you Council Member Christopher Marte
8 for your tireless work on this bill. And I also want
9 to thank all of you for joining us today to testify.

10 I have a few brief questions. One of them is,
11 what is the largest amount of hours that you've heard
12 a home attendant has worked in a week? Even if it's
13 an isolated incident. What's the largest amount of
14 hours that you've heard the home attendant working in
15 a week?

16 ELIZABETH WAGONER: Thank you for the question
17 Council Member. That is not information that we
18 would report just because you know our focus would be
19 on finding out about the issue. Finding out some
20 information about the scope of the problem whether
21 other workers are effected and then trying to get
22 that person referred to the right place.

23 So, it's not really something that we would sort
24 of record and to come up with sort of a back pay

3 number for that person. We just want to sort of get
4 the scope of the issue.

5 COUNCIL MEMBER FELIZ: Even if that's not
6 information that you record, will you be able to say
7 the largest amount of hours that you've heard about a
8 home attendant working in a week?

9 ELIZABETH WAGONER: I unfortunately couldn't.

10 COUNCIL MEMBER FELIZ: Alright, second question.
11 We've talked about - we've heard a lot about a
12 shortage in the home health aide industry. Is there
13 any evidence that you've heard that would lead us to
14 believe that there's a shortage due to the working
15 conditions in the industry?

16 CARLOS ORTIZ: Well, I do think in the report
17 that uhm, that Chair De La Rosa mentioned, they do
18 highlight wage and benefits as being a cause of a
19 shortage there. I think uhm, you know generally
20 there could be workers working conditions definitely
21 impacts whether or not they want to be in that
22 particular setting.

23 I think for us at the agency, we still have to
24 dive more into this and to better understand the
25 magnitude of any shortage and what the drivers are
for that.

3 COUNCIL MEMBER FELIZ: Okay, no more questions.

4 Thank you.

5 CHAIRPERSON DE LA ROSA: Thank you. Council
6 Member Joseph.

7 COUNCIL MEMBER JOSEPH: Thank you Chair. Thank
8 you Council Member Chris Marte for this. My question
9 is, earlier you spoke about wage theft and I'm also
10 looking at that in your wage theft prevention. How
11 many were you able to recoup any of the theft wages
12 for the home care workers? What does that process
13 look like? Can you explain that for us?

14 CARLOS ORTIZ: Thank you Council Member. So, in
15 terms of wage an hour, that is something that is
16 enforced by the state. I think what we identified is
17 that during the course of our investigations that
18 when we were looking at paid safe and sick leave
19 violations, we noted a number of wage theft
20 occurrences that were happening as well, along with
21 wage parity issues too. And so, for that reason, we
22 embarked on a joint partnership with the state and
23 the Attorney General's Office to make sure that we
24 were tagging these issues hand and hand and serving
25 the workers in that respect.

3 I think my colleague referenced earlier that we
4 can get the Council some further information on what
5 the state was able to pull out of that. With respect
6 to our paid safe and sick leave violations, my
7 understanding is our joint investigation with the
8 Attorney General's Office secured \$18 million in
9 restitution for workers.

10 COUNCIL MEMBER JOSEPH: Thank you. I'll come
11 around the second time. Thank you.

12 CHAIRPERSON DE LA ROSA: If there are no further
13 questions from our colleagues, we can conclude
14 testimony from the Administration. Thank you so much
15 for being here and to be continued.

16 CARLOS ORTIZ: Thank you Council Member. Council
17 Member, we're going to have staff stay behind to
18 listen as well. We do want to hear the testimony
19 from all the advocates that have come here today but
20 thank you all again.

21 CHAIRPERSON DE LA ROSA: Thank you. We
22 appreciate that. Certainly important. So, up next,
23 we will have an in-person panel. Senator Gustavo
24 Rivera is here, and Assembly Member Richard Gottfried
25 is here. They will have five minutes each to
testify.

3 You should know that they are the Chairs of the
4 Health Committee both in the Senate and Assembly.
5 Great. Welcome colleagues, it's good to see you all
6 again. I'm going to call on Assembly Member
7 Gottfried first and then Senator Rivera, if that's
8 okay. You may begin.

9 ASSEMBLY MEMBER GOTTFRIED: Well, thank you. I'm
10 Assembly Member Richard Gottfried. I Chair the
11 Assembly Health Committee. I largely agree with the
12 intent of Intro. 0175, however, it runs a fowl of
13 controlling state regulations of home health agencies
14 and fiscal intermediaries. And so, I urge that
15 Intro. 0175 be set aside and that you work with state
16 legislators and advocates on policies that will
17 achieve these aims. New York State laws and
18 regulations require that Medicaid managed care plans
19 and local social services districts, including New
20 York City HRA, requires them to provide 24-hour
21 services when necessary in either split shifts of 12
22 or 8 hours each or a 24-hour shift depending on the
23 needs of the patient.

24 In some cases, a 24-hour shift is in the best
25 interest of the patient for continuity of care and
other reasons. Where this bill to become law, home

3 care agencies that receive these authorizations for
4 24-hour coverage, would be forced to either violate
5 state rules or face fines from New York City.

6 In 2019, the State Court of Appeals, interpreted
7 state law to say that home care workers may be paid
8 for only 13 hours of work even if their shift goes
9 well beyond 13 hours even up to 24 hours. As long as
10 five hours of sleep time or three hours of meal time
11 is uninterrupted. I wholeheartedly disagree with
12 this ruling. I believe that if a worker is required
13 to be present at the worksite and be prepared to
14 perform duties at a moment's notice, then that worker
15 is entitled to be paid for that time.

16 Even if a home health aide is allowed to spend
17 certain hours eating or sleeping, they are on duty
18 during those hours. I do not agree with the section
19 of Intro. 0175 that would limit home care workers
20 work week to 50 hours. Medicare financing covers a
21 little more than minimum wage for home care workers.
22 While wages should improve somewhat under the
23 recently enacted state budget, many workers need
24 overtime income to support their families.

25 Payment and working conditions for home care
workers must improve. I sponsor in Albany, the Fair

3 Pay for Home Care Bill, Assembly Bill A 6329A, which
4 would increase wages to 150 percent of minimum wage.
5 I also support Assembly Bill A 3145A Epstein, which
6 is similar to Intro. 0175 in many ways. The main
7 difference is that the Epstein Bill would change
8 prevailing state wage rules which is the appropriate
9 regulation to amend, and which Intro. 0175 cannot.

10 Local government action inconsistent with state
11 law would cause significant harm to home care
12 agencies and in turn, harm to home care workers and
13 to the disabled and older New Yorkers who rely on
14 their services.

15 Please reconsider this bill and work with state
16 legislatures and advocates for home care workers and
17 their patients to enact meaningful change at the
18 state level. Thank you for this opportunity to
19 testify and I would be happy to take questions.

20 By the way, later you will be hearing testimony
21 from Bryan O'Malley relating to the consumer directed
22 program. He may not have time to present his whole
23 testimony, but I urge you to read it. Thank you.

24 CHAIRPERSON DE LA ROSA: Thank you Assembly
25 Member Gottfried.

3 [APPLAUSE] And I would be remiss if I didn't
4 congratulate you for all your years of service to our
5 state. We are a better state because of your work.

6 ASSEMBLY MEMBER GOTTFRIED: Well, thank you.

7 CHAIRPERSON DE LA ROSA: Senator Rivera, you're
8 up.

9 SENATOR RIVERA: Thank you Madam Chair. Thank
10 you Madam Chair for allowing me to be here today.
11 Thank you Council Members for this discussion, which
12 is an incredibly important one. My full testimony
13 will be available to you folks by email and what have
14 you, so you'll be able to see the whole thing.

15 Ditto to every single thing that the Assembly
16 Member said. At the core of this conversation is an
17 issue that is obviously very legitimate. There are
18 legitimate concerns here that we must deal with as it
19 relates to workers. And workers in the particular
20 field in which they are not treated well, as has been
21 already said by the Assembly Member and as we have
22 already discussed and there are many things that need
23 to be done to address the concerns of these workers.

24 So, although this is a well-intentioned bill, the
25 core of it is that it tries to solve a problem that
it cannot solve, because it has to be solved at the

3 state level. Almost 100 percent of the folks who are
4 patients, are Medicaid patients. This is, this
5 relates then to the rates that are set at the state
6 level. The payments that are set at the state level
7 and the rules that are set at the state level.

8 Now, I can tell you that I certainly have not
9 been fighting for as long as my colleague Dick
10 Gottfried, because I don't think anybody has. But
11 certainly, for my entire tenure of almost 12 years,
12 this has been a consistent issue and there have been
13 bills that we have tried to pass at the state level.
14 But the reality is that the Medicaid system before
15 our current governor for a period of at least ten
16 years, if not eleven, was led with a - it was all
17 about austerity and that struck the entire system
18 that is struck by Medicaid. And I'm very thankful to
19 Governor Hochul for starting to turn this ship around
20 and we started to do that this last year.

21 But the reality is that we have still a long way
22 to go and part of that is addressing the concern here
23 as far as it relates to the 13-hour rule. As the
24 Assembly Member said, I also disagree with the
25 ultimate decision that was made by the courts and
believe that every single person needs to be paid for

3 every single hour that they work. But whether we're
4 talking about – when we talk about the providers, and
5 the fact that the assessments that are made for
6 patients are made not by the providers. They have to
7 abide by these assessments and trying to do something
8 different than what the assessment says might put
9 them at risk of Medicaid fraud.

10 At the core of this, is that it needs to be done
11 at the state level. And what I'm thankful for
12 certainly and certainly all the folks in this room
13 are a testament to this, as well as all the other
14 folks that couldn't get in who are outside, is that
15 this is something that we care about deeply in this
16 city. The City Council cares about this, and I
17 certainly thank you for really talking about this. I
18 would encourage or for all of us to use this energy
19 to make sure that starting in the next legislative
20 cycle, at the state level, that this is finally,
21 finally addressed.

22 So, I will just reiterate that although this
23 particular – that this is a bill that tries to solve
24 a problem that needs to be solved. It unfortunately
25 cannot be solved at the state – it has to be solved
at the state level. It cannot be solved at the city

3 level, and I would encourage you, just like my
4 colleague and the Assembly did, that this bill not be
5 approved but that you take all of this energy and
6 that we take it to the state to make sure that we can
7 pass something up there.

8 CHAIRPERSON DE LA ROSA: Thank you Senator.

9 [APPLAUSE] for your leadership as well. If you could
10 indulge us, we have a few questions from our
11 colleagues. First of all, I want to say that uhm, I
12 am proud to be part of a Council that one of the
13 first Resolutions we passed back in March was in
14 favor of the Fair Pay for Home Care Act. And that
15 that is a crucial piece of legislation that seeks to
16 deal with the wage question, but we did hear
17 repeatedly today from the previous panel that there
18 are recourses on the state level if there is a
19 presumption of wage theft or retaliation. Can you
20 walk us through what those recourses are as you
21 understand them?

22 ASSEMBLY MEMBER GOTTFRIED: Uhm, only very
23 generally because I think that's largely a question
24 of labor law enforcement, which is not my specialty.
25 But I would assume that complaints about inadequate
compensation for overtime, improper calculating of

3 overtime, wage theft, etc., I would imagine that
4 those complaints would be directed to the State Labor
5 Department.

6 CHAIRPERSON DE LA ROSA: Okay, uhm, and also, you
7 all cited that we could be doing a lot here from the
8 City Council level to help push the bill on the state
9 level. What are some of those immediate actions that
10 our colleagues and constituents can take to help move
11 the conversation in Albany?

12 SENATOR RIVERA: I mean, I would argue that
13 certainly, this is part of it and making sure that
14 the focus as everybody that pays attention to the
15 state budget can tell you, even though it is
16 presented all the way in January, it is prepared long
17 before that. So, starting to have these
18 conversations now and increasing the public pressure
19 now, means that in preparation for the budget for
20 next year, since we have to wait for the governor to
21 present it, that having these conversations both
22 publicly and privately, with the administration, with
23 the Hochul Administration, who I believe will remain,
24 the Hochul Administration. Obviously, it's in
25 election year etc., but that process is ongoing in
preparing the budget, so I figured that having that

1 conversation now, since this is something that would
2 very likely require budgetary actions, since it's
3 such a - has obviously has a fiscal impact, so it
4 would require budgetary actions, it would need to be
5 done during the budget. And that's the way that it's
6 usually been right, and so, I would gather that these
7 types of conversations leading up to the presentation
8 of the budget in January would be exactly what needs
9 to happen.
10

11 CHAIRPERSON DE LA ROSA: Great, thank you. I
12 want to pass it over, well, first I want to recognize
13 that Council Member Restler has joined us, and I want
14 to pass it over to our Majority Leader Keith Powers.

15 MAJORITY LEADER POWERS: Thank you and thank you
16 to both the Assembly Member and Senator for being
17 here today and testifying and adding your expertise
18 as Chairs. First of all, before I say anything I do
19 want to also acknowledge my colleague and friend,
20 Assembly Member Dick Gottfried, who has so much
21 wisdom that we all can tap into on these types of
22 issues and has been a great partner both locally and
23 of course in Albany as well for so many of us. So, I
24 just wanted to share in my congrats to him on exiting
25 and of course thanking him for giving this state but

3 also our community so much of his time and so much of
4 his expertise. And I also want to recognize Senator
5 Rivera who I think it was the day before his
6 election, called me on something in his District
7 totally unrelated, so I know how much he's working.

8 I guess, you know, the Chair touched upon it but
9 we - I think Council Member Marte is raising an issue
10 that everybody seems to agree with. It's sort of
11 where this should took place and what are the sort of
12 mechanisms to get there that everybody I think
13 identifies as a significant issue. So, I guess in
14 addition to the question I was going to ask, which
15 the Chair asked, which is where is the Council's role
16 in the conversation in Albany, which you've answered,
17 and we could figure out.

18 I guess, my concern is that we get another budget
19 next year and we do have a new governor and I hope
20 that adds new energy to it but then we get you know a
21 few years down the road, and I think we continue to
22 see the issue pretty present in front of us, but we
23 don't get to a place in Albany to come to an
24 agreement on that. So, maybe adding some context to
25 us about where the legislation lies in Albany. Where
perhaps the governor, I mean, I'm not going to ask

3 you to be a spokesperson for the governor, but sort
4 of where those conversations lay in Albany because I
5 think there is a real concern here that we could
6 continue to have this issue be passed along and not
7 actually get to a place of resolving it.

8 ASSEMBLY MEMBER GOTTFRIED: Well, the bill, I'd
9 say both bills. Both the Fair Pay for Home Care Bill
10 and Assembly Member Epstein's Home Care Bill, uh, you
11 know will be back I assume in January. Somebody
12 other than me will be the lead sponsor of the Fair
13 Pay Bill of course. Uhm, what both of those bills
14 bump up against, like so many other issues, is cost
15 and you know on the other hand, this is an
16 extraordinary wealthy state. Uh, with a lot of New
17 Yorkers who can readily afford to pay significantly
18 higher taxes to the state than they do. I don't
19 think anybody in this room comes under that category,
20 but a lot of my constituents do in Manhattan. I
21 think the Council, both as individual Council Members
22 and collectively through hearings like this, and
23 working with advocacy groups, I think Council Members
24 and the Council can help to focus attention on these
25 pieces of the budget. You know, old, old rule, the
squeaky wheel gets the grease. There will be a lot

3 of people fighting in Albany for money for you know
4 for billions of dollars for any number of things.
5 What needs to happen is that more of that squeaking
6 wheel needs to be on behalf of home care. Both for
7 raising the wages of home care workers and for
8 dealing with making sure that uh, that when home care
9 workers are willing to do a 24-hour shift, and when
10 that's what the patient needs, that there is money
11 there to pay them.

12 SENATOR RIVERA: No, I would say as in addition
13 to it, that I do think that we have turned a page
14 with the statewide administration. I remember having
15 the conversation at the beginning during this budget
16 battle right. There's always a budget battle but
17 this year was different, and I remember Assembly
18 Member Gottfried saying both publicly and privately,
19 this is the best health budget that I've ever seen in
20 my entire legislative career. That's obviously a big
21 statement.

22 I do think that there is a page that has been
23 turned and that this administration is at least open
24 to these conversations. So, it doesn't mean that it
25 will get, that it will absolutely get done but we can
increase the pressure and I believe that these

3 conversations like having conversations like this,
4 hearings like this, talking about bills like this,
5 increases that level of pressure and that we should
6 continue to increase it between now and the beginning
7 of the year.

8 MAJORITY LEADER POWERS: Thanks. I had one last
9 question and then I'll hand it back. There was a -
10 Assembly Member, you had mentioned the sort of not
11 agreeing with the 50-debt hour cap to the sort of
12 willingness perhaps of individuals to want to accept
13 overtime, which I understand. Is there a reasonable
14 limit on hours? It does feel like there perhaps
15 should be a cap on how many hours somebody is
16 required to work to keep their job. Is there a cap
17 that you see as a reasonable number?

18 ASSEMBLY MEMBER GOTTFRIED: I suppose there must
19 be a reasonable limit. Off the top of my head, I
20 don't know where I would want to draw a line if a
21 line should be drawn in statute or regulation. I
22 would also want to draw that line, if a line is to be
23 drawn in consultation with all the various parties
24 that need to be at the table, especially the labor
25 organizations representing home care workers, who
have an enormous amount at stake here. You know

3 there are any number of lines at work in America
4 where we set a limit on how many hours we allow
5 someone to work in week uh, in part because of safety
6 reasons.

7 You know, you're not allowed a pilot a commercial
8 plan more than a certain number of hours in a week or
9 to drive a long-haul truck more than a certain number
10 of hours in a week. It may well be that there is a —
11 that there are limits that for safety reasons need to
12 be placed in home care and whether it makes sense to
13 do that as the number of hours in a given shift and
14 they require a certain number of hours of being off
15 the job before you are expected back or whether it
16 should be calculated as a total for a week. I don't
17 know but it's an issue certainly worth looking at.

18 As I said, in close consultation with the parties
19 that have a lot at stake, the workers and people
20 representing their patients.

21 SENATOR RIVERA: And very quickly, nobody works
22 50 plus hours because they want to, it's because they
23 need to. We need to pay them better. If we pay them
24 better, they will be able to work less.

25 MAJORITY LEADER POWERS: Yup, agreed, thanks.
Thank you guys.

3 [APPLAUSE]

4 SERGEANT AT ARMS: Quiet down.

5 MAJORITY LEADER POWERS: Thank you. Thanks both
6 of you.

7 CHAIRPERSON DE LA ROSA: Thank you Majority
8 Leader. Council Member Nurse.

9 COUNCIL MEMBER NURSE: Thank you. Thank you for
10 your testimony. I was going to ask about the
11 political reality and political will of Albany to
12 actually address this, especially since you
13 specifically had mentioned you had been fighting it
14 for 12 years and maybe even longer. So, I do want to
15 underscore the concern that, yet another cycle will
16 go, and the issue will remain.

17 There have been some amendments opposed to this
18 bill that have been proposed by labor groups and I'm
19 just curious, the amendments would extend the
20 implementation timeline of this bill to the state
21 legislative and budget processes. Uhm, and I'm
22 curious your assessment that if the Council were to
23 pass Intro. 0175 with those adjusted timeline
24 amendments, would that put increased pressure on the
25 state to finally address this issue?

3 ASSEMBLY MEMBER GOTTFRIED: I don't know what
4 affect that would have. State legislators and the
5 governor like almost anybody else, probably would not
6 respond positively to what was meant to be pressure.
7 And might instead feel the need to pass explicit
8 legislation overruling any such local law. Or people
9 who it might well be that undoing of the city
10 legislation could be done through litigation.

11 So, I certainly would not suggest passing the
12 legislation with a lit fuse with a notion that that
13 would somehow pressure the legislature into acting.
14 It could have unpredictable and unwelcome affects.

15 SENATOR RIVERA: I would agree, particularly
16 since there's - and as I said, I made it very clear,
17 this is a different administration than the last one
18 and certainly Governor Hochul has shown an openness
19 to move in a different direction in so many different
20 ways than the last governor did and that's a positive
21 thing, but I do not know what her legislative
22 priorities will be and we don't know what both houses
23 will look like after, right, after January, after
24 November.

25 I'm pretty certain that we will keep the majority
in the senate but I'm not sure by how many folks and

3 there will be some changes in the assembly as well.

4 [INAUDIBLE 1:23:09] if nothing else. So, all of
5 these things, there's just too many unknowns at this
6 point to be able to tell you whether it will be one
7 thing or another.

8 COUNCIL MEMBER NURSE: Thank you. Thank you
9 Chair.

10 ASSEMBLY MEMBER GOTTFRIED: One thing I would say
11 about the coming session of the legislature, is that
12 in the assembly obviously, we will have a new Health
13 Committee Chair and I would urge interested members
14 of the Council, interested people in advocacy roles.
15 That new Chair is going to have a lot to learn very
16 quickly, and you know there's no school that that
17 person gets to go to. The learning comes from
18 interested parties meeting with them and talking to
19 them. And I can assure you that there will be a lot
20 of people doing that and people who are friends of
21 home care and friends of home care workers need to
22 make sure that they are among the people helping to
23 educate the new Assembly Health Chair, whoever that
24 may be.

25 CHAIRPERSON DE LA ROSA: Thank you so much. We
have Council Member Marte.

3 COUNCIL MEMBER MARTE: This question is focused
4 on State Senator Gustavo.

5 SENATOR RIVERA: Gustavo is fine. No worries.

6 COUNCIL MEMBER MARTE: Okay, you know you say
7 this is state issues but are you aware that these
8 shifts only happen in New York City? Don't happen in
9 Syracuse. Don't happen in Buffalo. Don't happen in
10 West Chester but happen in the Bronx, happen in Lower
11 Manhattan. And so, these are the same Medicaid
12 patients right. So, you're allowing to keep the
13 current formula in place for someone, a senior in
14 Buffalo to have better Medicaid coverage than someone
15 here who lives in the Bronx.

16 SENATOR RIVERA: Uhm, I don't think that what I
17 said discounts any of that. All that I said was that
18 it needs to be done at the state level because it is
19 operated at the state level, so to change the law to
20 impact the entire state, this is, it's a state
21 program. Medicaid is a state and federal run program
22 or federally and stated funded but run by the state.
23 So, that is the only point that I was making.

24 COUNCIL MEMBER MARTE: Okay, and this question is
25 for Assembly Member Dick Gottfried. How long do you
think home attendants should wait to have the same

3 working condition as everyone else? How many more
4 home attendants should die from work relate health
5 complications before these shifts have to end?

6 ASSEMBLY MEMBER GOTTFRIED: Well, first of all,
7 from your question to Senator Rivera, I don't know
8 that 24 hour shifts only exist in the five boroughs.
9 It may be but I've never heard anyone say that. Uhm,
10 it's not a question of whether people in other parts
11 of the state are entitled to better or not better
12 Medicaid coverage, it's a question of whether in some
13 cases, a 24-hour shift is better for the patient.
14 And if it is a better arrangement for the patient,
15 then I don't believe it should illegal.

16 As to your question about when should conditions
17 be improved for home care workers, the answer is, a
18 long time ago. No one's suggesting that conditions
19 for home care workers not be improved. Whether it's
20 in terms of their compensation or making sure that
21 whatever number of hours they work is truly voluntary
22 and healthy for them and for the people they serve.

23 CHAIRPERSON DE LA ROSA: Thank you. Council
24 Member Bottcher.

25 COUNCIL MEMBER BOTTCHEER: Thank you. I want to
add my voice of appreciation and admiration and all

3 the good stuff for Assembly Member Dick Gottfried, as
4 I have like a thousand times since December. We
5 overlap districts, which is a great honor for me.

6 A question for the two of you. Uhm, more clarity
7 on your position about the 24-hour shifts, because
8 we're hearing advocates say and some workers say that
9 24 hours paid or unpaid is too long. Are you in
10 favor of keeping a 24-hour as long as people are
11 compensated, or do you believe that 24-hours is too
12 long for someone to work?

13 SENATOR RIVERA: At least I'll tell you my focus
14 is that the structure of it as was said by the
15 Assembly Member and I agree that it needs to be
16 what's best obviously for the worker and the patient
17 etc..

18 What I'm - at least what I would say is that if a
19 patient requires care for 24 hours, that whoever
20 provides that care should be paid accordingly. If
21 we're talking about more than one person, then
22 certainly once we change, we'll have to change the
23 law for right. But there is, it's about the care
24 that's provided to the patient and the worker being
25 paid for whatever it is that they ultimately do. So,
at least that's how, that's how I approach it.

3 [APPLAUSE]

4 ASSEMBLY MEMBER GOTTFRIED: I would say that
5 certainly, if there are going to be 24-hour shifts in
6 cases where it's in the interest of the patient, I'd
7 want a couple of things. I'd want legislative
8 safeguards, as in the Epstein Bill, to make sure that
9 it is voluntary on the part of the worker. That no
10 worker is pressured or forced into working a 24-hour
11 shift, number one. And number two, you've got to
12 make sure that during those 24 hours, the worker is
13 entitled to meal breaks and to sleep.

14 Their compensation I believe, must take into
15 account that even when they are allowed to eat and
16 sleep, they are on the job and at any given moment
17 could be called upon to jump up and provide care to
18 their patient. So, those are for me, the parameters
19 of a 24-hour shift.

20 COUNCIL MEMBER BOTTCHEER: Thank you.

21 CHAIRPERSON DE LA ROSA: Thank you so much.
22 Council Member Brewer.

23 COUNCIL MEMBER BREWER: Thank you both very much.
24 Two quick questions, one is, and I should know the
25 answer. I do agree with you, state is the purveyor
and should be in charge. So, if that's the case,

3 does the enforcement also come from the state or is
4 that the city? Is that - I should know the answer to
5 that but how does that work?

6 And then the second issue is, has the Epstein
7 Bill or other similar bills, have they already been
8 evaluated in terms of the cost? Those are my two
9 questions.

10 SENATOR RIVERA: In terms of the labor law
11 enforcement sort of question -

12 COUNCIL MEMBER BREWER: Yes.

13 SENATOR RIVERA: Uhm, I, as far as I know,
14 historically whether your, you know whatever line of
15 work you're talking about, that enforcement has been
16 done by the State Department of Labor.

17 COUNCIL MEMBER BREWER: Okay.

18 SENATOR RIVERA: I don't know whether they're -
19 what exactly what the structure of the state labor
20 law is as to whether a city could do enforcement. I
21 gather the city's department, which used to be called
22 Consumer Affairs, which is now called Consumer and
23 Worker Protection, that there are city labor laws
24 that the city enforces but I would assume that unless
25 there is - that those city laws would have to be
either consistent with state law or be operating in

3 an area where state law has essentially given the
4 city permission to enact law.

5 COUNCIL MEMBER BREWER: Okay, thank you. I think
6 that still needs to be worked out. Then the cost,
7 has that been done by the state or not yet?

8 SENATOR RIVERA: Uhm, I don't know whether
9 anybody has put a price tag to the Epstein bill. In
10 part, the bill is drafted as an amendment to the
11 labor law and therefore has always gone to our Labor
12 Committee, not to the Health Committee. I know in
13 general when in previous, in earlier discussions of
14 the 13-hour rule, uh, people have talked in terms of
15 the price tag of paying for those 13-hours when
16 workers aren't required to be paid, people have
17 talked about a price tag you know in the billions of
18 dollars, which would not surprise me.

19 Uhm, but you know, things need to be confronted.
20 If somebody were to say, what would it cost to
21 require people to go to public school from age 12 to
22 16, the number is undoubtedly in the billions, but I
23 haven't heard anyone suggest we should eliminate the
24 requirement that kids go to school through age 16.

25 Some things we just have to bite the bullet and
confront.

3 COUNCIL MEMBER BREWER: Thank you.

4 CHAIRPERSON DE LA ROSA: Thank you. Colleagues,
5 if there are no more questions, we're going to thank
6 our colleagues from the legislature for being here
7 and for their service and call the next panel, which
8 is -

9 SENATOR RIVERA: And by the way, I just want to
10 thank you for holding this hearing. I think the
11 attention, I think a greater attention really needs
12 to be paid to all of the issues around home care and
13 home care workers and the people they care for.

14 CHAIRPERSON DE LA ROSA: Absolutely. Thank you
15 so much. Thank you for being here. So, the next
16 panel, we're going to have some in-person and
17 virtual. So, we're going to Assembly Member Ron Kim,
18 who is here in person. We're going to have Assembly
19 Member Deborah Glick, who is virtual, Vittoria
20 Fariello, who is a democratic district leader who is
21 also virtual I believe. Oh, she's in person.

22 We're going to have Assembly Member Epstein who
23 is virtual. We're going to have Lai Yee Chan in
24 person, Xiao Wen Zhen in person, Nu Jun Zhu in
25 person. We'll need the Cantonese interpreter as well

3 to provide services for this panel and there will be
4 five minutes each for this panel as well.

5 Okay, alright, we'll start with Assembly Member
6 Ron Kim when you're ready.

7 ASSEMBLY MEMBER KIM: Thank you Chairwoman and
8 thank you Council Members. It's good to see everyone
9 back in the Chambers. I to thank the Chair and the
10 Council for holding this very important hearing on
11 Intro. 0175, which I wholeheartedly support.

12 To have a productive meeting on Medicaid based
13 home care workers, we must be honest about what the
14 state law says and how we got here. Pursuant to
15 Department of Labor, minimum wage older law and the
16 NGS, Andreyeva decision by the New York State Court
17 of Appeals in 2019, when home care providers take on
18 24-hour work contracts, Medicaid will cover up to 13
19 hours of the shift.

20 If the worker misses even a second of sleep and
21 eating time, the employer, the provider, must cover
22 the remainder of the 24 hours. After surveying
23 countless good operators who understood and complied
24 with this law, I learned that many chose to take on
25 only 12-hour contracts or raise money to compensate
for overtime with anyone working 24-hour shifts.

3 The bad operators, like the home attendant
4 program of the Chinese American Planning Council,
5 abused their workers. They threatened them with
6 Medicaid fraud for reporting accurate hours. Instead
7 of rejecting bad contracts, LTC, they even promoted
8 24-hour work shifts at the galas to recruit workers.
9 Despite years of workers crying foul and filing
10 lawsuits, groups like CPC acted with impunity knowing
11 that they could hide behind forced arbitration, so
12 they cut a sweetheart deal with one of this nation's
13 most powerful health care labor unions 1199 SEIU.
14 And that is exactly what happened

15 After 42 agencies were found to owe billions in
16 back wages, 1199 lawyers cut an agreement on the
17 workers behalf for pennies on the dollar. Now,
18 they're telling workers, my constituents, to take
19 those pennies and wave their right to recourse as
20 workers. What kind of a labor movement is this?

21 Meanwhile, nothing is being done at the state
22 level to enforce abuse of workers or a basic wage
23 loss. This is the case of total avigation of
24 government duty and an example of what happens when
25 we outsource and privatize public work, which is what
care work is, a public service. Because there's no

3 accountability, woman of color, as workers and
4 recipients of care suffer. And I find it odd that
5 after the state completely outsourced care work to
6 local nonprofits and contractors, severely impacting
7 immigrant and minority communities, we now see some
8 state law makers pounding their chest about local
9 government stepping in to protect the workers,
10 claiming it's the states jurisdiction.

11 In the case of CPC, the state outsources \$200,000
12 million a year of public money. For certain
13 immigrant clients, it has created a shadow of home
14 care bureaucracy. The state doesn't enforce our wage
15 laws on them, and we turn a blind eye to the worker
16 abuse. It's only fitting that the local government,
17 in this case, the City of New York, steps in to
18 regulate and protect the workers contracted by a
19 local nonprofit.

20 Now, to those fighting to keep the 24-hour work
21 contracts, are you also fighting for every dollar
22 owed to my constituents? For Asian immigrants and
23 woman workers less human to you? Do they deserve
24 fewer rights than other racial groups? The
25 progressive establishment of certain groups,
including DSA members; no offense Tiffany. Who pride

3 themselves on workers' rights, should be ashamed that
4 they've empowered and validated nonprofits to enforce
5 racial and gender hierarchy in our city.

6 When we outsource public responsibility, we dodge
7 accountability and are no longer pressured to fix
8 anything. Instead of measuring how many Asian
9 immigrant workers lost their health and livelihoods
10 under this privatized public system, we can just
11 focus on positive metrics. How many older adults
12 does CPC serve? How many hours were spent on care,
13 etc., but we can't accept any outcomes underwritten
14 by abuse of workers. That's not public service.
15 It's not public value, it's just exploitation and
16 perpetual racist violence and it's not sustainable.

17 So, we can put an end to this but first, ending
18 24 work home care in New York City. Then we must
19 muster up the courage to build care work as part of
20 our public institutions and end the outsourcing of
21 privatization of public work.

22 I implore this body to pass this legislation,
23 seize the moment from municipal activism, build
24 public value and ask the mayor to sign it as soon as
25 possible. Thank you.

[APPLAUSE]

3 SERGEANT AT ARMS: Quiet down ladies and
4 gentlemen. Ladies and gentlemen, I need everybody to
5 quiet down right now, please.

6 CHAIRPERSON DE LA ROSA: Thank you Assembly
7 Member Kim. Up next is Assembly Member Deborah
8 Glick.

9 ASSEMBLY MEMBER GLICK: Thank you very much. I
10 believe I've been unmuted.

11 CHAIRPERSON DE LA ROSA: Yes, you have. We can
12 hear you.

13 ASSEMBLY MEMBER GLICK: Great, wonderful to see
14 you Carmen. Thank you for the opportunity to testify
15 before you today in support of Intro. 0175, a local
16 law to address the working conditions of home care
17 aides. I commend the bill sponsor, Council Member
18 Chris Marte for his deep commitment to the issue of
19 home care workers being forced to work a 24-hour
20 shift, a practice that is inhumane and does not lead
21 to high quality care for the client.

22 I understand that home care agencies are
23 restricted by both federal rules and the states
24 adherence to them and our own antiquated system.
25 However, that is why I have joined in cosponsoring
Assembly Member Epstein's legislation A 3145A, which

3 would protect home health aides by limiting the
4 duration of work shifts, so that employers can no
5 longer require aides to work a 24-hour shift.

6 I'm also a Co-Sponsor of the Fair Pay for Home
7 Care Bill, A 6329A, which would establish a higher
8 minimum base wage. Now, I understand that the number
9 of individuals currently receiving 24-hour care under
10 the existing structure is limited in each agencies
11 client base. But with an aging population,
12 especially the growing number of individuals facing
13 cognitive issues, it is safe to assume that the
14 numbers of people needing home care will increase.

15 Home care workers, especially challenging and now
16 is the time to take steps to address this issue.
17 Now, I know that there are concerns about restricting
18 home care aides ability to work overtime but that is
19 decidedly different from working a 24-hour shift
20 where a worker is not compensated for many of those
21 hours.

22 But the federal and state reimbursements need to
23 be changed and we need to grow the pool of home care
24 workers that is equally critical. Now, home care
25 workers provide crucial care to our communities most
vulnerable members. And it is essential that they

3 are compensated fairly, ensured a safe work
4 environment, free from exploitation, and unethical
5 practices. We must all work together to develop
6 career paths that provide greater compensation and
7 protections for home care workers and that will
8 increase the number of care workers in New York
9 State.

10 Now, let me just say in closing, that all of this
11 begs the crucial question, and that is where is the
12 state's priority in our society for home care? There
13 is no doubt that taking care of people in their home
14 is less expensive than an institutional care.

15 And for most individuals, it is also more helpful
16 to be able to stay at home and that your outcomes,
17 your health outcomes are better. So, what can we do?
18 And that is pass both of those laws that I mentioned
19 on the state level, but I don't think there's any
20 reason why we should not proceed at a city level.
21 I'm hard pressed to understand why a 24-hour shift is
22 in the interest of any client.

23 For those of us in the legislature who have on
24 occasion, on occasion, rare occasion, worked 24 hours
25 in a session, we know that in those last eight hours,
we're really not at our peak. And I can't imagine

3 the difficulty of working with somebody on a 24-hour
4 basis when you have to physically assist them out of
5 their bed or into the bathroom. This seems to me
6 like an issue that must be addressed and whether it
7 is more appropriate for us to do that at a state
8 level, I leave that to other people to do a pine on.
9 I will say that I support this measure and support
10 both the 24-hour restriction that is included in this
11 legislation.

12 SERGEANT AT ARMS: Time expired.

13 ASSEMBLY MEMBER GLICK: Thank you very much.

14 CHAIRPERSON DE LA ROSA: Thank you so much
15 Assembly Member Glick. Up next, we have Assembly
16 Member Harvey Epstein, who will join us virtually.

17 ASSEMBLY MEMBER EPSTEIN: Hi and thank you for
18 letting me testify today and I really appreciate
19 everyone taking this time to do this hearing. And I
20 just want to say that we steal \$1 billion every year
21 from the pockets of low-wage workers who are working
22 the home health care industry. \$1 billion a year is
23 coming out of their pockets of their money because
24 we're not paying people for every hour that they
25 work.

3 We have lots of industries where we have people
4 working long shifts. You know fire fighters, nurses,
5 doctors but we pay each and every industry for the
6 hours that they work, and we don't do this here. In
7 an industry that's almost exclusively, the workers
8 are immigrant women of color. So, two things we need
9 to do, my bill 3145 you know, and the Senator Persaud
10 need to move forward and pass those bills
11 expeditiously. And the way to do is not because we
12 have a moral crisis, and we have a human crisis, and
13 we have a financial responsibility.

14 In a budget that's \$220 billion, between the
15 state share, which is half of it and the federal
16 share, which we'll get, we can come up with the
17 dollars necessary to ensure people get paid for every
18 hour that they work.

19 The second point is a critical point is just
20 ending 24-hour shifts period. Our bill ends 24-hour
21 shifts. The reality is that we need to end those
22 shifts. We need to stop having people work 24 hours
23 in any possible situation. We are saying that 12-
24 hour shifts are much more appropriate. It's better
25 care, better support, better services. It endangers
the patient that workers work 24-hour shifts

3 endangers the worker. I've talked to workers who've
4 worked five 24-hour shifts in a row, and you can't
5 imagine what that does to a human. Their ability to
6 be able to work, their ability to be able to take
7 care of someone else goes all out the window. Their
8 ability to deal with their own body and their own
9 health.

10 So, we need to move forward with the split
11 shifts. We need to stop this wage theft. We need to
12 do this now and I know we've been trying for the past
13 few years to pass this legislation, we're able to
14 pass you know more funding for health care this year.
15 We really pushed hard with the - you know with over
16 30 members trying to push this bill in the budget
17 process. Whatever the Council can do to get this
18 help over the finish line in next year. Continue to
19 push the Assembly, the Senate, the Governor. We've
20 had round tables in the Senate and the Assembly with
21 the Senator Persaud support and our support and
22 clearly the leadership of Senator Rivera and Assembly
23 Member Gottfried, who's been champions of trying to
24 get this. We collectively need to do this to end
25 this industry. And I look forward to working with
the Council and Chris Marte, whose leadership on this

3 and the Council's level, to ensure that we
4 collectively end these shifts and pay people for
5 every hour that they work, and I hope to do that in
6 the very near future. Thank you.

7 CHAIRPERSON DE LA ROSA: Thank you Assembly
8 Member Epstein. Up next, we have Vittoria Fariello.

9 VITTORIA FARIELLO: There we go, can you hear me?
10 Okay, so good afternoon Chairwoman and members of the
11 City Council and members of the public. Thank you
12 for the opportunity to allow me to speak. I am
13 Vittoria Fariello, a Democratic District Leader here
14 in Lower Manhattan and I strongly urge you to support
15 Introduction 0175 and end this cruel practice of the
16 24-hour work days.

17 It is fitting that we celebrated Labor Day just
18 yesterday and this is your opportunity to stand with
19 workers. Respectfully, it is your opportunity to do
20 the right thing. For years, home attendant workers
21 have had to work 24-hour shifts while only being paid
22 for 13 of those hours. This is not only economic
23 abuse, the days spent away from their families, the
24 hours of physical labor imposed on them, the toll on
25 their physical and emotional wellbeing is
immeasurable.

3 No one has denied the brutal working conditions
4 of a 24-hour work day. Yet we hear excuses as to why
5 we must continue to allow them. Why we should not
6 pass a law to prohibit it here in the city when our
7 state legislature has not been able to address it
8 yet. Please let that sink in.

9 Opponents are saying, why we must continue to
10 allow these brutal working conditions that we must
11 wait for justice. That these women here today must
12 continue to accept 24-hour shifts. No one wins when
13 our home attendant workers are overworked, exhausted
14 and abused. No one wins when our care takers, mostly
15 immigrant women of color suffer physical, emotional
16 and psychological harm because our laws allow it.

17 But you as our representatives in the City
18 Council can do something about this. You can stop
19 this injustice. We will continue to pressure our
20 state legislature, so while we wait for them to do
21 the right thing, you can do it today. You can stand
22 with our home attendant workers. You can end this
23 abusive practice. You can right this injustice.

24 I urge you, our City Council members to do the
25 right thing and stand with our home attendant

3 workers. I urge you to support Intro. 0175. Thank
4 you for your time.

5 CHAIRPERSON DE LA ROSA: Thank you so much.

6 [APPLAUSE]

7 Up next, we have Lai Yee Chan in person.

8 [APPLAUSE].

9 LAI YEE CHAN: [SPEAKING IN MANDARIN 1:52:45-
10 1:54:50]. [APPLAUSE]

11 INTERPRETER: My name is Lai Yee Chan. I have
12 been working 24-hours for CPC for over eight years
13 now. I work three to five days a week. I am in care
14 for a person, a male patient who suffer from stroke.
15 He is more than 80-years-old. He is I have to wake
16 up every two hours to help him flip over. I can
17 barely sleep. 24 working hours has made me uhm,
18 stressed out. I cannot even begin to rest at home
19 when I'm actually on a day off. When I hear
20 something, I have to immediately get up because I
21 think that there was a patient that was calling for
22 me. The patients family also see my suffering and
23 submitted a claim to the insurance company and the
24 insurance company sent out people to do the
25 investigation. In the end, it eventually turned our
shift into a two separate shift of 12-hours a day.

3 Even now, they – uhm, I would have to work a 12-hour
4 day shift for four consecutive days or even two, it's
5 still very difficult. This is a very difficult job.
6 Even so, it's better than before.

7 After the change of two shifts, my mental state
8 has been a little bit better and the patient who
9 suffer from stroke, originally cannot speak. Now
10 that we have more mental to actually speak with him,
11 the patient actually started to speak a little bit
12 more. And with the family doctors come and access
13 that the home care was done very well. And in fact,
14 the two shifts actually helps out the patients'
15 health, also improves the working environment and
16 improves the work stability as well.

17 Even though I don't do 24 hour shifts anymore, I
18 still do not wish to see this inhumane job schedule
19 to continue. So, I am in support of Intro. 0175 in
20 support of getting rid of 24-hour work day and to
21 keep a cap of 50 hours working week. Thank you.

22 [APPLAUSE]

23 CHAIRPERSON DE LA ROSA: Thank you so much.
24 Thank you so much. I'm going to ask that we not clap
25 in between each person. We have about 40 people
signed up and it stops us every single time we have

3 to wait. So, let's go through the panel so we can
4 listen to everybody. Thank you.

5 Up next, we have Xiao Wen Zhen.

6 XIAO WEN ZHEN: Okay, [SPEAKING IN CANTONESE
7 1:58:14- 2:00:04] [APPLAUSE]

8 CHAIRPERSON DE LA ROSA: Please, please
9 everybody, please.

10 INTERPRETER: [SPEAKING IN CANTONESE 2:00:11-
11 2:00:16].

12 CHAIRPERSON DE LA ROSA: Okay.

13 INTERPRETER: Hello everyone. My name is Xiao
14 Wen Zhen. I have been in home care since 2005. I've
15 done 24-hour home care for over 14-years now.

16 Usually, we work three to four days of 24-hours a
17 week. I've been with many patients and if you are
18 uhm, actually in the 24-hour care, that means that
19 patient has to be in a very severe condition. I have
20 taken care of one patient who suffers from severe
21 dementia who would you know ask me to speak with them
22 when they cannot sleep. When they're suffering from
23 trouble sleeping and they would ask if you would talk
24 to me about like having me to pay the rent and would
25 get up in the middle of the night just to go the
kitchen, you know working things and I have to wake

3 up all night just to prevent her from you know
4 opening the gas or actually be leaving the house.

5 So, I barely have any sleep. Long term of
6 working for 24-hour care for a long period of time
7 cause for me to not have time to take care of my
8 child. I had my child sent back to China for my
9 other family member, my mom, to take care of them
10 after just 40-days into birth. Long-term 24-hour
11 work has made me very stressed out mentally and I
12 often times I have to carry patients causing a lot of
13 stress and pain to my lower back, arms, and my
14 wrists.

15 So, I'm here today in support of City Council
16 Bill Number 0175 in support of getting rid of 24-hour
17 work and capping the working hour of weekly to the 50-
18 hours. That way we as home care would have time to
19 rest and to be with our family, especially the kids.
20 Thank you.

21 CHAIRPERSON DE LA ROSA: Thank you so much. We
22 have Nu Jun Zhu. Sorry if I messed up your name,
23 please correct it.

24 NU JUN ZHU: [SPEAKING IN MANDARIN 2:02:51-
25 2:05:13]

3 INTERPRETER: Hello everyone. My name is Nu Jun
4 Zhu is a home care since 2016. I've worked 24-hour
5 shifts for three days every week. That means, I work
6 72 hours a week. I have taken care of many cliental.
7 If not dementia, then it is full paralysis, diabetes,
8 who cannot take care of their own lives, all very
9 endangered crowds. Some of them are not very clear
10 minded. They go out in the morning, wondering
11 around. We have to take care of them 24-hours to
12 make sure of their safety.

13 At nights, they will just scream. We will have
14 to sit with them till light comes. One patient has
15 to get up every hour. I have to - for a whole day
16 and night, I have to get her from bed to the
17 wheelchair and from wheelchair to the toilet 20-times
18 a day and that is a very highly difficult job. 24-
19 hour shifts has affected our home care bodily health,
20 financial income and family happiness. They cause me
21 lack of sleep, reducing in eye sight, bone density,
22 our hands and legs or our limbs are having joint
23 issues, our family life, such as my husband-and-wife
24 life has done much worse than before.

25 While you guys are sitting home enjoying your
family life, we are changing your grandma and

3 grandpa's diapers and giving them teas. We are
4 paying severe prices and getting only 13 hours of
5 wages, equal to 13 hours of wages. That means, we
6 are working 11 hours more for free and the home care
7 company and insurance company are suppressing our
8 colored home care person to work for them and make
9 money for them day and night.

10 America should be a free democracy in justice and
11 fair country. How can they allow these kind of
12 inhumane, working arrangements to continue destroying
13 our colored women? So, here I am in support of City
14 Council Bill Number 0175 in getting rid of 24-hour
15 shifts and changing to 24 two shifts and capping the
16 working hours to 50-hours a week and not letting the
17 employer to unlimitedly forcing us to work long
18 hours. Thank you.

19 CHAIRPERSON DE LA ROSA: Thank you so much. So,
20 I do have a question for Assembly Member Epstein if
21 he's still on. Assemblyman, are you on? Yes.

22 ASSEMBLY MEMBER EPSTEIN: Yeah, I'm here Carmen.

23 CHAIRPERSON DE LA ROSA: Hi Harvey, how are you?
24 Quick question, has there been a cost estimate done
25 on your state bill as to the cost of -

3 ASSEMBLY MEMBER EPSTEIN: It's \$1 billion, half
4 would be federal dollars, half would be state
5 dollars.

6 CHAIRPERSON DE LA ROSA: You said \$1 billion
7 federal and half state.

8 ASSEMBLY MEMBER EPSTEIN: \$1 billion in total.
9 Half of it federal dollars. So, half a billion for
10 the feds and half a billion for state money.

11 CHAIRPERSON DE LA ROSA: thank you. I'll pass
12 the microphone over to Council Member Marte who has
13 some questions as well.

14 COUNCIL MEMBER MARTE: Thank you and I just want
15 to first thank the home attendants for being here and
16 speaking about your experience and you know, really
17 fighting for all your colleagues that are going
18 through this trauma day in and day out while
19 providing the care to our most vulnerable people.
20 So, thank you. Thank you Lai. Thank you all.

21 I also want to just quickly mention that the
22 people that we have testifying in support of this
23 bill, are people who have really focused their energy
24 and time on saying that this bill can work in the
25 city. Assembly Member Ron Kim is the Chair of the
Aging Committee and so, I want to ask, do you think

2 we can pass this bill in the City Council? And would
3 it help that effort in this state?

4 ASSEMBLY MEMBER KIM: Yes, I wouldn't be here
5 supporting this measure. We're here because we've
6 had time at the state to respond to this crisis and
7 we failed to meet the moment. So, we need at the
8 very local level, and in this case, the City of New
9 York, that directly oversees the billions of
10 contracts that we're giving to these agencies to
11 intervene and make sure that our workers are
12 protected and that would also inspire the state to do
13 the right thing moving forward.

14 COUNCIL MEMBER MARTE: Thank you and one question
15 to Assembly Member Harvey Epstein to clarify some of
16 his colleague statements earlier today. All of 24-
17 hour shifts happen in New York City. They are rarely
18 found outside of the city jurisdiction. Is that
19 correct?

20 ASSEMBLY MEMBER EPSTEIN: The vast majority of
21 24-hour shifts are in New York City Councilman Marte,
22 exactly what you said. There are, I mean, I have
23 heard of shifts outside of New York City, but the
24 vast majority are in New York City.

3 I also want to thank the home health care
4 attendants who testified and for their struggle as
5 well. I mean, they're the ones that experience the
6 wage theft and the abuse of the system. So, really
7 applaud their effort to come forward today.

8 COUNCIL MEMBER MARTE: Yeah, thank you. That's
9 my questions for now.

10 CHAIRPERSON DE LA ROSA: Thank you. Council
11 Member Nurse.

12 COUNCIL MEMBER NURSE: Thank you Chair. I also
13 want to thank everybody who is here to testify today.
14 Two questions and then one question for some of the
15 home aide workers. The first one is to Assembly
16 Member Ron Kim. Uhm, you testified that after 42
17 agencies were found to owe billions in back wages,
18 1199 lawyers cut an agreement on the workers behalf
19 for pennies on the dollar. The DCWP rep did disclose
20 that \$18 million was the settlement but what is the
21 true value that would have been? If you're saying
22 pennies on the dollar, what is the true value of the
23 labor that should have been paid back?

24 ASSEMBLY MEMBER KIM: It's our estimate based on
25 both the labor and the industry have evaluated this
number that is roughly around \$6 billion going back

3 many, many years that these workers are owed of back
4 wages.

5 So, when you calculate what the settlement looks
6 like, it's woefully low based on what they're owed as
7 individuals. The remedy— in other words, they got
8 the verdict correct but the remedy is woefully low.

9 COUNCIL MEMBER NURSE: Thank you for that. And
10 just would love to hear your thoughts on the
11 political will of the state to fill in the gap. So,
12 should we pass this and let's say we move to split
13 shifts, what is the political will of this state to
14 fill in that gap to cover the cost required to
15 adequately staff the clients that need this service?

16 ASSEMBLY MEMBER KIM: Uhm, I join my colleagues
17 in whatever the gap looks like. We have enough
18 revenue streams in my opinion that we can collect as
19 a state to make sure that we guarantee the wages
20 moving forward as we split shifts.

21 This is something that we have the political
22 will, we just need to administer and execute moving
23 forward. We're not — although it seems like an
24 intimidating number when we see and hear about
25 billions, but it's not compared to the lump sum
amount of money that we get when our revenue streams

3 as the state of New York. And the home care
4 attendants, as well as the clients deserve every cent
5 of the money that we should be fighting for.

6 COUNCIL MEMBER NURSE: Thank you. My next
7 question and it will be my last, is for the workers.
8 So, please help me out translation. I had asked
9 earlier DCWP about the mechanisms of reporting. When
10 your sleep or meal times are interrupted. So, I'm
11 curious, there wasn't an answer from them and I'm
12 curious to hear from the workers. When your sleep is
13 interrupted and you're you know compelled to support
14 your clients or your meal time is interrupted, how
15 are you reporting that? And how long between the
16 interruption and the reporting is it generally?

17 And then my, tied to that is, how often do you
18 not report it because of whatever barriers and what
19 are those barriers?

20 XIAO WEN ZHEN: [SPEAKING IN CANTONESE 2:14:52-
21 2:15:33].

22 LAI YEE CHANG: [SPEAKING IN MANDARIN 2:15:34-
23 2:15:43].

24 INTERPRETER: So, if I submit that law, I will be
25 immediately fired.

2 COUNCIL MEMBER NURSE: And so, that's submitted
3 by paper or through some payroll system?

4 INTERPRETER: The law is to be filled and submit
5 to the company.

6 COUNCIL MEMBER NURSE: Thank you so much. Thank
7 you for testifying.

8 CHAIRPERSON DE LA ROSA: Yes, I want to thank our
9 colleagues for testifying as well as the workers.
10 Thank you for coming out. It's important for you all
11 to tell your experiences and your stories, so thank
12 you all for being here. This concludes this panel.
13 Thank you so much.

14 INTERPRETER: Ms. Chan has something in addition
15 to add.

16 CHAIRPERSON DE LA ROSA: Go ahead.

17 [INTERPRETER SPEAKING WITH LAI YEE CHAN IN
18 MANDARIN]

19 INTERPRETER: So, they used to not have those
20 logs and then they work - uhm, at some point, they
21 started asking for these kind of logs.

22 COUNCIL MEMBER NURSE: I'm sorry, the workers
23 asked for the logs? The workers asked for the logs,
24 or the employers did?

2 INTERPRETER: What Ms. Chan was saying is that
3 the logs at some point started. The company started
4 requiring the employees to fill out those logs.

5 LAI YEE CHAN: SPEAKING IN MANDARIN 2:17:10-
6 2:19:40].

7 INTERPRETER: So, at one time, I uhm, I had a
8 four way connect through phone call with myself and
9 the representative from the union. Also, CPC's uh,
10 nurse, Nurse Lee and also the patient that I was
11 serving at the time. So, we had this conversation
12 about the work hours and the situation at that time
13 and then, the patient spoke out of my benefit, saying
14 that you know, I don't want Ms. Lai Yee Chan, which
15 is me, to work as long, that long time. So, CPC's
16 nurse Lee, who took it as in uhm, she doesn't want me
17 to work instead of you know as what the patients
18 actual meaning being, I don't want her to work that
19 long hour.

20 So, and uhm, in the end, they didn't change the
21 fact. They changed it to two 12-hour shifts, which
22 is 24 hour two shifts instead of 24 hours and then
23 they offer many other ways. I'm the only person that
24 raised this question or who dare to raise this issue
25 with the company. Because other people are so afraid

3 of the retaliation of getting fired. I was one of
4 the only person who is there enough to actually spoke
5 of it.

6 LAI YEE CHAN: [SPEAKING IN MANDARIN 2:21:24-
7 2:21:28]

8 INTERPRETER: And I do have a proof here, it's a
9 text with the patients name, address, phone number
10 and the shift schedule and the detail of the shift
11 saying that is long work, which is 24-hour, from
12 eight to eight and it tells me when to start. Thank
13 you.

14 CHAIRPERSON DE LA ROSA: Thank you so much.
15 Thank you for coming and for telling your stories.
16 Thank you.

17 INTERPRETER: SPEAKING IN MANDARIN 2:21:56-
18 2:21:59]. Thank you very much.

19 CHAIRPERSON DE LA ROSA: Thank you. Thank you so
20 much. Up next, we will have the next panel. A
21 reminder, we're switching to two minutes per person
22 for the remainder of the panels. So, I will call
23 Nina Bakoyiannis. Sorry if I mess up your name.
24 Jose Hernandez, Jessica De La Rosa, Marci Johnson.
25 Marcus, sorry about that. Marcus Johnson. Jessica

3 Tambor, TK Small and Mary Lister (SP?). Thank you so
4 much.

5 Okay, so the Sergeant at Arms will provide a
6 wireless microphone to pass for all of the
7 individuals up in front and then Mary Lester will
8 testify from the seat here. Mary, if you're still in
9 the audience, please come over to - oh, she has left,
10 okay. Okay, thank you so much for your patience. We
11 know it's been a long hearing.

12 Alright, I just want to remind folks that anyone
13 can submit written testimony to
14 testimony@council.nyc.gov up to 72 hours after the
15 conclusion of today's hearing and we will begin when
16 you're ready.

17 T.K. SMALL: Thank you Ms. Chairwoman. My name
18 is T.K. Small. I'm an attorney. I work in
19 Disability Rights. I've been practicing health care
20 policy for probably 30 years. I'm not going to read
21 my remarks. I'm just going to speak and have a
22 dialogue with members of the Council and try to
23 answer your questions. I would first like to point
24 out that there's an immediate potential consequence
25 to this rule that puts people like me in serious harm
and jeopardy of being put into a nursing home.

3 As a kid, I have spent nine and a half years in a
4 hospital, and I can tell you from first-hand
5 experience that I'm not going back. Alright, so, one
6 way or the other, I will make things work but if I
7 have to die, I will die in the humanity of my terms.
8 And I'll point out that this whole situation is
9 probably illegal as Assembly Member Gottfried said.
10 This is state law that this law is in contradiction
11 to, so in a way it's a waste of everyone's time and
12 effort.

13 I support the idea of workers being paid for 24
14 hours when they work but not when it comes at the
15 potential jeopardy of people like me and others in
16 the disability community being forced back into
17 institutions. I was at the Supreme Court decision
18 arguments in the Olmstead Case. I was there to hear
19 [INAUDIBLE 2:26:44 of the INAUDIBLE 2:26:46]
20 education. This is a matter of civil rights for
21 people with disabilities. That's why I started my
22 career at the Brooklyn site for independence under
23 disabled and for us, this is not just some joke.

24 Our lives are at stake. And so, you know,
25 pointily I find the situation a bit insulting that
the disabled community hasn't been more proactively

3 listened to and allowed to be at the table for these
4 discussions. There's a saying in the disability
5 rights community, nothing about us without us. But
6 we haven't been invited to the table and then fought
7 for it to this committee and members of City Council.
8 We've been discounted. So, I'll say that I'm only
9 really involved with this particular fight, but it is
10 a fight and we're not going away. We fought to get
11 out of nursing homes, we will fight this day in the
12 humanity and policies and proposals that put our
13 lives and our freedom in jeopardy will not be
14 tolerated.

15 So, I've had home care in the community for my
16 entire adult life. I've worked for a fiscal
17 intermediary as the Director of Policy. I was
18 involved with the Medicaid redesign team, and I can
19 tell you, this proposal is not a great idea. Thank
20 you.

21 CHAIRPERSON DE LA ROSA: Thank you so much.
22 Thank you.

23 JOSE HERNANDEZ: Hello and thank you. My name is
24 Jose Hernandez, and I would like to first thank the
25 City Council for allowing me to share my story on why
Intro. 0175 scares me.

3 I experienced a spinal cord injury back in 1995
4 when I was just 15 years old. Initially when I was
5 released from the hospital, I was authorized a two
6 12-hour shift. A year later, after being home, a HRA
7 worker came into my home and gave me an ultimatum.
8 He said, sign paperwork to convert my case to a 24-
9 hour live in case or go into a nursing home.

10 Uhm, as a scared teenager, I signed the forms and
11 had a live in case for the next 16 years. In 2008, I
12 met one of the most impactful home care workers I
13 have ever – to have ever entered my life. When
14 Fausto started working for me, he started as a 24-
15 hour live in worker. In fact, I am here right now
16 because of the role he played in my life. You will
17 hard pressed to find people more committed to the
18 intent of this bill than people with disabilities.

19 We know our freedoms are tied directly to our
20 workers but while I and most people with disabilities
21 believe in the intend is behind Intro. 0175, it
22 returns me to the trauma caused by that HRA worker
23 26-years ago. People with disabilities have
24 struggled for many years to justify their existence
25 to society and their desire to live in the community.
People with disabilities and older adults who have

3 been authorized 24-hour live in services are going to
4 go without much needed care or be placed in nursing
5 homes because of Intro. 0175. The law will force the
6 abandonment of people with disabilities and older
7 adults who will have no choice but to be placed into
8 institutions.

9 Some argue that this is not the bills intent.
10 Intent does not determine outcome. Intro. 0175 will
11 not change state Medicaid rules. People with
12 disabilities and seniors will still be authorized 24-
13 hour live-in services. In some cases, by HRA.

14 Intro. 0175 cannot make their 24-hour live-in
15 cases, split cases and people will go without much
16 needed care. If we are serious about protecting home
17 care workers, people with disabilities and older
18 adults, we must work together to advocate with
19 Assembly Member Epstein and Senator Persaud to do
20 this the right way in Albany. And part of my
21 testimony, I'm including a legal brief from
22 Disability Rights New York. They asked them as a
23 client to weigh in on the legality of Intro. 0175 and
24 they're not opposing or supporting it. They are just
25 saying that you know, it might be illegal under

3 federal statutes of the American's with Disabilities
4 Act. Thank you.

5 CHAIRPERSON DE LA ROSA: Thank you so much.

6 JESSICA DE LA ROSA: Hi, I'm Jessica De La Rosa.
7 So, here we go again right. Every single month,
8 people with disabilities are gathered to defend our
9 rights to live equally. Today, it's to bring
10 attention to Intro. 0175. The Disability community
11 has reached out to your offices several times to try
12 and explain why Intro. 0175 would force us into
13 nursing homes. And to tell you why we want to live
14 in the community. You ever thought that no one but
15 seniors and people with disabilities have to defend
16 their right to live in their home?

17 I am a person with a physical disability and so
18 is my mother. I also live in a building similar to
19 senior housing.

20 CHAIRPERSON DE LA ROSA: Hold on one second. I'm
21 sorry. Can we please have quiet. Go ahead please.

22 JESSICA DE LA ROSA: Uhm, I also live in a
23 building similar to senior housing, where people with
24 disabilities also live. My mother, my neighbors and
25 I rely on home care workers to live independently. I
work full time. I drive. I pay my taxes. I

3 contribute to society just as all of you here. The
4 only difference is my mom, my neighbors, my disabled
5 community members and myself rely on the arms and
6 legs of our home care workers to be the extension of
7 our bodies where our bodies don't work the same.

8 Our disability care needs do not end after 12
9 hours, especially as we have been authorized for 24-
10 hour live-in service. That are is still very much
11 needed. Live in 24-hour home care cases are still
12 going to be authorized to many individuals with
13 disabilities and seniors who qualify for it. Intro.
14 0175 will not convert cases to two split 12-hour
15 cases. On the contrary, it will force the
16 abandonment of people with disabilities and seniors
17 who are going to have to fight - figure out, I'm
18 sorry. How to figure out how to take care of
19 themselves or be forced into nursing homes.

20 Many home care workers are people of color who
21 already struggle to provide for their families
22 because of inflation and living in New York City. As
23 a result of the 50-hour limit to Intro. 0175 and the
24 loss of overtime, these families are going to be
25 forced to work for multiple agencies and additional

3 hours, just to maintain the same income they would if
4 they had overtime.

5 People with disabilities and seniors have
6 recognized for a long time that our home care workers
7 are essential. It is time that our government also
8 recognize them as essential workers. However, people
9 with disabilities and seniors should not be
10 sacrificed while doing that. In order to recognize
11 our home care workers and protect people with
12 disabilities like me and the seniors who live in my
13 building, who wish to remain living in their homes,
14 we need to accomplish this in Albany. I'm a
15 constituent of Assembly Member Epstein who has been
16 working on A 3145A that would protect everyone
17 without sacrificing anyone.

18 CHAIRPERSON DE LA ROSA: Thank you.

19 NINA BAKOYIANNIS: Hi everyone, my name is Nina
20 Bakoyiannis and I'm here with Downstate New York
21 ADAPT. While Intro. 0175 is well intentioned, it is
22 deeply flawed. We agree that our home care workers
23 deserve better, but this bill is not the solution.
24 First, there are many logistical issues with this
25 bill. Medicaid is a state and federal system. Even
if this bill passes, the state will continue to

3 assign disabled people live in care. This bill
4 doesn't take that away from us. So, agencies will
5 either refuse to take on our cases when this happens
6 or get fined for doing so and we have to keep in mind
7 that managed care organizations are incentivized to
8 assign live in cases instead of split 12-hour shifts
9 because they only pay our workers for 13 hours of
10 work for live in care, which is absolutely
11 disgusting. Yet this bill does nothing to address
12 the root of this problem. It will only force
13 disabled folks that are assigned live in care to not
14 receive services and be at imminent risk of getting
15 institutionalized.

16 Additionally, in the consumer directed model of
17 home care, disabled people are joint employers who
18 hire, fire and schedule our home care attendants. If
19 this bill passes, is the City Council really prepared
20 to argue that a disabled person who is already low
21 income because we're on Medicaid should get fined
22 along with our FI? And let me ask you this, do you
23 plan on signing all of your rich donors with live in
24 nannies or is it just low-income disabled folks that
25 you're ready to throw under the bus?

1 The outpouring of support for this bill
2
3 demonstrates just how little our City Council
4 understands Medicaid policy and that's disturbing.

5 Secondly, the rhetoric around this bill is
6 problematic. Discussing our most intimate care needs
7 that inhumane, sweatshop work frames us as the
8 problem and minimizes the highly skilled workforce
9 that is our home care attendants, both disabled folks
10 and our home care workers are just trying to survive,
11 pitting two marginalized groups against each other is
12 never the solution. It allows the real perpetrators
13 of harm to run scot-free while we're all sitting here
14 in this room pointing fingers at each other.

15 Thirdly, do not be fooled that this bill will
16 help our home care attendants. These women are
17 already struggling to pay the bills. It's taking
18 away their right to choose overtime with no
19 resolution, no wage increase and no other
20 opportunities really helping. It's forcing them to
21 get an additional evening job to make up for the
22 hours of pay you all took away from them really
23 helping?

24 If this City Council really respected women and
25 wanted to uplift them, they would be getting at the

3 root of predatory capitalist systems that leave so
4 many women of color low-income. They would be
5 creating more opportunities for women in order to
6 give them real choice about when and where they want
7 to work, so they don't feel forced to do 24-hour care
8 if they don't want to.

9 They would be fighting to raise wages and for
10 people who work 24 hour shifts to get the full pay
11 and I'm sorry but where were all of you when this
12 disabled constituents were up in Albany getting
13 arrested while protesting to raise wages for home
14 care workers? Do not act like you're coming to our
15 rescue now. We've been at this fight. And
16 Councilman Marte, I know, I know this bill comes from
17 a very personal place. I understand that you spoke
18 publicly about your mother as a home care worker, and
19 I understand that, but I want to remind everyone
20 still supporting this bill that we need legislation
21 not based on emotions and optics. We need it based
22 on a clear and distute understanding of Medicaid
23 policy that is rooted in deep respect for disabled
24 people and our workers. This bill is a hallow
25 attempt to appear invested in workers' rights while
instead patronizing them for choose to work overtime

3 and limiting our access to care during the national
4 home care shortage. There are many smart ways to
5 move forward and this ain't it. Thank you.

6 CHAIRPERSON DE LA ROSA: Thank you. Thank you so
7 much. Thank you so much. Shhhhh, please and let's
8 try to hone in two minutes. Thank you.

9 MARCUS JOHNSON: Good afternoon New York City
10 Council. My name is Marcus Johnson. I'm from Civics
11 League for Disability Rights and Independence Care
12 System. Thank you for this opportunity for a change
13 to voice my deep concern regarding Intro. 0175-2022.

14 CHAIRPERSON DE LA ROSA: Sorry, one second
15 Marcus. Give me a second. Can we please be quiet so
16 that we hear Marcus. He waited patiently, please.

17 MARCUS JOHNSON: Maximum working hours for home
18 care aides. I feel very strongly that this well-
19 intentioned bill is actually one that will be a great
20 disservice to people with disabilities, and will
21 adversely impact their health, independence, and the
22 crucial live-in services they receive in their
23 communities.

24 I am a member of the Civics League for Disability
25 Rights, a group of New Yorkers with disabilities and
their supporters. The League remains committed to

3 advocating for the constitutionally guaranteed right
4 of people with disabilities to live independently in
5 our communities. We strive to educate our community,
6 assist New Yorkers with disabilities in being
7 effective advocates, and amplify their voices to
8 secure services and supports we need to live our
9 lives.

10 For as long as I can recall, home care has always
11 been under attack. Year after year, people with
12 disabilities unite to protest cuts to services and
13 programs that ensure our health and independence,
14 which we greatly value. This bill is no exception,
15 and I implore you to reconsider it and fine tune this
16 bill to make sure people with disabilities are
17 provided the support they need to live their lives.

18 This bill will negatively affect the disability
19 community, in many ways. This bill, as it stands,
20 would impact roughly 100 of our members, who would
21 lose access to live-in home care and, ultimately,
22 have no choice but to enter nursing homes, something
23 we greatly oppose. This is especially problematic
24 because many of our members are adults with physical
25 disabilities, not frail, elderly individuals living
at home. Many are active and young, well below the

3 age of 65, and live independently on their own, away
4 from their families. They need live-in services to
5 continue thriving independently, in their
6 communities, without having their autonomy restricted
7 and the hours of their home care aides limited.

8 Those who require a number of home care hours
9 from their trusted aides would see reduced support,
10 especially with the bill's 50-hour limit. This would
11 put aides in a terrible position, where they would
12 have to work through multiple agencies to deliver the
13 same hours of care, despite the fact that, as
14 consumers, we can only work with one agency.

15 To cap aides' hours and penalize agencies with
16 workers provide more than the 12 hours of care daily
17 to a population that is already marginalized and
18 vulnerable, insulting, unfair, and unacceptable.

19 Another issue with the bill is the proposed fines to
20 home care agencies of \$500 per day for any instance
21 where they send an aide to work 12 hours or over 50
22 hours per week.

23 This is a problem because state and local
24 agencies using Medicaid guidelines set home care
25 hours, not the agencies. And who is on the receiving
end of the issue? I am. We are. Again. If agencies

3 conclude they don't want to incur the fines, or
4 cannot afford them, people with disabilities take the
5 hit. Much needed care will end. Some will have no
6 choice but to enter nursing homes, places where
7 independence dies and where the way we want our
8 health needs to be handled far too often not taken
9 into consideration. Enough is enough. We need to do
10 better. We need a solution that preserves quality of
11 care for people with disabilities. We need a
12 solution where aides receive the equitable, living
13 wages they need and deserve to support themselves and
14 their families.

15 This bill is not that solution. Aides providing
16 essential services to one of the state's most
17 vulnerable populations should not have their weekly
18 hours capped. People with disabilities depend on
19 these services now more than ever.

20 I strongly encourage you to rethink this
21 legislation, and to connect with disability leaders
22 and advocates, including leaders from Independence
23 Care System and Consumer Directed Personal Assistance
24 Association of New York State, to understand the
25 perspective of people with disabilities and gain
insight into the ways this bill can be re-worked to

3 support all parties. I also encourage you to connect
4 with state legislators and work with them to making
5 changes at the state level where these Medicaid-
6 related issues must be resolved.

7 CHAIRPERSON DE LA ROSA: Thank you so much.

8 JESSICA TAMBOR: Good afternoon. My name is
9 Jessica Tambor and I have had a disability my entire
10 life. Without home care, I would not be able to live
11 at home because there is no way my dad would be able
12 to care for me all day by himself. It is because of
13 all the home care that I have had my whole life that
14 I have been able to live with my dad at home and be a
15 very active member of my community.

16 [INAUDIBLE 2:44:57] than it would be harder to
17 find home health aides that would want to do the job
18 because they wouldn't make enough money working so
19 little hours. And it's already very hard to find
20 people who want to do this job. Eliminating live in
21 care with people with disabilities of all ages and
22 senior citizens like my grandma who has live in care.

23 Without live in care, they will wind up in
24 nursing homes. If home care hours are limited, than
25 we would need even more staff per person and there's
not that many home care workers to go around for all

2 of us who need all of those hours and all that staff
3 to fill in the hours of the week. This is another
4 way we would be forced into nursing homes. We need a
5 better solution.

6 CHAIRPERSON DE LA ROSA: Thank you. Thank you.
7 Uhm, we do have some questions from our colleagues
8 here. We have a question from Council Member Marte
9 followed by Council Member Nurse.

10 COUNCIL MEMBER MARTE: Thank you for your
11 testimony and thank you for sharing your lived
12 experience. I only have one question. Right now, as
13 I said before, this mostly almost entirely happens in
14 New York City. There's other disability groups
15 throughout the state that have two, 12-hour shifts
16 and they're not being forced into nursing home. Do
17 you not believe that it is possible to have two 12-
18 hour shifts and live at home?

19 JOSE HERNANDEZ: Live in cases happen throughout
20 the state. I have a two 12-hour split shift right
21 now. I was able to advocate for that after the fact.
22 But that's not changing the fact that HRA workers and
23 city and state workers are still authorizing these
24 cases. I'm an advocate now and I could advocate for
25 having the two split shifts but for those who don't

2 know or are authorized for the live in cases, that's
3 where the Intro. 0175 is flawed because it doesn't
4 automatically split their case. It only makes it
5 illegal for an agency to send that person to that
6 home, a patient or consumer, whichever one you want
7 to call us but without that care, we end up in
8 nursing homes.

9 So, if there was additional funding in Albany to
10 split the cases, then all for it. You know, 12 and
11 12 would be a lot more beneficial for everyone. For
12 the worker, for the patient and I'm not arguing that
13 fact. You know the intentions of the bill are sound,
14 but it can't be done on a city level. That's where
15 we're arguing that.

16 COUNCIL MEMBER MARTE: Just my last question,
17 sorry.

18 CHAIRPERSON DE LA ROSA: Go ahead, sorry.

19 COUNCIL MEMBER MARTE: You know, Assembly Member
20 Harvey Epstein is one of the greatest disability
21 advocates in Albany and he supports this bill. He
22 said this bill will actually push the state to make
23 sure that they can pass their bill on the state law.
24 Do you disagree with him?

3 JOSE HERNANDEZ: I disagree that this bill will
4 not. It will not force the state to do anything.
5 The state is going to do what the state does, right.
6 And I was in a meeting with Council Member Restler
7 right, and it was demoralizing to me because as a
8 person with a disability who has been disabled for 27
9 years, right, he says kind of nonchalantly, if this
10 bill passes, we can use it as leverage to force the
11 state to negotiate.

12 That leverage that he's talking about is the
13 lives of people with disabilities that are going to
14 be in jeopardy while the state and the city figure
15 this out. And we can't do that. We don't have the
16 luxury of time in between us. You know, we're going
17 to end up in an institution and for those who end up
18 really sick are going to die.

19 You know this is not a game for the city and the
20 state to be fighting over our lives. We shouldn't be
21 used as ammunition or leverage the way Council Member
22 Restler put it to force anyone to negotiate. The law
23 should not protect one class while condemning another
24 and this is what 0175 will do. It will condemn
25 people with disabilities to go without care or be
placed in institutions.

3 T.K. SMALL: yes If I could quickly respond to
4 Council Member Marte. Uhm, I used to have 12-hour
5 care per day and then my father had a stroke, and he
6 couldn't do the night time work for me anymore. So,
7 I called the city social worker and said, look, my
8 father is in the hospital. I can't go without care
9 for the other 12 hours. Can you authorize more care?
10 She said, okay, hang on. She said, let me call you
11 back. She called me back within like a half an hour
12 and at first said, okay, we'll give you a sleep in.

13 Now, my care is very complicated. I'm about as
14 disabled as anybody in this room. I need help with
15 everything. I have a shrink; I have an evaporator.
16 I have a social machine. You know, my care is way
17 more complicated than a 24-hour sleep-in situation.

18 I said, no, that's not good enough. I need split
19 shifts, 24-hour care. And they authorized it right
20 away. They listened to me. They said OKAY, you're
21 right. Objectively, you need more care than the
22 sleep-in situation with day pay.

23 In the panel immediately before this one, one of
24 the home care workers said that she used to do sleep
25 in and then the consumer complained and got an
increase in authorizations. So, honestly, there are

3 cases that it's completely inappropriate and wrong to
4 do sleep in care, but you know the consumer has an
5 obligation to advocate for that worker as well.

6 If the care is too complicated, there is a
7 process where the authorization can be changed. So,
8 I mean certainly, I want workers paid for their time
9 they get away from their families, but this idea is
10 putting our lives in jeopardy. And as Jose just
11 said, we don't want to be pawns in a bigger fight.

12 CHAIRPERSON DE LA ROSA: Thank you. Council
13 Member Nurse.

14 COUNCIL MEMBER NURSE: Thank you all for
15 testifying. Really appreciate hearing your
16 perspective. I did have one question, which I think
17 might have been answered but I'm not fully sure. I
18 guess I was curious from your experience the
19 difference in quality of care from a 24-hour shift to
20 a split shift. If you could speak to the quality of
21 that. I think that was just answered but I'm not
22 sure.

23 JOSE HERNANDEZ: I will attempt to answer that
24 question. I had a live in case at one time and my
25 home care worker of 12 years Fausto, he started
initially with me as a live in worker and then

3 transitioned into a split shift. You know, he used
4 to work five days, 12 hours. When at a living case,
5 he used to work with me four days straight.

6 As far as the quality, it varies from day to day
7 and yes, there were some days that were a lot more
8 difficult because for whatever reason, I don't know.
9 I had a bowel accident in the middle of the night,
10 and he had to you know assist me. So, with the two
11 split shifts, I didn't feel as guilty or I don't feel
12 as guilty as calling on my person and saying listen,
13 I'm sorry I have to interrupt you in the middle of
14 the night to take care of me because I have a split
15 shift.

16 You know, for someone that's you know working 24
17 hours, I also have to you know take into
18 consideration their time and they're with me 24
19 hours. So, it's kind of a relationship you have to
20 play you know, you're in there with your home care
21 worker. You have to also care for them as they care
22 for you. So, yes, it's a give and take. So,
23 hopefully I was able to answer that question.

24 COUNCIL MEMBER NURSE: No, you answered that. I
25 would just say in general; do you feel that one or
the other is better?

3 NINA BAKOYIANNIS: I just wanted to add one thing
4 too. I mean, I think that the complicated question
5 to answer because disability is so variable and you
6 know personalities are so variable right, but I think
7 something maybe I didn't center enough in my speech
8 is that we're already in such a home care shortage.
9 I have friends that are sleeping in their wheelchairs
10 at night because they can't find one home care
11 worker. If we get rid of live in, now we're asking
12 them to find two to three for one day.

13 This is a conversation that is way too large for
14 City Council to be having and that's the truth. A
15 lot of protections, if something like this goes into
16 place, so many protections need to be happen. So,
17 many discussions need to be had at the state level.
18 We need an increase in wages. We need to you know to
19 incentivize this workforce. We need so, so, so, much
20 that I'm sorry, City Council just isn't equipped or
21 prepared to do and that's okay because we need you
22 guys to pass the message up to the state, right. It
23 is a lot more complicated than this.

24 COUNCIL MEMBER NURSE: Thank you.

25 JOSE HERNANDEZ: I want to add one thing, that
you know, uhm, I stated in my testimony I had a home

3 care worker that worked with me for 12 years. More
4 important to me than even my father is right now, and
5 my father is alive. He died at the beginning of the
6 pandemic to a state that doesn't consider them
7 essential and for minimum wage. I am literally here
8 and as successful as I am because of my home care
9 worker.

10 So, I am sensitive to what you're trying to do
11 Marte. I really am but like I stated before, you
12 can't protect one while sacrificing the other.

13 JESSICA TAMBOR: Adding to what Nina was saying,
14 it's very hard to find a lot of home care workers.
15 Like because I'm on a vent also and it takes a lot of
16 people to do it and there's a lot of shifts that get
17 unfilled. Yeah.

18 CHAIRPERSON DE LA ROSA: Thank you. Is that all
19 colleagues? Alright, well, we thank you so much for
20 taking the time to tell us about your experiences.
21 This is informing us in our decision making and we
22 appreciate your time and your patience here today.
23 Thank you for coming. Thank you.

24 We're going to call Mary Lester, who is testify
25 virtually but I also want to inform that we will need
the Fujianese interpreter for the next panel. I know

3 they're in the Committee room, if that interpreter
4 can come making its way over, that would be helpful.

5 And Mary, I know you're virtual. When you're
6 ready, please start.

7 MARY LESTER: Hello, can you hear me?

8 CHAIRPERSON DE LA ROSA: We can hear you Mary.
9 I'm going to ask for a little bit of quiet in the
10 Chamber as we transition.

11 MARY LESTER: Thank you very much for allowing me
12 to participate virtually.

13 CHAIRPERSON DE LA ROSA: Hold on one second Mary.
14 Hold on one second. Alright, hold on one second.
15 Alright, go-ahead Mary. Sorry about that. Can you
16 speak a little louder, as loud as you can, thank you.

17 MARY LESTER: Thank you for allowing me to
18 testify virtually today. I did travel down to
19 Buffalo to be able to be there in person but
20 unfortunately due to the timing, I did have to leave
21 to catch my plane.

22 I have been a home care worker for nearly ten
23 years. I've worked with individuals with
24 disabilities. I've worked with individuals with
25 Alzheimer's. I have worked with all sorts of
different people who need in home care. I have never

3 had to work a 24-hour shift. Upstate, we do have
4 some individuals who require 24-hour care but the 24
5 hour "live in" is very, very rare, if not you know
6 completely extinct at this point up state because the
7 fact of the matter is, it's not the best care. And
8 frankly, I think the panel that just spoke before me,
9 did a good job of demonstrating that.

10 That's the only reason someone gets approved for
11 24-hour care is if they may need care in the evening
12 at some point. And so, having split shifts would
13 make that a lot more possible.

14 I've been part of the Ain't I Woman Campaign for
15 close to seven years this point, and I have
16 personally testified to the New York State on a New
17 York State level to the legislature. This bill is
18 that bill and this bill has been neglected on the
19 state level because New York City is the only place
20 that's it's happening. I've talked with many other
21 home care workers through the Queen City Worker
22 Center who say that there is no way that they would
23 work the 24-hour shift if they were to come to
24 Buffalo because they do have families and they do
25 have health needs of their own.

3 And in fact, the disability education and
4 advocacy network of western New York, which is made
5 up of people with disabilities, advocates, people who
6 are home care workers like myself. People who work
7 for social service agencies, the Disability Education
8 and Advocacy Network of Western New York has actually
9 been one of the staunchest supporters of ending the
10 24-hour day.

11 Sleep deprivation can lead to a similar
12 impairment as being drugged. We wouldn't say, as
13 long as the client and the worker agree, the worker
14 can come on drunk to the job. That's not safe.
15 That's not something that would become allowed to be
16 a standard. If you are awake for 24 hours, which
17 will happen sometimes if you're doing a 24-hour live-
18 in shift, it's equivalent to having a .1 percent
19 blood alcohol content, which would mean you would be
20 unable to drive safely.

21 So, I want to encourage us all to think about
22 that this is you know just as important for us to
23 make sure that the standards in New York State are
24 safe, both for the workers and for the clients.

25 Thank you very much.

2 CHAIRPERSON DE LA ROSA: Thank you so much for
3 testifying today Mary. Up next, we need the
4 Fujianese interpreter. We are going to call Bao Jin
5 Qiu, Gui Zhu Chen, Mary Somoza, Somoza, sorry about
6 that. Mahir Rahman, Helen Schaub, and Francisco
7 Javier Castillo to the next panel.

8 Is Mary on the panel? Mary Somoza? Oh, okay
9 Mary, you're here. Let's see, we have Mahir Rahman?

10 MAHIR RAHMAN: Yeah, here.

11 CHAIRPERSON DE LA ROSA: Here, perfect. Helen
12 Schaub and Francisco Javier Castillo from 1199, are
13 you present? You're remotely? Okay, we'll begin as
14 soon as the interpreter is ready, just give us a few
15 minutes.

16 Alright, we're going to start with Mary since
17 she's ready to go. Mary, are you ready?

18 MARY SOMOZA: Okay, hi. Uhm, my name is Mary
19 Somoza, and I am the mother of twin daughters
20 Anastasia Somoza and Alba Somoza. present here
21 today. Anastasia would have testified today but she
22 worked for the City Council, and she just left in
23 May, and she was the first disability coordinator
24 for all the Council under Speaker Corey Johnson.

3 The reason I am here today, first of all, I'd
4 like to say, I'm not going to read this because I can
5 pretty much say it off by heart. I will submit my
6 testimony but basically, we're in agreement with
7 Council Member Marte in as we believe this is very
8 well-intentioned that we trust and we believe our
9 workers deserve as much money as we can possible get
10 for them because without the workers, my girls
11 couldn't live the independent life that they live
12 today.

13 The problem here is we feel that this is all
14 happening without Council Member hearing our side of
15 the story, which is we have no control over how much
16 money our aides are paid. We are allotted a certain
17 number of hours and we work with the CDPAP program
18 where we, the family, and my daughters have to
19 recruit. We advertise, we recruit, we interview, we
20 hire, we train our workers and then we send them to
21 the agency. And all the agency does is pay their -
22 well, they do a lot of things, but they pay their
23 wages and their health care, but we do everything
24 else. And right now, we are struggling like and all
25 the families that I represent, a large number of
families of children, young adults and children with

3 disabilities across the state, who use self-direction
4 programs who we fought for many, many years to have
5 the ability to choose how we use our hours, what
6 times we use our hours and who we have in our homes
7 working with our family members. What we see here
8 with this bill is that we're losing control over what
9 we have fought so many years and worked day and night
10 to maintain, which is the independence and freedom of
11 my adult daughters who have significant disabilities.

12 And we support, we have testified before Assembly
13 Member Gottfried and Gustavo many, many times to
14 improve health care for all New Yorkers and what we
15 are against here is that the caps on hours because we
16 desperately tried to recruit workers. But sometimes
17 we don't have enough. And so, our workers work
18 longer hours, but they allot - many of them actually
19 request longer hours because they live in New York
20 City, rents are expensive, life is expensive here and
21 they need as many hours as they can get to make their
22 way in life. None of our workers work more than 12
23 hours a day. That's you know, not possible and what
24 we want to encourage the Council Members to think
25 about is the other - yes, we very much care for our
workers. But the population of people that home care

3 workers serve are the most vulnerable population in
4 the city. 95 percent are the elderly, people who age
5 into disability and that other five percent are
6 people with significant disabilities whose very life
7 depends on the ability to have that home care.

8 And so, this is our conundrum. Yes, we want our
9 workers to get paid well, but we do not have the
10 control over that. State has control, HRA has
11 control over what they earn and now our workers will
12 get a three dollar an hour I think increase in
13 October, but we wanted it to go up to \$21 and \$22 an
14 hour but state didn't have the money for that. So,
15 we're stuck with what we've got, and we have to work
16 with what we got and what we don't need is caps,
17 which would make me have to look for more workers,
18 which are already hard enough to find. The workers
19 that we have, we would have to have more because
20 their hours are capped. To the people who are
21 wanting and willing to work, and like I say, we don't
22 overwork our workers. They work normal hours to the
23 best of their ability, but we have to have the
24 ability to use our hours as we can to cover the
25 services of my daughters.

3 So, that's what I would like you to consider
4 today and we're all basically on the same side. It's
5 not that we're just against the legislation as it
6 stands because of the caps and because of the minimum
7 hours put on our workers.

8 CHAIRPERSON DE LA ROSA: Thank you.

9 MARY SOMOZA: And sometimes it's just not
10 possible to do that.

11 CHAIRPERSON DE LA ROSA: Thank you so much.
12 Thank you.

13 MARY SOMOZA: For my girls to survive. So, I
14 will submit my testimony, my written testimony and I
15 thank you for hearing us out today. I've got to get
16 them home now.

17 CHAIRPERSON DE LA ROSA: Thank you. Thank you so
18 much. I think we have Mahir Rahman. Yeah, if you
19 could stay, we're going to hear the whole panel and
20 then we'll ask a question. Could you stay a little
21 longer?

22 MARY SOMOZA: Pardon.

23 CHAIRPERSON DE LA ROSA: Can you stay a little
24 bit longer? Because there are some folks that have
25 questions. Okay, just wait a little bit so that we
can get some questions, okay.

3 MARY SOMOZA: Yes.

4 CHAIRPERSON DE LA ROSA: Uhm, Mahir.

5 MAHIR RAHMAN: So, uh, good afternoon to members
6 of the City Council and to the general public
7 listening here and live. My name is Mahir Rahman.
8 I'm a local community member from District 1, I want
9 to thank my dear family and Councilman Chris Marte as
10 well as the Assemblyman Epstein and other notable
11 folks who are elected officials among us. It's
12 because of them that we even had this hearing present
13 here in the first place. And you know, I was born
14 and raised between the lower east side and Chinatown
15 on Ellen and Grand Street where I still reside with
16 my family. And just to make it clear, uhm, the Ain't
17 I a Woman Campaign which has been doing the
18 grassroots work and organizing since 2019 and
19 continues to the present day, these are hundreds of
20 home attendant workers who have spoken up starting
21 with Lai Chan locally and in other boroughs have
22 begun to stand up for what I heard for the first time
23 in my life, the 24-hour workday. And when I first
24 heard of this, I couldn't believe it was even a thing
25 in any job the idea that someone, a mother, an aunt,
a sister, or a woman I never personally knew is

3 working without breaks 24 hours a day, days on end.

4 And I was struck by this whole necessity of how, if
5 this is even possible here in this local city and as
6 opposed to the whole New York State where mostly they
7 are following the state law. But here in New York
8 City, the immigrant woman of color you know, Chinese,
9 Latino home care workers even Bangladeshi home
10 attendant workers in Queens and the cases haven't
11 been as clear for them but they're working the 24
12 hour shifts as well.

13 It might not be as noticeable, it might be just
14 like, they're not many workers who are willing to
15 stand up and expose the system through talking about
16 the 24-hour shifts.

17 And though I'm not a woman or a home attendant,
18 the Ain't I a Woman Movement has opened my eyes to
19 what happens in this city that never sleeps. That
20 ultimately this is culture of overwork spreading to
21 every industry and workplace and it's most profound
22 effect is on those who have little choice, home
23 attendant workers.

24 And if you and I don't support them, how will we
25 sleep at night? Two opposing reasons to Intro. 175
is, this is a state issue. There's a shift to the

3 state issue, not effective enough for stopping wage
4 theft and that this will lead to a backlash on the
5 conditions of home care workers. But in reality, the
6 agencies themselves, big, profitable agencies,
7 themselves can really amend by the state level and
8 show how this violation of state law is really
9 profound.

10 And the split shifts that can be as a result of
11 Intro. 175 will actually encourage more home
12 attendant workers to enter the workforce going to the
13 future, where there won't be a need. They will see
14 that they will have more control of time in their
15 aspect. More control of time was better for the home
16 attendant workers and is better for the patients.

17 So, ultimately, I urge the City Council members
18 of this Committee to resoundly listen to the
19 testimony, listen to the following testimonials from
20 all the other home attendant workers and we see the
21 framework set up there with the state officials Ron
22 Kim and other supporting this. It is possible.
23 Let's get it done. Thank you.

24 CHAIRPERSON DE LA ROSA: Thank you. We'll go to
25 Bao Jin Qiu and Gui Zhu Chen.

2 BAO JIN QIU: Hi, [SPEAKING IN FUJAINESE 3:14:02-
3 3:14:26.

4 INTERPRETER: Hi everyone, friends, families. My
5 name is Bao Jin Qiu. I'm here today to say
6 something. I want to say that I wanted to cancel
7 this 24-hour shifts because if we continue this way,
8 we'll crush our body. We will demise our health.

9 BAO JIN QIU: Hi, [SPEAKING IN FUJAINESE 3:14:53-
10 3:15:15].

11 INTERPRETER: So, I started in 2011 and I started
12 as a 24-hour shift worker and I know it's going to be
13 difficult, but the company threatened me saying that
14 if I don't take this, than I won't be offered
15 anymore, any jobs.

16 BAO JIN QIU: Hi, [SPEAKING IN FUJAINESE 3:15:37-
17 3:15:56].

18 INTERPRETER: And you know how old the patient
19 that was given to me, he was 93. He has a broken
20 lung. He has to go through lung cleaning three times
21 a week and I'm the one who gets him there and gets
22 him back.

23 BAO JIN QIU: Hi, [SPEAKING IN FUJAINESE 3:16:19-
24 3:16:38].

2 INTERPRETER: And at first, you know how many
3 people it takes to take care of this elderly for a
4 week. We had three workers who it takes two days,
5 and I personally is the third one that takes three
6 days and for a couple months or a couple weeks, a
7 couple months or a half year, all the other two left,
8 so I am supposed to take all seven days, 24 hours of
9 job.

10 BAO JIN QIU: Hi, [SPEAKING IN FUJAINESE 3:17:16-
11 3:17:40].

12 INTERPRETER: And uhm, I kept on requesting the
13 company to look out for more people and they kept on
14 telling me to wait and the patient has to go through
15 lung cleaning and every night, he will ask to go to
16 the bathroom, even though he has nothing to pee. And
17 I have to go through that at least five times up to
18 eight times a night.

19 BAO JIN QIU: Hi, [SPEAKING IN FUJAINESE 3:18:08-
20 3:18:26].

21 INTERPRETER: And I kept on telling them that I
22 can't do it anymore and then the family is saying
23 that like, there's no one else besides you who can do
24 this. And I know that without my body health,
25 there's nothing no money can repay my body.

2 BAO JIN QIU: Hi, [SPEAKING IN FUJAINESE 3:18:47-
3 3:19:32].

4 INTERPRETER: And then later on, they brought
5 another two people in and one of them works one day
6 and then another person works two days a week and
7 then I take care of the rest and uhm, later on, he or
8 she, the patient, install some kind of pacer and then
9 the family tells me that you cannot speak loudly.
10 You cannot surprise her. You cannot scare her. You
11 know if once her heart stops, it will not be again.
12 So, I live, or I work in fear because of all of these
13 like, I just can't do it anymore.

14 BAO JIN QIU: Hi, [SPEAKING IN FUJAINESE 3:20:12-
15 3:21:02].

16 INTERPRETER: And later on, those two left as
17 well and then I had to - I work day and night without
18 taking a day off and then later on, I had to ask my
19 uncle's daughter, which is my cousin to come in and
20 fill in three of those days. So, she worked three
21 days, and I worked four days and for the longest
22 time, we you know, slowly I worked for her - worked
23 for this family for seven years up until she is 100.

24 And at this one incident that happened when the
25 patient was uh, when she was 99, her son was present

3 for this as well. That she was hitting me and saying
4 foul words, cursing, saying that I wasn't doing a
5 good job and then uhm, while I was you know wiping
6 her ass, changing her pain bottles, things like that,
7 and she spits all over me and hitting me and then I
8 still because she's vulnerable, I can't say anything
9 back. I'm afraid that something might happen to her.

10 BAO JIN QIU: Hi, [SPEAKING IN FUJAINESE 3:22:20-
11 3:23:05].

12 CHAIRPERSON DE LA ROSA: Please conclude. We
13 have to move on to the next panelist.

14 BAO JIN QIU: Hi, [SPEAKING IN FUJAINESE
15 3:23:07].

16 INTERPRETER: So, uhm, after she passed at 100, I
17 thought that I was going to stop but I worked for
18 another two years, and I finally stopped. Even
19 though I don't work for this anymore, I still want to
20 urge these health care companies to work to run the
21 company with conscious. This is not a healthy thing.
22 I was 110 pounds and I'm not anymore. This is very
23 damaging to body health.

24 CHAIRPERSON DE LA ROSA: Thank you.

25 BAO JIN QIU: Hi, [SPEAKING IN FUJAINESE 3:23:53-
3:24:15].

3 INTERPRETER: So, I know --

4 SERGEANT AT ARMS: Time is expired.

5 INTERPRETER: Just one last thing. I just want
6 to urge everybody or every sisters or people that's
7 going to work to cut your shift into two 12 hours
8 because you cannot buy your body with money with any
9 amount of money.

10 CHAIRPERSON DE LA ROSA: Thank you. Thank you
11 for sharing. Thank you.

12 BAO JIN QIU: Hi, [SPEAKING IN FUJAINESE
13 3:24:39].

14 INTERPRETER: Thank you. Thank you.

15 CHAIRPERSON DE LA ROSA: We have one more. Hold
16 on, we have one more panelist. And please, let's
17 keep it to two minutes because we still have a long
18 way to go, and we want to make sure that we can hear
19 everyone, and you know we only have translation
20 services for a number of hours. So, please, go
21 ahead.

22 GUI ZHU CHEN: [SPEAKING IN TAIWANESE 3:25:02-
23 3:26:15].

24 INTERPRETER: Hello everyone, my name is Gui Zhu
25 Chen, and I started caring since 2014 as a 24-hour
shift and during that time, I serve a husband and a

3 wife whose 80 and 90's and at that time, so they are
4 sleeping. They usually sleep through the day and
5 then they will get up at night to open, because the
6 husband has you know mental health issue, they will
7 get up at night thinking that there's thieves that
8 coming out into the house and so, they want to check
9 the windows, they check their light bulb, they check
10 everything.

11 And then, also for lunches, they don't eat lunch
12 until like two or three in the afternoon and we
13 cannot eat before them. They will get all angry and
14 start hitting people. And then I worked for three
15 days a week for 24 hours for a couple weeks, a couple
16 months and I can't take it anymore and so, I stopped.

17 GUI ZHU CHEN: [SPEAKING IN TAIWANESE 3:27:31-
18 3:27:49].

19 INTERPRETER: So, and I lost a lot of weight over
20 the period of time, and I have a lot of pain all over
21 my body, my fingers, my palms and as I'm sitting
22 here, I'm not filling a lot of my body, numbness.

23 GUI ZHU CHEN: [SPEAKING IN TAIWANESE 03:28:09-
24 3:28:09-3:28:57.

25 INTERPRETER: And uhm, I want to be treated with
a heart of buddha as we treat other people with the

2 heart of buddha. So, we treat other people, all
3 other Americans fairly. So, we want to be treated,
4 we Chinese wanted to be treated as fairly as well.
5 We want to urge that the 24-hour shift be cut into
6 half as a 12-hour shift instead.

7 That is very easily harmful for our body with the
8 long working hours. So, I just want to urge today to
9 be here to uhm, stop the 24-hour shift.

10 CHAIRPERSON DE LA ROSA: Thank you so much.

11 GUI ZHU CHEN: [SPEAKING IN TAIWANESE 3:29:50].

12 SERGEANT AT ARMS: Time has expired.

13 GUI ZHU CHEN: [SPEAKING IN TAIWANESE 3:29:52-
14 3:29:58].

15 INTERPRETER: She wants to add additional, the
16 limit on the work hour per week to be 50 or up to 50.
17 Thank you.

18 CHAIRPERSON DE LA ROSA: Thank you. Thank you
19 for sharing your story.

20 INTERPRETER: Thank you very much. Thank you for
21 your cooperation. Thank you.

22 CHAIRPERSON DE LA ROSA: So, we have Helen Schaub
23 of 1199 who is on virtually, as well as Francisco
24 Javier Castillo. If you could wait, because we do
25

2 have questions from Council Member Marte. So, Helen,
3 go ahead.

4 HELEN SCHAUB: Okay, I'm here under Francisco
5 Javier. For some reason, I'm not permitted to open
6 the video. I don't know if I could be given
7 permission to do that, but can you hear me?

8 CHAIRPERSON DE LA ROSA: Yes, we hear you.

9 HELEN SCHAUB: Okay, apologies. It seems to be
10 the host has disabled the video. So, I'll talk and
11 if you let me, we'll appear on video as well. Thank
12 you so much for inviting us to testify today. I am
13 here offering testimony on behalf of 200,000 New York
14 City Members of 1199, SEIU including 50,000 home care
15 workers. We certainly appreciate the City Council's
16 attention to this issue and allowing so many voices
17 of home care workers to be heard in city hall today.
18 I'm going to briefly give an overview of some of the
19 structure of the industry and also the unions
20 position and then, we have Francisco Javier Castillo,
21 who's an 1199 SEIU member and home care worker who is
22 going to speak from his experience.

23 I don't want to repeat many of the things that
24 other people have said regarding the structure of the
25 industry, I will just say a couple of things. The

3 union clearly supports the elimination of the 24-hour
4 shift to end the exploited of practice of requiring
5 workers to be in clients homes without being paid for
6 those times.

7 The mechanism of capping the daily shift at 12
8 hours could accomplish this goal but as many other
9 people have said, including many people that we work
10 closely with in the consumer community, it must be
11 paid for through the state Medicaid program in order
12 to ensure that home care consumers can stay in their
13 homes.

14 I do want to just go through the numbers because
15 I think there has been some confusion about the
16 numbers. According to the states cost reports, the
17 licensed agency and fiscal intermediary cost reports
18 in 2019 -

19 SERGEANT AT ARMS: Time has expired.

20 HELEN SCHAUB: There are about 17,780 home care
21 consumers in New York City. That's about - excuse
22 me, 24-hour live-in home care consumers in New York
23 City. That's about 54 percent of the total. 40
24 percent of the total, 13,000 people are in Long
25 Island and Westchester and New York City does have a
higher proportion of the days of care. It's about 73

3 percent of the total days of care in the state, live
4 in days of care. We calculated the cost of paying
5 those additional 11 hours to be \$645 million for New
6 York City alone, a billion-dollar cost is to do that
7 statewide. That multiplying the 11 hours times the
8 2.1 million days of care times the cost per hour.

9 Just to wrap up because I know we have limited
10 time, I wanted to focus a little bit on this question
11 of the 50-hour cap. Home care workers fought very,
12 very hard to covered by the Federal Fair Labor
13 Standards Act. I think as many people know, when
14 that act was first passed, there were really racist
15 exclusions of agricultural workers and domestic
16 workers from Federal Labor law. It was a very long
17 fight. Our union helped support a case that went all
18 the way to the Supreme Court to ensure that home care
19 workers are covered by the Federal Fair Labor
20 Standards Act. That guarantees them time and a half
21 overtime, which was not true before 2015 by capping
22 the work week at 50 hours. It does not prevent
23 anybody from working more hours because you can work
24 at more than one agency. What it does prevent is you
25 earning more than ten hours a week of time and a half
overtime. We think that's an error that would really

2 hurt workers and require workers to work more hours
3 not less.

4 So, we would certainly ask that the 50-hour
5 weekly cap be removed from this bill. And as there
6 is a focus on how to ensure that the shift is
7 eliminated but the funding is there to provide care
8 for consumers. I think one thing that the City
9 Council ought to consider is how to align any
10 effective date of legislation with the state budget
11 and legislative cycle since the state does control
12 Medicaid funding.

13 Right now, the effective date of this bill is 90
14 days after its passed, which may very well be
15 completely misaligned with the state cycle and
16 therefore not allow for these services to be funded.

17 Lastly, the only thing I'll say is that we were
18 mentioned a number of times in this hearing regarding
19 our arbitration settlement. We're happy to answer
20 any questions regarding that. There's been some
21 misinformation put out earlier. I'm happy to clear
22 up any of that. Thank you so much.

23 CHAIRPERSON DE LA ROSA: Thank you. Mr.
24 Francisco. Mr. Francisco.

3 FRANCISCO JAVIER CASTILLO: [SPEAKING IN SPANISH
4 3:35:47-3:35:58.

5 CHAIRPERSON DE LA ROSA: One momento Francisco,
6 one momento.

7 INTERPRETER: [SPEAKING IN SPANISH 3:36:02-
8 3:36:10]. Good afternoon.

9 FRANCISCO JAVIER CASTILLO: [SPEAKING IN SPANISH
10 3:36:14-3:36:17].

11 INTERPRETER: Members of the New York City
12 Council.

13 FRANCISCO JAVIER CASTILLO: [SPEAKING IN SPANISH
14 3:36:19-3:36:22.

15 INTERPRETER: My name is Francisco Javier Castillo.

16 FRANCISCO JAVIER CASTILLO: [SPEAKING IN SPANISH
17 3:36:24-3:36:26.

18 INTERPRETER: I am a member of 1199.

19 FRANCISCO JAVIER CASTILLO: [SPEAKING IN SPANISH
20 3:36:30-3:36:38.

21 INTERPRETER. I have been employed as home health aide since
22 the year 2008.

23 FRANCISCO JAVIER CASTILLO: [SPEAKING IN SPANISH
24 3:36:44-3:36:52].

25 INTERPRETER: When I was taking care of the same
client that has been needing constant care for this
past years.

2 FRANCISCO JAVIER CASTILLO: [SPEAKING IN SPANISH
3 3:37:01-3:37:04].

4 INTERPRETER: When I started I was assigned a 24-
5 hour shift.

6 FRANCISCO JAVIER CASTILLO: [SPEAKING IN SPANISH
7 3:37:08-3:37:10].

8 INTERPRETER: Five days a week.

9 FRANCISCO JAVIER CASTILLO: [SPEAKING IN SPANISH
10 3:37:11-3:37:12].

11 INTERPRETER: In patient with the bed inside.

12 FRANCISCO JAVIER CASTILLO: [SPEAKING IN SPANISH
13 3:37:16-3:37:27].

14 INTERPRETER: And uh, during this time, the
15 sleeping and eating hours were constantly interrupted
16 and were not paid during that time.

17 FRANCISCO JAVIER CASTILLO: [SPEAKING IN SPANISH
18 3:37:39-3:37:47].

19 INTERPRETER: In 2018, my 24-hour shift was
20 divided in two 12-hour shifts.

21 FRANCISCO JAVIER CASTILLO: [SPEAKING IN SPANISH
22 3:37:54-3:37:59].

23 INTERPRETER: No, I work 48 hours four days a
24 week.

3 FRANCISCO JAVIER CASTILLO: [SPEAKING IN SPANISH
4 3:38:04-3:38:08].

5 INTERPRETER: And another colleague takes care of
6 my client when I am not working.

7 FRANCISCO JAVIER CASTILLO: [SPEAKING IN SPANISH
8 3:38:14-3:38:21].

9 INTERPRETER: In case one of us gets sick or is
10 on vacation, the other person can cover the shift.

11 FRANCISCO JAVIER CASTILLO: [SPEAKING IN SPANISH
12 3:38:27-3:38:36].

13 INTERPRETER: This proposal would mean that I
14 cannot work additional hours to cover for my partners
15 shift.

16 FRANCISCO JAVIER CASTILLO: [SPEAKING IN SPANISH
17 3:38:43-3:38:48].

18 INTERPRETER: But I would not work only 50 hours
19 a week.

20 FRANCISCO JAVIER CASTILLO: [SPEAKING IN SPANISH
21 3:38:54-39:03].

22 INTERPRETER: I cannot work less hours. If the
23 hours that I work are limited by the agencies where
24 for who I work.

25 FRANCISCO JAVIER CASTILLO: [SPEAKING IN SPANISH
3:39:12-3:39:17].

3 INTERPRETER: I would have to get a second
4 employment with another agency.

5 FRANCISCO JAVIER CASTILLO: [SPEAKING IN SPANISH
6 3:39:22-3:39:30].

7 INTERPRETER: Where I would have to work more
8 hours because I would not be able to make the same
9 rate to 1.5 times.

10 FRANCISCO JAVIER CASTILLO: [SPEAKING IN SPANISH
11 3:39:39-3:39:46].

12 INTERPRETER: It is necessary right now, today,
13 because I can work all the additional hours only with
14 one client.

15 FRANCISCO JAVIER CASTILLO: [SPEAKING IN SPANISH
16 3:39:54-3:40:02].

17 INTERPRETER: Without continuous care, my client
18 would not be able to live on his own and he would
19 have to be sent to a daycare.

20 FRANCISCO JAVIER CASTILLO: [SPEAKING IN SPANISH
21 3:40:15-

22 SERGEANT AT ARMS: Time has expired.

23 FRANCISCO JAVIER CASTILLO: [SPEAKING IN SPANISH
24 3:40:21-

3 INTERPRETER: [SPEAKING IN SPANISH 3:40:22-
4 3:40:23]

5 FRANCISCO JAVIER CASTILLO: [SPEAKING IN SPANISH
6 3:40:25].

7 INTERPRETER: I have to be careful to work with a
8 patient that I know for many years.

9 CHAIRPERSON DE LA ROSA: Gracias.

10 FRANCISCO JAVIER CASTILLO: [SPEAKING IN SPANISH
11 3:40:37-3:40:46].

12 INTERPRETER: A lot of my colleagues are assigned
13 four-hour shifts and they have to work for multiple
14 agencies.

15 FRANCISCO JAVIER CASTILLO: [SPEAKING IN SPANISH
16 3:40:51-3:40:55].

17 INTERPRETER: To be able to accumulate enough
18 hours for an entire shift.

19 FRANCISCO JAVIER CASTILLO: [SPEAKING IN SPANISH
20 3:40:58-3:41:08].

21 INTERPRETER: I'm lucky that I never had to do it
22 but if they can't, I would have to work more than 50
23 years a week.

24 CHAIRPERSON DE LA ROSA: [SPEAKING IN SPANISH
25 3:41:17-3:41:22] Please conclude your testimony.

3 FRANCISCO JAVIER CASTILLO: [SPEAKING IN SPANISH
4 3:41:24-3:41:34].

5 INTERPRETER: In 2021, I testified as one of the
6 people that had experience with a 24-hour shift.

7 FRANCISCO JAVIER CASTILLO: [SPEAKING IN SPANISH
8 3:41:40-3:42:02].

9 INTERPRETER: Uh, due to this arbitration, this
10 ended in the special found for compensation.

11 FRANCISCO JAVIER CASTILLO: [SPEAKING IN SPANISH
12 3:42:10-3:42:25].

13 INTERPRETER: And that this gave home care
14 workers more than \$40 million in compensation for
15 wages lost before 2015.

16 FRANCISCO JAVIER CASTILLO: [SPEAKING IN SPANISH
17 3:42:38-3:42:42].

18 SERGEANT AT ARMS: Time has expired.

19 INTERPRETER: Please, do not approve this law.

20 FRANCISCO JAVIER CASTILLO: [SPEAKING IN SPANISH
21 3:42:44-3:42:50].

22 INTERPRETER: It would only effect home care
23 aides and their clients.

24 FRANCISCO JAVIER CASTILLO: [SPEAKING IN SPANISH
25 3:42:51-3:42:54].

INTERPRETER: It is not beneficial for us.

3 CHAIRPERSON DE LA ROSA: Thank you. Gracias.

4 Thank you. So, we're going to move on to questions
5 but [SPEAKING IN SPANISH 3:43:01] uhm, I'm talking
6 in Spanish now. Whew transition. My colleague Chris
7 Marte has a question. Chris.

8 COUNCIL MEMBER MARTE: Yeah, first of all, I want
9 to thank everyone for testifying and thank you Mary
10 for taking great care of the home attendant that you
11 have assigned to your children. But as we heard in
12 this panel, not every case is like that. You know,
13 there are some cases that are a bit more abusive, but
14 workers can't choose who they help and who is their
15 client. A lot of times, they are forced into this.
16 And so, one of the questions I have is, do you think
17 that home attendants are asking for more hours
18 because they're not getting paid for the full 24
19 hours that they currently work?

20 MARY SOMOZA: I think that there are many; I have
21 identical twins, but their level of care is
22 completely different and their level of dependency
23 completely different. So, cases are different, but I
24 don't think that it's certainly the level of pay is
25 totally inadequate for living in New York City for
what home attendants or in our case, it's we call

3 personal care assistants, it's totally inadequate but
4 we understand as well that we don't have the total
5 control over that. We lobby the government. We have
6 testified more times than I would care to mention
7 over the last 38 years since my daughters been here
8 and we try to influence government to do the right
9 thing but it's not always successful and there's not
10 always the money available.

11 So, we're a little bit, we are totally dependent
12 on our elected officials both citywide and statewide
13 to decide these things and decide where they're going
14 to spend their money and of course, we want our aides
15 to get the money that they deserve, which is a living
16 wage particularly in New York City. You can't
17 compare the city to anywhere, everywhere in the state
18 and everywhere in the country. New York City is a
19 whole different animal and it's extremely hard for
20 our families. I'm a parent so, and I represent a lot
21 of parents across the city, all in your different
22 districts and our parents struggle greatly with this
23 and worry about the future when they're not - because
24 the aide of last resort are the parents. And a lot
25 our parents are aging or ill or not able to do it
anymore or tired and so, we all have our concerns as

3 well and we have to just try to hope that our elected
4 officials and people at the state and local level
5 will come to the right conclusion and pay the workers
6 in New York a decent living wage, which would make
7 our life easier. Easier to recruit, to hire people
8 to retain the people that we recruit if they have a
9 living wage. Then they would not need to work
10 excessive hours to make up the money that they need
11 to live on.

12 COUNCIL MEMBER MARTE: Do you think if it was
13 split into two 12-hour shifts that more people would
14 become home attendants and help the shortage crisis?

15 MARY SOMOZA: Not necessarily because that means
16 two people doing it. A lot of times the actual
17 individual and I'm not talking about my family in
18 this case, particularly the elderly, which are
19 completely different to the younger generation who
20 receive care. The elderly and more sedentary, they
21 are more at home. Sometimes the shifts are not as
22 hard but some shifts, when you have a person with
23 dementia are extremely hard for the home attendants.

24 So, if it's a split shift is what you're talking
25 about, that's the logical thing but that split shift,
if they would allow a certain amount of the hours for

3 the worker who can actually stay overnight and do a
4 nighttime shift, I can't speak for everybody, but I
5 can speak for my own case and for the families that I
6 get input from all of the time. Who are in all of
7 your districts by the way and I'm sure some of you
8 have heard from our family members. They can't be
9 here today because they're struggling and struggling
10 to find workers, struggling to — they are the
11 backups.

12 When we have workers or we can't get a worker,
13 families are the backdrops.

14 UNIDENTIFIED: Let me just with, basically the
15 point that she's making is that, if we split the
16 shift into two 12-hour shifts, in some cases that
17 might work but as my friends who testified in the
18 last panel alluded to, there is a national home care
19 crisis. We can't hire people right now, so if you
20 make a 24 hour shift illegal, then the ultimate
21 result right now is that we will end up in nursing
22 homes because we don't have the ability to — that
23 would mean, most of us would need several personal
24 care assistants or home attendants to cover our needs
25 and to keep us out of the hospital.

3 So, we agree that home care workers need to work
4 under better conditions but minimizing the care that
5 we receive to do that is not the solution. As my
6 friend Jose said before, protecting one group cannot
7 come at the expense of another. So, please take
8 another look at this legislation and ask for the
9 advice of the people that are being affected by it.
10 Because with all due respect, we couldn't get a
11 meeting with your office prior to this hearing. So,
12 we're happy to advise you but you have to be able,
13 you have to be willing to take a meeting with us and
14 we can have a conversation about how to solve the
15 issue without putting people like me back into a
16 hospital or a nursing home.

17 CHAIRPERSON DE LA ROSA: Can you state your name
18 for the record?

19 ANASTASIA SOMOZA: Yes, I'm Anastasia Somoza.
20 I'm Mary Somoza's daughter.

21 CHAIRPERSON DE LA ROSA: Thank you so much.

22 COUNCIL MEMBER MARTE: I just have to questions
23 for the union rep.

24 CHAIRPERSON DE LA ROSA: Sure.

25 COUNCIL MEMBER MARTE: Uhm, it's either I guess -
yeah, you can answer. What was the protocol of 24-

3 hour live-in care before former Governor Cuomo issued
4 the 13-hour rule?

5 HELEN SCHAUB: Us, so, I believe it was not the
6 governor himself who issued or the governors
7 administration who issued the 13-hour rule. Well, it
8 was the court who threw it back to the state and then
9 the state conformed the state law with the federal
10 law. The 13-hour rule existed before that. The
11 lawsuit that challenged it was claiming that it was --
12 that it should be illegal, and the court declined to
13 rule it illegal instead, sent it back to the State
14 Department of Labor.

15 So, there was no Change before and after. There
16 was hope that the court case would have changed the
17 13-hour rule but that did not happen.

18 COUNCIL MEMBER MARTE: Okay. I don't think
19 that's true. Okay, I'm done.

20 CHAIRPERSON DE LA ROSA: You have another
21 question? No, you're good? Okay, I have a question
22 for 1199 and my question is, what percentage of this
23 workforce is currently unionized? Do you know?

24 HELEN SCHAUB: It is difficult to get statistics.
25 It is more unionized in New York City, but I believe

3 it is probably 30 to 40 percent union in New York
4 City.

5 CHAIRPERSON DE LA ROSA: And in the case where
6 there are egregious violations to working conditions,
7 can you state what is the role that the union plays
8 in kind of giving recourse to these workers?

9 HELEN SCHAUB: Certainly, so there is a contract
10 for union workers. There's a contract that governs
11 working conditions and if those conditions are
12 violated, the worker can file a grievance and then
13 there is a process by which that grievance is either
14 resolved or goes to an independent arbitrator.

15 CHAIRPERSON DE LA ROSA: And in your estimation,
16 the crisis that has been described as a workforce
17 shortage, uhm, you know we're hearing these numbers
18 for 2028. Has the union — does the union have an
19 estimation of what that crisis would look like? Are
20 the stats similar to what we've heard from the 2021
21 CUNY School of Labor report?

22 HELEN SCHAUB: Yes, so I think it's important to
23 understand, there's really two aspects to the crisis.
24 One, is a growing need. Right, we have an aging
25 population and so, there are more and more people who
need care at home and who certainly prefer not to go

3 into nursing homes. Particularly given the situation
4 in nursing homes during the pandemic but the crisis
5 is also really one of turnover. It's very difficult
6 to maintain the same workforce because of the working
7 conditions and that's certainly why there's been a
8 struggle, both on the part of consumers and on the
9 part of workers to raise wages and more and more
10 needs to be done in order to retain the existing
11 workforce.

12 You have a certain number of job openings but
13 those grow exponentially because people leave the
14 field because of the working conditions, particularly
15 the wages and benefits but also in some cases, the
16 working conditions on the job.

17 CHAIRPERSON DE LA ROSA: And my final question
18 before I turn it over to Council Member Bottcher is,
19 has the union taken a position on the state bills at
20 this time?

21 HELEN SCHAUB: We have the same concern with the
22 state bill that we have with the city bill. Namely
23 the inclusion of the 50-hour cap, which again, we
24 understand to be a cap on the ability to earn time
25 and half overtime and we're opposed to, but we
support capping the shift, the daily shift at 12

2 hours and ensuring that there is money included in
3 the state Medicaid budget to pay for the additional
4 hours to make sure that the services are maintained
5 for the clients.

6 CHAIRPERSON DE LA ROSA: Thank you so. Council
7 Member Bottcher.

8 COUNCIL MEMBER BOTTCHEER: Hi Mary and Alba and
9 Anastasia. I really want to thank you for being here
10 today. You talked about the program through which
11 you hire home care workers. That's you interview
12 them. You advertise for them, interview them, train
13 them and then an agency serves as the -

14 MARY SOMOZA: It's called Intermediary.

15 COUNCIL MEMBER BOTTCHEER: The intermediary and
16 the biggest challenge that you identified is the lack
17 of workers. The hard time you have identifying,
18 finding people to work. The - so switching from a
19 24-hour work day to two 12-hour work days, what you
20 said is that that would require you to hire twice as
21 many people but at the same time, the shortage we're
22 seeing is partly caused by the working conditions.
23 The fact that a lot of people have to work 12 hours.

24 So, do you think that by improving the working
25 conditions and the pay, getting more people involved,

3 more people interested in these jobs, we'd be able to
4 help you have more people to hire? More people to
5 choose from? Does that make sense?

6 MARY SOMOZA: One of the problems Erik is not
7 just the split shift. I understand that issue. The
8 problem is America is aging and huge numbers of
9 people across the country are coming into the field
10 of needing care at home. Care at home has been found
11 to be much, much, much cheaper and safer and quality
12 of life for people, both for the elderly and for
13 people with disabilities.

14 So, we can find workers. Split shift is fine,
15 but it depends. There has to be some flexibility on
16 the number of hours. Caps on hours and caps on;
17 there has to be some flexibility because down on the
18 ground for people like us and families like us, we're
19 faced with the conditions of actually getting the
20 people and offering them a job that's attractive to
21 them.

22 Sometimes a worker whose doing let's say a 24 -
23 for what's considered a 24-hour shift is a person
24 who's working 12 hours. But decides because they
25 live on the other side of New York, decides it's
easier to sleep in. It's not a hard shift to sleep

3 in and because they don't have travel time. They
4 don't have to go home later at night and it's
5 sometimes convenient. That possibility has to be
6 allowed as well.

7 This is - it's what my daughter said, you guys
8 need, the Council needs to sit with both sides and
9 hear both sides of the issue. But as Assembly Member
10 Gottfried said, the legislation as it is, can have
11 unintended consequences that I know, Council Member
12 Marte has not considered this because he's thinking
13 of the workers, but the other side of the equation is
14 the most vulnerable population. It is the elderly.
15 It is the people who are 100 percent dependent on
16 that home worker coming in. And the people how hire
17 and -

18 ANASTASIA SOMOZA: Let me answer your question
19 very specifically and directly. So, you're asking,
20 would it be easier? What we found in the Consumer
21 Directed Personal Assistance Program we use, let me
22 clarify, we don't use the traditional. A lot of
23 people here today brought up the Chinese American
24 Planning Council. That organization runs both the
25 traditional home health aide agency, but they also
run a CDPAP program, and we've been members of the

3 CDPAP program, which is the program that allows us to
4 hire, to do the training to decide who works in our
5 homes. And in my experience, it is harder for us to
6 hire people if we're just offering them a four or a
7 five-hour shift because it's expensive to live in New
8 York City. It is easier for us to retain workers at
9 least in a consumer directed model, if we're able to
10 offer a slightly, slightly longer shift.

11 So, you're right in understanding that. Like my
12 mom said, the split shift is okay but the problem
13 with this legislation is that it makes 24 hours
14 illegal and there needs to be some flexibility to
15 address the people that would end up in nursing homes
16 and hospitals if they didn't have the 24-hour care.

17 So, I think what really needs to happen to solve
18 that is a discussion about an increase in wages and
19 making sure that overtime gets paid and that they
20 have access to better benefits and quality of work
21 environment, but we can achieve that without taking
22 away the care that people like me and my twin sister
23 need.

24 And I think that has a lot more to do with wages
25 than it does with the number of hours.

2 COUNCIL MEMBER BOTTCHEER: Thanks. I'll say that
3 I think that you'll find my colleague Council Member
4 Marte; he is very caring for everyone involved and
5 thoughtful and I'm sure he would be very happy to
6 talk with you after the hearing.

7 One thing I'd love to hear more about is what
8 efforts are happening to recruit more people to the
9 industry in addition to ending the exploitation and
10 the low wages. The things that are keeping people
11 out of the industry. What affirmative efforts are
12 happening to get more workers to enter this industry.
13 We all agree that the status quo isn't acceptable.
14 The question is how we get there. Thank you so much.

15 CHAIRPERSON DE LA ROSA: Thank you Council Member
16 Bottcher. I also want to say that uhm, this is the
17 platform where we are having the conversation to
18 listen to both sides. So, not only do you have
19 Council Member Marte's undivided attention, he has
20 been sitting here for hours. You have the full
21 Council's attention and I want you to understand that
22 we are listening. That we will continue to listen.
23 I know that Council Member Marte also wanted to
24 address something that was addressed to him directly.
25 So, Council Member Marte.

3 COUNCIL MEMBER MARTE: Yes, my mom is a home
4 attendant and yes, my mom has done 24-hour shifts but
5 my grandparents, especially my grandma right now is
6 bedridden and has a home attendant that lives with
7 her day in and day out. And so, I understand both
8 perspectives. My office had been talking to
9 organizations, had been talking to advocates, people
10 who want to kill this bill, people who want to
11 support this bill for the past few months. We're
12 having this hearing to hear all sides. We want to
13 have a conversation with as many people as possible
14 and we will continue to do so after this hearing.

15 This is not the end date, we will continue to
16 listen to organize, to make sure that this bill
17 passes. Thank you.

18 CHAIRPERSON DE LA ROSA: Thank you Council Member
19 Marte. So, with that, we're going to conclude this
20 panel. We thank you so much for coming out and for
21 your undivided attention and your suggestions.

22 I am going to make an announcement for our folks
23 who have joined us on Zoom. If you are assigned into
24 the Zoom to testify and require interpretation
25 services, please use the raised hand function in the
Zoom, so that our staff can ensure that

3 interpretation is available when we call you. So, if
4 you're on Zoom and you require interpretation
5 services, we want to gauge how many people need
6 interpretation services still. Please use the raise
7 hand function, so staff can track it.

8 And with that, I'm going to call the next panel.
9 Oh, we're going to have the interpreters actually
10 announce that in each language. Thank you.

11 INTERPRETER 1: [SPEAKING IN OTHER LANGUAGE
12 4:04:41-4:04:57].

13 INTERPRETER 2: [SPEAKING IN OTHER LANGAUGE
14 4:05:01-04:05:12].

15 INTERPRETER 3: [SPEAKING IN OTHER LANGUAGE
16 4:05:30-4:05:51].

17 CHAIRPERSON DE LA ROSA: Thank you. So, with
18 that, we're going to call the next panel in this
19 order, Stefan Henry you're up first followed by
20 Juliet Emerson-Colvin. For the interpreter, we will
21 need the Taiwanese interpreter for Rui Qing Xu, Zhao
22 E. Jiang, Qui Zhu Chen, and Hui Ling Chen.

23 And if their interpreter wants to come and repeat
24 these names, you can. Mr. Henry, when you're ready.

25 STEFAN HENRY: Hello, thank you for your time.
My name is Stefan Henry, I'm a person with a

3 disability as you can clearly see. And I'm an
4 advocate for rights of people with disabilities in
5 general, home care, home health and home health care
6 workers. I'm also a city employee and anything that
7 I talk about today is my own personal opinion. It
8 doesn't represent my agency in any form.

9 As a person who uses CDPAP, I am aware of the
10 multiple abuses that my current and previous home
11 care workers have gone through. I've heard
12 everything from abuses of their time in skill sets
13 and physical and mental abuse. I agree that
14 something has to be done to protect their rights
15 legislatively and they're some of the lowest paid
16 workers and hardest paid workers in the workforce
17 hands down, no question.

18 So, with that being said, my colleagues and I are
19 constantly fighting for better working conditions and
20 wages for our home care workers. Over the last two
21 years, we have advocated in Albany for the Fair Pay
22 for Home Care Act. Patients like myself, home care
23 workers, home care agencies, family care givers,
24 unions, and even City Council themselves, through the
25 resolution recognize the importance of fair pay for

3 home care workers and we were able to get better
4 wages for them.

5 In just three weeks, the wages for those workers
6 will rise from \$2 per hour and we will fight for more
7 next year. So, this brings us to why I'm here today.

8 In 0175, although well intentioned to protect home
9 care workers from the 24-hour live-in rule, will have
10 dire consequences for people with disabilities and
11 seniors who have been authorized 24-hour live-in
12 services via the state's Medicaid regulations.

13 By changing New York City's Labor Law to only
14 allow home care workers to work 12-hour shifts and
15 punishing the home care agencies providing 24-hour
16 care, that have been authorized by state and local
17 agencies using Medicaid regulations. Since the 24-
18 hour shifts aren't instantly split into two split
19 shifts, the Council would be putting the state
20 regulations against the city regulations and the
21 lives of people with disabilities and seniors in
22 jeopardy while in the process of figuring this all
23 out.

24 Without these services, clients would go multiple
25 life-threatening hours without care. Anything from
sores, falls, cardiac issues, respiratory issues, and

3 many other nasty and desirable conditions that best
4 result in dramatically higher cost of health care and
5 at worst, in death.

6 You're protecting one but condemning the others
7 and that is not how the law is supposed to work.

8 Home care is predominantly funded by Medicaid, which
9 is governed by the state level. In order to protect
10 home care workers, people with disabilities, seniors
11 and better working conditions need to be provided for
12 home care workers and for the clients as well.

13 Working with legislators like Assembly Member Epstein
14 in Albany to end the 24-hour rule, we believe is the
15 best way to go.

16 Finally, I wanted to address the 50-hour work
17 week limit. Limiting home care workers to 50 hours
18 per week will stop home care workers from
19 supplementing their income with overtime pay.

20 We all recognize that home care workers aren't
21 paid enough and imposing this 50-hour work week limit
22 will cause home care workers to work more hours with
23 multiple agencies to be able to be able to maintain
24 their income and afford living in New York City.

25 Our government should not be able to dictate how
many workers supplement their income, especially

3 limiting the amount of overtime a worker can make.

4 If a workers wants to work 80 per week, they are
5 going to do so whether they do it with one agency,
6 two or three.

7 Let's see, all you're doing is complicating the
8 lives of the workers by implementing this bill. I'm
9 lucky that I won't be directly impacted by this bill,
10 although I do worry about the effect that it will
11 have on everyone in my community who may actually
12 result in having to lose their care and go into
13 nursing homes because the process of like figuring
14 out what happens in between getting rid of 24-hour
15 shifts and doing the split 12 shifts, what's going to
16 happen to them while we're figuring out what's legal
17 and what's not and what's going to be fined and
18 what's not.

19 It's not going to be fair to everyone and people
20 who are already living very independent lives are
21 going to lose a lot of their ability to see their
22 friends and co-workers and family. This is really
23 important to us for, so we argue that you just
24 rethink this bill even though it's really well
25 intentioned because the process and the timeline that

2 will be between like getting rid of the 24-hour
3 status and the 12/12 shift will hurt us a lot.

4 So, we need you guys just to rethink this and
5 just implement a better timeline for it, I'm pretty
6 sure. Thank you very much.

7 CHAIRPERSON DE LA ROSA: Thank you so much.
8 Juliet Emerson-Colvin. Thank you and we're going to
9 be at uhm, adhering to the two-minute rule because
10 there is about ten more panels or so left. So,
11 please stick to two minutes. Thank you.

12 JULIET EMERSON-COLVIN: Okay, thank you so much
13 for your time. My name is Juliet Emerson-Colvin and
14 I'm with the Ain't I a Woman Campaign.

15 As a fellow worker, I understand that the working
16 conditions of immigrant women of color home care
17 workers impact those of all workers. The
18 normalization of long hours and the expectation that
19 you will prioritize work over your own family, health
20 and wellbeing is prevalent. Whether you work in a
21 corporate office, the back of a restaurant or your
22 patients home. For these women workers, it is more
23 than an expectation if they demand that they give up
24 their entire lives without compensation for half the
25 time they work. I know that ending the 24-hour work

3 day for home health care workers with Intro. 175 will
4 improve the lives of working people across the city.
5 And I can relate to the feeling of understanding the
6 value of your work and wanting to do a good job but
7 also feeling frustrated and debilitated by working
8 conditions that don't allow you to do so.

9 Ending the 24-hour workday gives home care
10 workers the time to rest, recover and spend time with
11 their families, as well as the ability to provide the
12 quality care that patients deserve, and that society
13 depends on.

14 When talking to people about the fight to end the
15 24-hour work day, some have responded that there
16 simply isn't enough Medicaid funding to pay for split
17 shifts. And so, splitting the shifts will result in
18 the collapse of the industry. First of all, I don't
19 understand why workers should have to suffer because
20 insurance companies and legislators cannot secure
21 funding to pay them what they are owed by law. If
22 the industry supposedly cannot survive without safe
23 working conditions and fair compensation, then the
24 industry is built on the exploitation of those
25 workers.

3 Second of all, the funding exists to cover split
4 shifts for every other city in the state. This tells
5 me that scare tactics about the collapse of the
6 industry come from a fear that the industry will be
7 remade in a way that actually values workers power
8 and treats them like human beings instead of
9 disrespecting and marginalizing them whenever they
10 raise their voices to demand justice.

11 It is embarrassing that the city cannot protect
12 immigrant women of color home care workers in a way
13 that ever other city in the state and every other
14 state in the country can. Thank you.

15 CHAIRPERSON DE LA ROSA: Thank you. Hui Ling
16 Chen followed by Gui Zhu Chen. Hold on one second.
17 Hold on one second. So, two minutes and then two
18 minutes for interpretation. Thank you.

19 HUI LING CHEN: Uhm, [SPEAKING IN TAIWANESE
20 4:15:54-4:17:52].

21 INTERPRETER: Hi, my name is Hui Ling Chen. I'm
22 here to ask for okay -

23 My name is Hui Ling Chen. We need to unite to
24 break through barriers. To break through chains and
25 cancel the 24-hour working day. My name is Hui Ling
Chen, from September 25, 1998, until now, I was

3 working at the Chinese Planning American Council as a
4 Home Health Aide. In 2005, I started working 24
5 hours a day up until May 12, 2021, for 16 years.

6 During this time, I take care of the elderly from
7 detail to everything. He calls me three to four
8 times at night, and I have to get up and help the
9 patient to go to the bathroom, to drink water and
10 there is no time to sleep. You may not have
11 experienced this yourself. You do not understand our
12 feelings. You do not know how difficult it is to be
13 awake every single minute. The patient can call us,
14 and you have to help him to resolve any little issue,
15 whether big or small. I cannot go to sleep. And
16 when I do dose off a little bit, I work not sleeping.
17 My heart is still concerned about the patient, that
18 he would be calling me any minute of the day. Over a
19 long period of time because of this work situation,
20 my body has deteriorated. There is no amount of
21 money that can gain back my health.

22 Who is this cruel person? Who is maintaining
23 this 24-hour work day for us? Who is stealing our
24 money and taking away our time and health? Who is
25 the thief? Of course, these are the cruel bosses.
These are the insurance companies. These are the

2 home health companies and the 1199 union. We need to
3 unite. We need to have fair compensation. We are
4 going through the City Council and abolishing and
5 advocating for the 0175 law, so that we can abolish
6 -

7 SERGEANT AT ARMS: Time has expired.

8 CHAIRPERSON DE LA ROSA: Thank you. Time has
9 expired. Zhao E. Jiang.

10 ZHAO E. JIANG: [SPEAKING IN TAIWANESE 4:20:27-
11 4:22:30] -

12 SERGEANT AT ARMS: Time is expired.

13 INTERPRETER: Hi, my name is Zhao E. Jiang. I've
14 been working as a home aide for 18 years. As a 24-
15 hour shift, I've been doing that for six years. For
16 the 24 hours, as 24 hours home aide, is very, very
17 difficult. Usually have to stay in the patient home
18 consecutive for three to four days.

19 I remember as a patient that is bedridden and I
20 have to take care him or her for going to the
21 bathroom, changing his diapers, flipping him over, so
22 there's not enough time to sleep and as a 24-hour
23 shift home aide, my mental health has been
24 deteriorating. My back has been having problems, and
25

3 also as a 24-hour home aide, I only get paid 13 hours
4 of wages. Even though I don't get to sleep.

5 And to prove that I've been - I have not been
6 sleeping to taking care of the patient, I've been
7 recording what I have done to take care of the
8 patient and I show the proof to my company, asking
9 them to compensate me for the work. But my company
10 just [INAUDIBLE 4:24:01]. I'm been trying to back
11 now to government to pay and I can get sued for what
12 I did, and they told me not to file anymore report
13 and definitely not getting any compensation for that.

14 Today, I come here in support of Bill 0175,
15 Intro. 0175 to remove such inhumane 24-hour shift
16 work days and also, split the 24 hours within the two
17 separate shifts. Limiting the work to no more than
18 50 hours.

19 SERGEANT AT ARMS: Time has expired.

20 CHAIRPERSON DE LA ROSA: Thank you. I think
21 we're missing one more person on the panel that
22 hasn't spoken yet. Please go ahead.

23 GUI ZHU CHEN: [SPEAKING IN TAIWANESE 4:24:54-
24 4:26:57].

25 SERGEANT AT ARMS: Time has expired.

2 GUI ZHU CHEN: [SPEAKING IN TAIWANESE 4:26:59-
3 4:27:02 Oh, okay, thank you.

4 INTERPRETER: Okay, hi, my name is Gui Zhu Chen.
5 I've been working as a home aide since 2006. I've
6 been working for CPC for six years as a 24-hour shift
7 home aide. Usually, I do four consecutive days to
8 work in the patients home and I've been doing mostly
9 that with the patient.

10 Each day for at least two hours, I need to flip
11 the patient, change the diapers and every night, I
12 need to assist them in going to the bathroom at least
13 five to six times. I ask CPC that 24 hours too
14 harsh. Can I have a rotation shift to work with?
15 But CPC told me, if I don't want to work 24 hours,
16 then they will find somebody else to do and I have no
17 work to do then.

18 To prove that I didn't sleep during work, I
19 record what I've been doing with the patient and when
20 I show the proof and ask the company for
21 conversation, they also tell me that I'm denying and
22 trying to blackmail the government and that I can go
23 to jail for that and told me not to file any report
24 and definitely not getting any conversation.

3 24-hour home aides usually don't get to sleep and
4 doing that in long terms is causing me to have
5 sleeping problems. Even now if I don't do a 24-hour
6 shift, I'm still having sleeping issue. My eyes
7 become murky and during like rainy days or on
8 unfavorable condition, I have back pain, I have pain
9 in my feet and because every week I've been working
10 for 90 hours shift. Should I continue?

11 CHAIRPERSON DE LA ROSA: Thank you.

12 INTERPRETER: Okay.

13 CHAIRPERSON DE LA ROSA: Thank you. Thank you,
14 so we're going to call up our next panel. Thank you
15 so much for coming out and testifying. We appreciate
16 you.

17 We'll need a Mandarin interpreter for this panel.
18 Okay, in this order Bryan O'Malley, please come up to
19 the dais. Uhm, Jian Xiao Li, Mandarin, Zu Fen Yang,
20 Mandarin, Ying Fang Wu, Mandarin, Li Qih Zheng,
21 Mandarin, Hong Ying Chen, Mandarin and Yun Fang
22 Zhang, Mandarin. Seven people.

23 Mr. O'Malley, you may begin when you're ready.

24 BRYAN O'MALLEY: Good evening, my name is Bryan
25 O'Malley. I am Executive Director for the Consumer
Directed Personal Assistance Association of New York

3 State, and I really appreciate the opportunity to
4 talk to you today about why we oppose Intro. 0175.
5 Facts matter, so I want to address specifically the
6 factual errors that have been told. My written
7 remarks give in depth details and citations on this
8 summary.

9 My federal law eligibility and assessment roles
10 apply equally across the entire state. This is
11 important because it's been presented as fact
12 repeatedly that live in only exists in New York City.
13 The fact is one of my staff living in Nassau County
14 gets live in. A small FI in Nassau has 16 live in
15 cases. Another in Rockland has five and an agency in
16 the capital region has eight.

17 New York City does have most but that's because
18 New York City has most home care and most people and
19 frankly, it's because many upstate counties,
20 particularly in the north country and out west, don't
21 believe Medicaid should exist and do everything
22 possible to prevent or minimize services to the harm
23 of those who need those services.

24 The assessment process has been spoken to in
25 detail. The assessment results and an authorization.
The fact is that this authorization has a billing

2 code on it, T1020 for live in and T1019 for hourly
3 which includes 24-hour continuance. A provider may
4 not bill for the service using a different
5 authorization code or it will be denied. If live in
6 is authorized and not provided, it is Medicaid fraud
7 to bill for 12 hours.

8 This means no one will take a 12-hour live in.
9 People will go without services. Some have said,
10 this bill will force a change in state law but again,
11 the facts don't support that claim. When New York
12 City introduced Local Living Wage Laws, legislation
13 was introduced in Albany to add these funds to the
14 Medicaid rates. It died eight years in a row because
15 officials consistently maintained the state was not
16 responsible for local laws. There is nothing in the
17 record to support a claim that their position would
18 be different here. [INAUDIBLE 4:32:40] will continue
19 to fight for broad investment in home care. Honoring
20 the Americans with Disabilities Act, the
21 establishment of Olmstead VLC. Thank you and I
22 appreciate the opportunity to testify.

23 CHAIRPERSON DE LA ROSA: Thank you so much.
24 Okay, we're going to start with Yun Fang Zhang. Are
25

3 you here? Okay. Sorry, one second, your microphone
4 is off.

5 YUN FANG ZHANG: [SPEAKING IN MANDARIN 4:34:08-
6 4:36:13]

7 SERGEANT AT ARMS: Time has expired.

8 YUN FANG ZHANG: [SPEAKING IN MANDARIN 4:36:14-
9 4:36:17].

10 INTERPRETER: Hi everyone. My name is Yun Fang
11 Zhang. I started doing 12-hour care since 2011 in
12 June and up until today I'm still working as a 24-
13 hour health care, uh, home care. Usually, I do
14 consecutively three to four days, that's 72 to 96
15 hours a day, a week and I can't get to go home and
16 see my family.

17 Working 24-hour shift for the longest time has
18 uhm, made me lack of sleep and I can't sleep anymore
19 and at work, the patient has a sensory ringer where
20 if the patients foot or hand leaves the bed, it will
21 ring, and I will have to get over there and check on
22 them. I barely have any sleep at night. Now that
23 even when I'm not at work at night, I still can't
24 sleep or when I'm sleeping, I still think that I'm at
25 the patients house. 24-hour shifts has tremendous
damage to us as home cares. My arm is bad due to

2 constantly caring patients. Now that my arms from
3 time to time is swollen, painful. I've seen a lot of
4 doctors about it. It's still not getting any better.
5 I told my company about the 24 hour. I couldn't
6 sleep, it's very hard, it's very difficult. The
7 managers at the company tells me, if you don't want
8 to do it, I can arrange someone else to it and you
9 will have to wait for a long time before I can give
10 you any other job arrangements.

11 And I'm afraid of losing jobs, so I stopped
12 saying anything and continue working. 24-hour shifts
13 are not meant for human.

14 SERGEANT AT ARMS: Time has expired.

15 CHAIRPERSON DE LA ROSA: Thank you. Okay, can
16 you state your name for the record? Your name, oh,
17 turn it up. Ying Fang Wu.

18 INTERPRETER: Ying Fang Wu.

19 CHAIRPERSON DE LA ROSA: Thank you. Go ahead.

20 YING FANG WU: [SPEAKING IN MANDARIN 4:38:49-
21 4:40:55]

22 SERGEANT AT ARMS: Time has expired.

23 YING FANG WU: [SPEAKING IN MANDARIN 4:41:06].

24 CHAIRPERSON DE LA ROSA: Thank you.
25

3 INTERPRETER: Hi, my name is Ying Fang Wu. I
4 have been working at ABI as a caretaker for five
5 years now and usually in a week, I have to
6 consistently work 24-hour shift for three days. I
7 take care of a 90-year-old lady who has dementia, who
8 always swears, yelling at me. I barely have any
9 sleep at night. I have to get up every night for
10 four- or five-times assisting patients to the
11 bathroom. At the middle of the night, at three,
12 would ask you to get up and cook. And a long time I
13 have lack of sleep. I can't see well anymore. My
14 arms are hurting, my lower back is hurting. I called
15 the company saying that I don't want to continue with
16 24-hour shifts and what they tell me is that if you
17 don't do it than nobody will.

18 So, I'm afraid that the patient has no one to
19 take care for. So, I continued working until the
20 patient died, passed. On August 17th, the patient
21 has been admitted to the hospital and passed by the
22 end of the month in August and I work - while I was
23 working a 24-hour shift, I got anxiety, and I got
24 depression. I had to see a mental doctor, eat
25 medications. And now that I'm not working 24 hour
anymore since August 17th, I got much more relief and

3 no more stress. I was hoping that I can get better,
4 and I'll stop all medication.

5 So, I'm here today to support the City Council
6 Bill, Intro. Number 0145 in removing the 24-hour
7 shift and for that, every shift cannot be exceeding
8 12 hours and uhm, limit every home care person to not
9 work more than 50 hours a week. And 50 hours is a
10 lot of time already and I will not ever work a 24-
11 hour shift anymore. No matter how much you pay me.

12 As a health care worker, we have to always
13 maintain time to take care of our family, our own
14 heath and our life. Thank you very much.

15 CHAIRPERSON DE LA ROSA: Thank you. Can you
16 state your name for the record?

17 UNIDENTIFIED: [SPEAKING IN MANDARIN 4:43:35-
18 4:43:41].

19 CHAIRPERSON DE LA ROSA: I'm sorry, hold on one
20 second. What's your name.

21 INTERPRETER: Uhm, Zu Fen Yang.

22 ZU FEN YANG: [SPEAKING IN MANDARIN 4:43:47-
23 4:44:37].

24 INTERPRETER: Hi, hello everyone. My name is Zu
25 Fen Yang. I was once a health care at People Care.
I have worked for this company for 17 years and out

3 of that for seven or eight years, I was a 24-hour
4 home care. At night, we have to change diapers for
5 uhm, patients going to bathroom but whether it's big
6 or small, the patient has a ringer in their hands
7 when they need us, they will ring us. We are hardly
8 getting any consecutive sleep, very difficult.
9 Usually, I have to work three to four days of 24-hour
10 shift. That means that I have to work consistently
11 for 72-96 hours.

12 Uhm, a long time in 24-hour shift has caused me
13 lack of sleep, shoulder pain and now that I'm
14 retired, I still don't think that as a home care
15 worker, we shouldn't be working 24 hours. That's why
16 I'm here today in support of Bill 0175 in removing
17 24-hour shifts. Thank you.

18 CHAIRPERSON DE LA ROSA: Thank you. Thank you.
19 Can you state the final panelists name on this panel?
20 The name for the next panelist.

21 INTERPRETER: Uhm, so the next people are not on
22 the list, on the list of the names but they have to
23 go. Is there any way that they can testify now
24 instead of being called later.

25 CHAIRPERSON DE LA ROSA: Sure, just announce the
name please.

3 INTERPRETER: Got it.

4 UNIDENTIFIED: [SPEAKING IN MANDARIN 4:46:38-
5 4:48:40].

6 CHAIRPERSON DE LA ROSA: Thank you. Can you say
7 the name?

8 INTERPRETER: The name is Zhi Fang Gu, G-U. Zhi
9 Fang Gu. Z-h-i F-a-n-g G-u. Last name is Gu G-u.
10 Got it?

11 CHAIRPERSON DE LA ROSA: Got it. Thank you.

12 INTERPRETER: Thank you everyone. First, I will
13 have to thank City Councilman Marte in giving me the
14 opportunity to speak here on the experience working
15 as a 24-hour home care.

16 Since 2009, I have been taking care of patient.
17 He is a disability person with one leg. In 2014, he
18 had a stroke and after he had that stroke, we have to
19 take care of him everywhere he goes, eat, drink,
20 going to the bathroom and everything and he's ring
21 has gone bad and starting to see things. Being very
22 active in day or night, so I couldn't sleep the whole
23 night. Every night I would just have to sit next to
24 the couch and uhm, nap for a little bit and for that
25 whole year, I experienced a sleepless night for the
whole year and that pain is indescribable.

2 And that 24-hour shift has caused us as home care
3 physical damage and severely demised our mental and
4 physical health. Because of the 24-hour shift has
5 caused me severe sleep disability and also caused me
6 anxiety and depression.

7 Every night I have to eat medication to go to
8 sleep. 24 hours is harming us as home care
9 physically and mentally and 1199 Union should be
10 standing next to the workers and not helping the home
11 care companies asking us to work long hours. As a
12 member of the 1199 union, I'm asking 1199 Union to in
13 support of getting rid of 24 hour -

14 SERGEANT AT ARMS: Time has expired.

15 INTERPRETER: Shifts. Can I? And us as home
16 care takers, we all have family and family needs to
17 spend time together. When we are in trouble or when
18 we are down, then we will have the courage to face
19 it. We as home care are person, are people.

20 We need time to spend with families. Nothing
21 else is warmer than home. I just wanted to ask the
22 1199 Union, in this arbitration of 24-hour work, why
23 is there no compensation policies and in the United
24 States, democracy with no compensation policies. We
25 are supposed to sign it. Is that even legal?

3 Without any statistic of for auditing, where does the
4 \$32 million conversation calculated? Where did it
5 come from? Please, 1199 Union, can you come out and
6 say something. Thank you.

7 CHAIRPERSON DE LA ROSA: Thank you. I do have
8 one question for Mr. O'Malley.

9 In your testimony, you speak about the
10 differential between the 60 hours for 60-hour work
11 week, which earns \$1050 a week and that this bill
12 would force them to work only \$50 and the pay will
13 decrease to \$825. Does that mean that you support a
14 60-hour work week rather than a 50-hour work week?

15 BRYAN O'MALLEY: That was put in as an example
16 just to show the additional hours that an individual
17 would have to work and the actual, physical loss of
18 wages that they would have at the end of a week. So,
19 you know as of right now, the Office of the Medicaid
20 Inspector General does audit to make sure that an
21 individual does not work more than 16 hours in one
22 day and that is billed 16 hours.

23 We are in support. We are in support of Assembly
24 Member Epstein's bill, Senator Persaud's bill. We do
25 want to get rid of the overtime clause there and we
do want to define in law, continuous care because

2 there are people who will get assessed that within
3 and if we ban live in but don't define continuous
4 care, then those people will suffer.

5 But we are in support of the concept of the bill.
6 We want these couple small changes, and you know we
7 have been fighting for fair pay. We have been
8 fighting for workers' rights. I myself got arrested
9 in March, fighting for fair pay for home care, so.

10 CHAIRPERSON DE LA ROSA: Thank you so much for
11 answering that question.

12 That concludes this panel. Thank you all so much
13 for coming and we're going to call the next - they
14 can join the next group. Thank you so much. Thank
15 you.

16 So, in addition to the people that are waiting
17 for the Mandarin Interpreter, we also have three
18 people who need the Cantonese Interpreter, Zhu Qin
19 Chen, Mei Kum Chu, and Sau King Chong. So, if
20 they're here, you could please step forward.

21 And if the first three can say their names for
22 the record. These first three. Yup.

23 [UNIDENTIFIED]: [SPEAKING IN OTHER LANGUAGE
24 4:55:30.

25 INTERPRETER: Rong Chen.

2 CHAIRPERSON DE LA ROSA: What is the name again?

3 Say it again.

4 INTERPRETER: Rong Chen and Hong Zhang and uh,
5 Zhu Qin Chen.

6 CHAIRPERSON DE LA ROSA: Say it one more time.

7 INTERPRETER: Rong Chen. R-o-n-g C-h-e-n.

8 CHAIRPERSON DE LA ROSA: Okay, got it. Thank you
9 so much. You may begin.

10 RONG CHEN: [SPEAKING IN OTHER LANGUAGE 4:56:09-
11 4:58:10]-

12 SERGEANT AT ARMS: Time has expired.

13 RONG CHEN: [SPEAKING IN OTHER LANGUAGE 4:58:10-
14 4:58:40].

15 INTERPRETER: Hi everyone. My name is Rong Chen,
16 I have worked two different 12-hour shift jobs. One
17 is at Multicultural Health Care. During that time,
18 that was 2010, the patient has bladder cancer, then
19 from the hospital transfer into 24-hour care.

20 And after the surgery, he had two peeing bags.
21 He is peeing blood. Every night I have to change
22 multiple times diapers for her. Changing clothes,
23 releasing pee and giving her drinks and food and when
24 she gets on the bath, she will be crying in pain, and
25 I have to get up and help her turn and I have never

3 had any consecutive sleep over five hours. My body
4 can't handle anymore, my hands, legs, lower back has
5 muscle spasm. The work is very stressful. Very
6 stressful 24-hour shift. I was only paid 13 hours.
7 I hold onto that till 2013, when she passed.

8 And the second job at Partners in Care, at that
9 time, the patient was unable to get out of bed to go
10 to the bathroom, eat, drinks on the bed, multiple
11 diaper changes over the night, feeding, helping her
12 turn her body. Through our very thorough care, she
13 was able to get out of bed, but she still has
14 dementia which happens overnight. She doesn't sleep.
15 She gets up wants to cook. Every night I have to
16 worry about her falling off the bed. Worry that she
17 would turn on the gas. Worry that she will open the
18 door and just walk out, and I couldn't sleep of
19 course over five hours.

20 One night in 2018, I called her -

21 SERGEANT AT ARMS: Time has expired.

22 INTERPRETER: And she wouldn't answer. I put my
23 hand over her head, yes, she already passed. I did
24 two patients for 24 hours and I watched both of them
25 die in the middle of the night, which left me mental
trauma. For eight years, the eight years of 24-hour

3 shifts has caused me tremendous damage on my physical
4 health. Every night I lose sleep, I have nightmares.
5 I have pain all over my body. Hands, legs, lower
6 back due to long hours of work. I hope that in part
7 of the arbitration to be paid to the workers, the
8 fair amount of compensation and I am in support of
9 the 0175 bill to uhm, to cancel the inhumane 24-hour
10 shift and changing it to 12 hours. Thank you.

11 CHAIRPERSON DE LA ROSA: Thank you.

12 HONG ZHANG: [SPEAKING IN OTHER LANGUAGE 5:01:58-
13 5:02:44].

14 INTERPRETER: Hong Zhang. Hi everyone, my name
15 is Hong Zhang, I have been in health care for nine
16 years now and out of that nine years, for seven
17 years, I worked 24 hours. During that time, I took
18 care of a patient who's confined to bed. She is 90
19 years old and every day, every two hours, I will have
20 to flip her or else she will grow bed sores and I
21 couldn't get any consecutive sleep. For the long
22 term, working as a 24 hour, has caused me trouble
23 sleeping, neck pain, spine pain and also, lower back
24 all has problems.

25 Due to that, I would strongly ask that the City
Council passing the bill and cancel the 24-hour shift

3 and limits the working hours not to exceed 50 hours.
4 That would secure our physical and mental health as
5 the health care workers. That will give better
6 service to the patient as well. Thank you very much.

7 CHAIRPERSON DE LA ROSA: Thank you.

8 UNIDENTIFIED: [SPEAKING IN OTHER LANGAUGE
9 5:04:11].

10 INTERPRETER: Zhu Qin Chen.

11 ZHU QIN CHEN: [SPEAKING IN OTHER LANGAUGE
12 5:04:14-5:06:27] -

13 SERGEANT AT ARMS: Time expired.

14 ZHU QIN CHEN: [SPEAKING IN OTHER LANGUAGE
15 5:06:27-

16 INTERPRETER: Hi, I'm Zhu Qin Chen. I started
17 working at CPC as a home care since 1998. Now that
18 I've been retired, after working for 19 years and I
19 am also a 1199 Union member. I served four patients
20 who needed 24-hour care. That's four days a week,
21 that's 96 hours. It's like I was sold to the
22 patients house. I couldn't take care of my own
23 family and the first patient, was a female patient
24 who had a stroke, almost vegetated.

25 I have to pay close attention for 24 hours every
day. Not allowed to leave whether it's day or night.

3 Every two hours I will have to flip them. I don't
4 want to do 24 hours because at the time, the kid was
5 still young and the company said that if you don't
6 want to do 24 hours, there is no other job for you.

7 For my life, I had no choice but to keep working.
8 The second patient was also a stroke patient who has
9 diabetes, high blood pressure. Many bodily
10 abnormality who requires wheelchair and cane.

11 The third patient, every night I have to - oh,
12 the third patient was oh, what is that called?
13 Schizophrenia who shits and pees on himself, on
14 herself. I have to clean every dirty spot out of her
15 body and my hand is tired from working that I don't
16 even have strength to squeeze water out of a towel.

17 SERGEANT AT ARMS: Time expired.

18 INTERPRETER: The last patient is - am I allowed
19 to continue? Can I continue?

20 CHAIRPERSON DE LA ROSA: Uhm, please finish.
21 Please conclude.

22 INTERPRETER: Got it. I will do it real quick.
23 The last one is a person with dementia. Several
24 night I could not sleep. I can't sleep, so I don't
25 sleep. One time the patient snuck out and scared the
hell out of me and I pulled her back because she

3 didn't know what she was doing. This long time of
4 doing this work has made my body and mental suffer.
5 My hands, my lower back is pain. Doctors don't think
6 I'm fitting to work this kind of job anymore and
7 finally, I applied for early retirement. I am in
8 support of 0175, canceling 24 hours, splitting into
9 two shifts and I would request all these years of 24-
10 hour work pay to get those payments. Thank you very
11 much.

12 CHAIRPERSON DE LA ROSA: Thank you so much. Up
13 next, I think we have the Cantonese Interpreter
14 right? We have Mai Kum Chu.

15 MAI KUM CHU: [SPEAKING IN CANTONESE 5:09:59-
16 5:12:03]—

17 SERGEANT AT ARMS: Time expired.

18 MAI KUM CHU: [SPEAKING IN CANTONESE 5:12:04-
19 5:12:17].

20 INTERPRETER: Hi, my name is Mai Kum Chu. I have
21 been working as a home aide since 2003 as a 24-hour
22 shift aide. For four days, I need to assist my
23 patient to get from bed and assist them to going to
24 the bathroom, which caused an injury to my back, and
25 I had to stop work for a half a year. And for three
to four days, it amounts to 72 to 96 hours work week.

3 And I've been doing that until July 2013 and
4 during a hot summer day, I worked for a whole day
5 causing me to faint and breaking my hand and even to
6 this day, it has been recover even though I had
7 surgery, and the pain continues till now ever since.

8 Working 24-hour shifts is equal to taking over a
9 life. This is a form of invisible violence. Me and
10 many other home aides also got injured and become a
11 patient. In the near future, I will also need a home
12 aide health assistant and I hope she doesn't need -
13 he or she doesn't need to work a 24-hour shift. I
14 support Intro. 0175 to stop such violence against
15 home aide. Thank you.

16 CHAIRPERSON DE LA ROSA: Thank you. We have Sau
17 King Chong and Mei Xian Li (SP?).

18 SAU KING CHONG: [SPEAKING IN CANTONESE 5:13:39-
19 5:14:56]. Thank you.

20 INTERPRETER: Hi, my name is Sau King Chong.
21 I've been working as a home aide for ten years, 24
22 hours home aide shift for three years. At night, my
23 patient always wake me up causing me not able to
24 sleep. And I complained to my company for the lack
25 of sleep. My company told me that if you don't need
26 24-hour shift than we are not going to arrange work

3 for you but to live, I have no choice but to work, to
4 continue to work. And the result is that the 24-hour
5 shift is causing me to consistently losing sleep,
6 having back pain and foot pain. This is all
7 accumulative.

8 24 hours home shift is not something that a human
9 should do for consistently. And it should be
10 removed. The 24-hour shift should be removed because
11 this is a very, very hard schedule to work with. And
12 also, it shouldn't be more than 50 hours. I'm come
13 here today in support of Intro. 0175 to remove 24-
14 hour shift days and hopefully it can be divided into
15 two shifts. This way it will be beneficial for the
16 workers and patient and to increase the mental
17 capacity for the patient as well. Thank you.

18 CHAIRPERSON DE LA ROSA: Thank you. Can the
19 Interpreters, all three Interpreters come to the
20 microphone, Interpreters. I'm going to say this
21 message in English and if you can interpret it. For
22 everyone who is in person or virtual, if you need
23 interpretation services today, please raise your
24 hand. In person or virtual, virtually you can use
25 the raise hand function.

3 INTERPRETER 1: [SPEAKING IN OTHER LANGUAGE
4 5:16:55-5:17:10].

5 INTERPRETER 2: [SPEAKING IN OTHER LANGUAGE
6 5:17:14-5:17:40].

7 CHAIRPERSON DE LA ROSA: If they plan to testify.

8 INTERPRETER 2: [SPEAKING IN OTHER LANGUAGE
9 5:17:42-5:17:51].

10 CHAIRPERSON DE LA ROSA: Maintain your hands
11 raised. Maintain your hands raised.

12 INTERPRETER 2: [SPEAKING IN OTHER LANGUAGE
13 5:17:56-5:18:07]. Oh, and one thing. In record of
14 Mei Kum Chu, there was something that was missing due
15 to translation that uh, she is also a member of 1199
16 Union. That's all. Mei Kum Chu, Mei Kum Chu, Mei
17 Kum Chu, sorry. Thank you.

18 CHAIRPERSON DE LA ROSA: Thank you. Okay, what
19 about Mei Xian Li? Is Mei Xian Li here to testify?

20 INTERPRETER: Could it be Mei Xian Li?

21 CHAIRPERSON DE LA ROSA: Yes.

22 INTERPRETER: Got it. Yeah, she's here, right
23 there. Do you need everyone here?

24 CHAIRPERSON DE LA ROSA: We need that one, Mei
25 Xian Li and then we'll wrap up this panel. Thank
you.

3 INTERPRETER: Mei Xian Li.

4 MEI XIAN LI: [SPEAKING IN OTHER LANGUAGE
5 5:19:32-5:20:51].

6 INTERPRETER: Hi everyone. My name is Mei Xian
7 Li. I've been working 24-hour care for eight years,
8 usually four days of consecutive 24 hours and
9 sometimes five days. My patients are usually
10 confined to bed. Every two hours I have to flip her
11 over. She pees and goes to the bathroom on her bed.
12 I don't have sleep at night, very difficult. When I
13 asked my company if I could work less hours, the
14 company would just tell me that there is only 24 hour
15 shifts available, if you don't do it, I can't arrange
16 any other job for you.

17 For the longest time, I'm working for the 24
18 hours. It has caused me trouble sleeping. All my
19 joints are broken to pieces. I have pain all over my
20 body. I retire this year, but my body cannot allow
21 me to do any more work. I am here today in support
22 of City Council Intro. 0175 in getting rid of 24-hour
23 shift and splitting them to two and limiting the
24 weekly hour not to exceed 50 hours. Thank you
25 everyone.

3 CHAIRPERSON DE LA ROSA: Thank you so much to
4 this panel for testifying. Thank you so much for
5 coming. We're going to move to the next panel, and
6 we need the Spanish interpretation for this panel.
7 Alvaro Ramirez Guzman, Elvia Fernandez (SP?) and Dalia
8 Perez (SP?). We're ready to begin when you are.

9 ALVARO RAMIREZ GUZMAN: SPEAKING IN SPANISH
10 5:23:13-5:24:35].

11 CHAIRPERSON DE LA ROSA: Gracias.

12 INTERPRETER: My name is Alvaro Ramirez. I have
13 worked for more than 20 years as a home care worker.
14 Always with agencies of 1199.

15 For 15 years, I worked 24-hour shift, four or
16 five days a week without sleeping, without eating.
17 It was horrible. One gets sick. For this reason, I
18 told my agency that I didn't want to work more 24-
19 hour shifts. The agency told me to quit. They took
20 reprisals against me. I never got a call from 1199.

21 A lot of my colleagues, they feel pressured to
22 accept 24 hour shifts to keep their medical insurance
23 from the union. Besides all that, it is very hard to
24 work 24 hours. They do not pay us more than 13 of
25 those hours.

2 I organize myself with some other colleagues of
3 the first Chinese Presbyterian to claim for the wages
4 of all these years that they have stolen from us.
5 I'm here together with other workers to say, no more
6 24 hours. Thank you.

7 CHAIRPERSON DE LA ROSA: Gracias. Elvia.

8 ELVIA FERNANDEZ: [SPEAKING IN SPANISH 5:26:09-
9 5:28:12]-

10 SERGEANT AT ARMS: Time has expired.

11 ELVIA FERNANDEZ: [SPEAKING IN SPANISH 5:28:13-
12 5:28:38].

13 CHAIRPERSON DE LA ROSA: Gracias.

14 ELVIA FERNANDEZ: [SPEAKING IN SPANISH 5:28:39-
15 5:28:42].

16 CHAIRPERSON DE LA ROSA: Gracias.

17 INTERPRETER: My name is Elvia Fernandez. I
18 worked some years at 24-hour shifts. I'm a member of
19 1199. All my cases are with bedridden patients.
20 These are very strong cases because they require
21 intense care. I tore both my shoulders, my knees and
22 my left arm. I have back problems. I have hip
23 problems. Problems with my left leg. I had to do a
24 lot of strain all day also. I have to take care of
25 my patients for 24 hours and I couldn't sleep.

3 The coordinator from First Chinese told me to not
4 - to ignore my patient and leave the patient alone,
5 so I could rest. I am a human being and I thought
6 about my mother and how I wish that somebody would
7 take care of her. I could not ignore my patient when
8 my patient called me in the nights. I could not stop
9 thinking about my mother. If something happened to
10 her.

11 When home attendants sleep, a lot of things could
12 happen. I have a colleague that used to share a
13 patient with me. One night when she fell asleep,
14 unfortunately the patient fell, and my colleague was
15 fired. It is sad because she was working 24-hour
16 shifts for a long time, and she was very tired. If
17 24-hour shifts are divided, it would give the
18 opportunity to home attendants to rest and to have
19 more energy for their patients.

20 I think that if 24-hour shifts are divided, it
21 would be better for the patient and for home
22 attendants. A lot of home attendants right now, need
23 another home attendant. It is horrible. My family
24 also suffered greatly. My daughter got pregnant very
25 early and she could not go to school because I was
not close to her to take care of her.

3 SERGEANT AT ARMS: Time has expired.

4 INTERPRETER: I'm about to finish. We are not
5 slave to work 24-hour shifts without pay. I hope
6 that 24-hour shifts are eliminated. Thank you.

7 CHAIRPERSON DE LA ROSA: Thank you. Gracias.
8 Thank you. Dalia Perez.

9 DALIA PEREZ: [SPEAKING IN SPANISH 5:31:14-
10 5:32:37].

11 INTERPRETER: Okay, so just to confirm for
12 verification. My name is Dalia Perez. I am a home
13 attendant. I work for HHA. I come to support Intro.
14 0175. I work at an agency that doesn't have a union
15 since 2016. I work 24/7 and they give me four days,
16 but all my shifts for years have been 24-hour shifts
17 because there are some patients that do not want
18 another home attender. My patients are bedridden,
19 and they are patients that you really have to take
20 care of them all night. Because of this, I did not
21 take care of my daughter and my husband. They both
22 died last year. And I couldn't be close to them to
23 take care of them.

24 Just for me being -- for working 24-hour shifts, I
25 had to sleep even in the furniture and the
consequences of this is back pain. And because I

3 couldn't get enough sleep, my blood sugar is very
4 high. Working 24 hours has affected my health. We
5 need to divide 24-hour shifts and to not accept 24-
6 hour shifts. Otherwise, they would leave us without
7 work for one or three months. Good evening.

8 CHAIRPERSON DE LA ROSA: Thank you so much for
9 coming. Gracias [SPEAKING IN SPANISH 5:34:20-
10 5:34:23]. Gracias, thank you.

11 I'm going to ask the Interpreters for the
12 Cantonese and Mandarin to come up to read a few
13 names. We want to make sure the folks are here.
14 Okay, announce them please.

15 INTERPRETER: Ying Na Ruang, Yu Fang Lin, Hong Wu
16 Chen. Anna Zhang, Meng Shao Ning, Rong Shi Jang (SP?)
17 and uh, oh, yeah, I think that's really it. That's
18 it.

19 CHAIRPERSON DE LA ROSA: Can you - when they
20 start, can you say the name so we can check them off
21 please? Thank you.

22 INTERPRETER: Hong Wu Chen.

23 HONG WU CHEN: [SPEAKING IN OTHER LANGAUGE
24 5:35:52-5:38:03]-

25 SERGEANT AT ARMS: Time has expired.

2 HONG WU CHEN: [SPEAKING IN OTHER LANGUAGE
3 5:38:04-5:38:24].

4 INTERPRETER: Thank you. Uhm, my name is Hong Wu
5 Chen. I work for Priority, company Priority as of
6 home care. I wanted to talk about my personal
7 experience working as a 24-hour worker. Working for
8 24 hours for more than three years, my body has broke
9 down.

10 I can no longer do 24 hours. My patient was a
11 patient who was confined to bed. He is over 100
12 years old with pain all over his body. I have to
13 help the patient to the bathroom five or six times a
14 night. During that process, I have to carry her and
15 for the longest time, I couldn't sleep, and she
16 refuses to wear adult diaper and with that, I fear
17 for her. And due to constantly carrying patient, I
18 suffered injury to my lower back, to my leg and many
19 others. And working with 24 experience, my
20 conclusion is that it is very harmful for your
21 physical health and in the last period of time, I
22 couldn't hold on anymore. I made a call to the
23 company saying that I couldn't go on with it anymore.
24 And then the company said that, oh, I can't find
25

3 anyone else. You have to hold on. If you don't do
4 it, I don't have any other job for you.

5 And after talking -- after finishing talking on
6 the phone, my heart hurts for her to survive, I have
7 no choice but to continue and I worked till the
8 patient has passed away. During that time, I was
9 suffering and now that a lot of other people are
10 still suffering from the working as 24-hour shift. I
11 hope that --

12 SERGEANT AT ARMS: Time has expired.

13 INTERPRETER: The medical, the home health aide
14 would not be the same as me crushing their body.
15 It's not worth it. No money can buy good health.
16 I'm here today in supporting of getting rid of 24
17 hour. Thank you everybody.

18 CHAIRPERSON DE LA ROSA: Thank you.

19 UNIDENTIFIED: [SPEAKING IN OTHER LANGUAGE
20 5:41:00-5:41:20].

21 INTERPRETER: My name is Yu Fang Lin. I've been
22 a home care since 2009 and up until this year in
23 April. (SPEAKING WITH YU FANG LIN 5:41:29-5:41:34)

24 YU FANG LIN: SPEAKING IN OTHER LANGAUGE 5:41:34-
25 5:42:06.

3 INTERPRETER: So, my patient is a patient with
4 diabetes and depression and the family has got her a
5 ringer. One for me and one for her.

6 YU FANG LIN: [SPEAKING IN OTHER LANGAUGE
7 5:42:35-5:42:44].

8 INTERPRETER: If they get up, I will have to get
9 up to.

10 YU FANG LIN: [SPEAKING IN OTHER LANGUAGE
11 5:42:48-5:42:55].

12 INTERPRETER: They sleep in the morning. They
13 don't sleep at night.

14 YU FANG LIN: [SPEAKING IN OTHER LANGUAGE
15 5:43:00-5:43:13].

16 INTERPRETER: In the morning, I have to work. I
17 have to prepare meals. I have to clean; I have to
18 help her shower and everything. I don't have time to
19 sleep in the morning.

20 YU FANG LIN: [SPEAKING IN OTHER LANGUAGE
21 5:43:26-5:43:47].

22 INTERPRETER: And then because of this, I have a
23 lot of medical conditions and I don't have a benefit
24 card and I can't afford to go to the doctor and check
25 them out. Now that my family member are not allowing
me to work anymore.

1
2 YU FANG LIN: [SPEAKING IN OTHER LANGUAGE
3 5:44:06-5:44:11].

4 INTERPRETER: And I stopped working this year
5 since April and now I gained ten pounds.

6 YU FANG LIN: [SPEAKING IN OTHER LANGUAGE
7 5:44:19-5:44:27].

8 INTERPRETER: So, I want the 1199 Union to get
9 justice.

10 YU FANG LIN: [SPEAKING IN OTHER LANGUAGE
11 5:44:34-5:44:48].

12 INTERPRETER: And uh, I had to survive so I had
13 to work but now that my family does not allow me
14 anymore, it's very difficult.

15 YU FANG LIN: [SPEAKING IN OTHER LANGUAGE
16 5:44:59-5:45:01].

17 SERGEANT AT ARMS: Time has expired.

18 YU FANG LIN: [SPEAKING IN OTHER LANGUAGE
19 5:45:03].

20 INTERPRETER: That's it. Thank you.

21 YU FANG LIN: [SPEAKING IN OTHER LANGUAGE
22 5:45:05].

23 INTERPRETER: Thank you every body.

24 CHAIRPERSON DE LA ROSA: Thank you.
25

3 INTERPRETER: Uhm, I'm sorry, one thing. For
4 Hong Wu Chen, I think I forfeited something in the
5 interpretation. That she suffers from Parkinson's,
6 was diagnosed last year. Yeah, I'm sorry about that.

7 CHAIRPERSON DE LA ROSA: Okay, thank you for
8 sharing. Thank you.

9 INTERPRETER: This is Ying Na Ruang.

10 CHAIRPERSON DE LA ROSA: Can you spell the name?

11 INTERPRETER: Ying Na Ruang Y-I-N-G N-A R-U-A-N-
12 G.

13 YING NA RUANG: [SPEAKING IN OTHER LANGUAGE
14 5:45:53-5:46:49].

15 INTERPRETER: Hi, my name is Ying Na Ruang. I've
16 been working as a home aide for 12 years and as a 24-
17 hour shift home aide, I've been doing it for six to
18 seven years. I take care of [INAUDIBLE 5:47:04]
19 patient. Each night I have to pick him up six times,
20 so I cannot really sleep.

21 And also, every two hours I need to help him flip
22 over and sometimes their family will call me in the
23 middle of the night to wake me up, so further
24 reducing my sleep. I come here today in support of
25 Intro. 0175 to remove the 24-hour shift work days and
also limit the work hours into 50 weeks - 50 hours,

3 I'm sorry. We also need rest and spend time with
4 family. Thank you.

5 CHAIRPERSON DE LA ROSA: Thank you so much.
6 Thank you all for coming and testifying today. Can I
7 have the Mandarin Interpreter come up and read these
8 names, make sure we didn't miss anyone?

9 INTERPRETER: [INAUDIBLE 5:48:33-5:48:57]. Okay,
10 I don't think so. Thank you.

11 CHAIRPERSON DE LA ROSA: Thank you.

12 COMMITTEE COUNSEL: Our next panel of six
13 witnesses will consist of all virtual witnesses. The
14 following six people will be called. Margaret
15 Glover, Elizabeth Delia Rafisio(SP?), Soji Adu, Ravi
16 Reddi, Lia Fiol-Matta, Kathy Fabraio.

17 I will remind all the witnesses; you have two
18 minutes to testify. Please stop testifying when the
19 Sergeant at Arms calls time. Margaret Glover, you
20 may begin.

21 SERGEANT AT ARMS: Time. Starting time.

22 COMMITTEE COUNSEL: Margaret Glover, you're
23 unmuted. It seems we're having some technical
24 difficulties. We will move on to - oh, Margaret you
25 are unmuted.

BEVERLY HANSON: Hello, yes.

3 COMMITTEE COUNSEL: Please begin your testimony.

4 BEVERLY HANSON: Am I open?

5 COMMITTEE COUNSEL: Yes, please begin your
6 testimony.

7 BEVERLY HANSON: Okay. My name is Beverly
8 Hanson, Local 389 and I'm going to read Margaret's
9 testimony because she won't be able to make it
10 because she is at work.

11 COMMITTEE COUNSEL: Margaret Glover, are you
12 unmuted on Zoom?

13 BEVERLY HANSON: Unmuted. Hello?

14 COMMITTEE COUNSEL: Whoever is testifying, could
15 you please state your name for the record?

16 BEVERLY HANSON: I'm Beverly Hanson.

17 COMMITTEE COUNSEL: Please begin your testimony.
18 Thank you.

19 CHAIRPERSON DE LA ROSA: Please begin.

20 BEVERLY HANSON: Okay.

21 SERGEANT AT ARMS: Time has started.

22 BEVERLY HANSON: Good afternoon, okay, Ms. De La
23 Rosa and members of the Civil Council. I thank you
24 for this opportunity to represent Margaret Glover,
25 the President of Local 389, representing over 6,000
workers in the New York area.

3 While the intension of the bill is to improve the
4 working conditions of our members, as home care
5 workers for the past 42 years, I oppose to this bill
6 in its current state. Okay, and once again, I am
7 arguing that the Council take this concern of DC37
8 Local 389 members into consideration with this bill.
9 We applaud your advocacy for us, and we are ready to
10 partner in tackling this issue as we face our jobs.
11 Thank you.

12 COMMITTEE COUNSEL: Thank you for your testimony.
13 We're actually going to enter up the list of
14 panelists that I originally announced to call a
15 registered witness on the interpretation services
16 Vincent Cho. My mistake, Vincent Cho, you can begin
17 your testimony.

18 VINCENT CHO: Okay. Hello everyone, my name is
19 Vincent Cho. I'm a Staff Organizer from Chinese
20 Staff Workers Association. In the past few months,
21 hundreds of home care workers came to us to talk
22 about how they work 24-hour work day. No time to
23 sleep, mostly continue work three to four days per
24 week in patients home, taking care of the patient.

25 The patient who is able to get the 24-hour
service, that means the patients' health condition is

3 really serious. For the bedbound worker, you know
4 home care worker had to every two hour help the
5 patient attend the body, changing diaper, otherwise
6 the patient will get bed sores. If you don't change
7 the diaper, you have to spend more time to clean up.

8 For those workers who work 12-hour shifts, their
9 condition means even worse. Home care worker, you
10 know every hour, every time watching the patient
11 because for those are very serious Alzheimer's
12 patient, they will go to the kitchen, turn on the
13 gas, cause the danger. Or they run out to the
14 apartment, they don't know how to get home.

15 For long time, the worker who you know home care
16 worker, most have the similar health condition for
17 insomnia, lower back pain, shoulder pain, finger pain
18 and also they cause a lot of family issue because
19 they work too many 24-hour work days. The kids don't
20 go to school. They don't know. The husband not
21 coming home, gambling all night. She don't know.

22 So, the home care worker, talk about a lot of
23 family issue. They need the time to taking care of
24 the family, to spend time with the families. So, I'm
25 here today also, I want to condemn those people,
those organizations, 1199-

3 SERGEANT AT ARMS: Time expired.

4 VINCENT CHO: To force worker, continue work 24
5 hour. They cannot ask the worker to work more than
6 50 hours. They don't understand home care worker
7 work, or they are racist, against women with color.

8 SERGEANT AT ARMS: Time has expired.

9 VINCENT CHO: So, I'm here today to support the
10 bill. Thank you.

11 CHAIRPERSON DE LA ROSA: Thank you.

12 COMMITTEE COUNSEL: We'll now return to the
13 virtual panel. The next witness is Elizabeth Delia
14 Rafisio.

15 SERGEANT AT ARMS: Time has started.

16 ELIZABETH DELIA RAFISIO: Hi everyone. Thank you
17 for the panel today and it's wonderful to hear
18 everyone care so much about peoples working
19 conditions and hopefully also caring about disabled
20 people.

21 I'm here as both a home care worker and also as a
22 mother of a severely disabled young adult who is -
23 people are describing what they have to do and it's
24 really hard work and I understand that because that's
25 my life 24/7. And it has been, and it has been the
lives of parents of severely disabled individuals.

3 And by and large, we parents do not support this
4 bill. I think it's terrible that people are forced
5 to work 24 hours when they don't want to but this
6 bill limits overtime to 50 hours a week. If you have
7 a case with split shifts, so you get two 12 hour
8 shifts a day, and you work — people want to work for
9 instance five hours a week. That's 60 hours, that's
10 not 50. Limiting the overtime to 50 hours a week
11 will have a very bad effect on disabled people,
12 especially people who are very disabled and I can say
13 that from experience.

14 I would also like to say that I've heard other
15 speakers mention that people aren't going to work
16 less, they're just going to work more for less money
17 because they won't be making overtime. So, I don't
18 understand this bill because you guys don't limit
19 fire fighters, you don't try to limit police workers.
20 Why are you limiting people who you know need you the
21 most, who are the most vulnerable?

22 So, it's like two people. Two groups are being
23 punished here, those who are disabled and home care
24 workers who want the option to work overtime. So, I
25 with all respect and understanding —

SERGEANT AT ARMS: Time has expired.

3 ELIZABETH DELIA RAFISIO: Thank you for the time.

4 CHAIRPERSON DE LA ROSA: Thank you.

5 COMMITTEE COUNSEL: Our next witness is Soji Adu.

6 SERGEANT AT ARMS: Time has started.

7 SOJI ADU: Hi, could I have a few more seconds,
8 it wasn't allowing me to unmute.

9 First of all, shout out to all the New York City
10 Council Member staff. A small group, a small
11 delegation met with many of the Council Member staff
12 even though a hand full of Council Members kind of
13 shut the door and fished us off to the hearing. I
14 want to give a shoutout to all the staff. They may
15 be our unsung heroes today.

16 Point number two, no doubt the exploitation, the
17 low wages and the hours, all need to be addressed.
18 That gentlemen mentioned shame on all the other
19 organizations, but I beg to differ. We are against
20 Intro. 0175 because we live in an era where it's even
21 hard to get people to work in Walmart and as Council
22 Member Bottcher eloquently inferred through the
23 method, this needs to be dealt with.

24 Also, third point, we're living in an aging
25 population where it's hard to find home care workers
as I just mentioned. And then after hearing from all

3 the injured people today and all of the people that
4 have been debilitated, the need for home care is
5 rising more than the references to manure. So, let
6 me just read my testimony real quick. I'm probably
7 at a minute. Highly esteemed Council Member, Bronx
8 Independent Living Services shares the same concerns
9 that many individuals and organizations have already
10 expressed. Although Intro. 0175 has good intentions,
11 it is nonetheless really flawed and will cause
12 irreparable harm for persons with disabilities and
13 the elderly up to and including forced insti-

14 Okay, moreover, the passage of Intro. 0175 will
15 spawn financial harm to a flee of health care workers
16 that stand to lose pay and to be severely
17 inconvenienced by potentially having to piece hours
18 together with different clients.

19 They're going to still get their money. That
20 wasn't in the testimony. Okay, so and this is not to
21 mention -

22 SERGEANT AT ARMS: Time has expired.

23 SOJI ADU: The tension between state and city
24 funding or lack of -

25 CHAIRPERSON DE LA ROSA: Your time has expired.

SOJI ADU: [INAUDIBLE 5:59:56].

3 CHAIRPERSON DE LA ROSA: Thank you for coming
4 today.

5 SOJI ADU: Thank you so much. I just went a
6 little over because I lost about 20 seconds in the
7 beginning. Thank you.

8 COMMITTEE COUNSEL: Our next witness is Simone
9 Mayhew.

10 SERGEANT AT ARMS: Time has begun.

11 SIMONE MAYHEW: Can you unmute me? Hi, good
12 evening. Thank you Chair De La Rosa and members of
13 the Civil Service and Labor Committee for the
14 opportunity to present testimony about the
15 Introduction 0175 of 2022. My name is Simone Mayhew
16 and I'm the Director of Elder Care at St. Nicks
17 Alliance Home Care Agency here in Williamsburg
18 Brooklyn.

19 We've been providing home care services for over
20 40 years. As a nonprofit home care provider, St.
21 Nicks Alliance Home Care cares deeply about the
22 rights and fair pay for our workers. We are outraged
23 by the unjust state regulation that only pays workers
24 for 13 hours in a 24-hour shift. This policy creates
25 a structure that relies on exploiting the workforce.
St. Nicks with several providers from the community-

3 based home care work group have successfully lobbied
4 and supported worker wage increase. Due to the
5 growing needs of people with disabilities and the
6 increasingly aging population, the home care sector
7 remains the largest employer in the nation.

8 Yet it continues to face shortages. New York
9 State has over 330,000 home health care workers with
10 187,000 of those workers here servicing New York City
11 alone. With growing demand, New York is the
12 epicenter of a national home care worker shortage.
13 This bill will exacerbate that shortage. This bill
14 also exacerbates the fiscal impact that we're
15 suffering as not-for-profit home care providers.

16 Urgent action is needed to stabilize the home
17 care sector and fairly compensate its workforce. We
18 regret that Intro. 0175 is not the way to do this.
19 Rather than pursue this bill, we urge the New York
20 City Council to address the problem by supporting the
21 Epstein and the Persaud bill.

22 As a community-based provider, we provide service
23 that are often personalized –

24 SERGEANT AT ARMS: Time has expired.

25 SIMONE MAHYHEW: Let me just finish one thing.

We believe that home care workers are best able to

3 deliver quality of care when the value of their work
4 if fully acknowledged and through fair compensation
5 we support the Epstein and Persaud bill.

6 I will forward you my testimony. We stand in
7 solidarity with the workers. We do not support 0175
8 and we encourage fair compensation for these workers.
9 We heard their arguments today. It's heartbreaking
10 and we stand with them in solidarity.

11 CHAIRPERSON DE LA ROSA: Thank you.

12 SIMONE MAYHEW: 0175 is not the way to go.

13 CHAIRPERSON DE LA ROSA: Thank you so much.
14 Thank you.

15 COMMITTEE COUNSEL: Our next witness is Lia Fiol-
16 Matta.

17 SERGEANT AT ARMS: Time has begun.

18 LIA FIOLO-MATTA: Good evening. My name is Lia
19 Fiolo-Matta, and I am the Senior Council at Latino
20 Justice. A national civil rights organization with
21 headquarters in New York City. We are deeply
22 concerned with the dignity and wellbeing of home
23 health aides who have been subjected to 24-hour
24 shifts and urge all members of the City Council to
25 support this bill. 24-hour shifts cause harm to
workers, mostly immigrant women of color. Long work

3 days keep workers away from their families as they
4 are often working back-to-back shifts, sometimes
5 amounting to 72 consecutive hours.

6 Employers too often fail to compensate workers
7 for all of the hours worked. 24-hour shifts strain
8 workers health as home care is a high stress job that
9 interrupts sleep. These shifts often cause high
10 blood pressure, pre diabetes, and frequent illnesses
11 because home attendants are unable to rest. Night
12 work has also been classified as a plausible cause of
13 cancer. Currently, employers are required to pay
14 home health care aides for only 13 hours of labor.
15 Employers must track these hours and pay workers for
16 24 hours if they do not get sufficient rest.

17 Workers report that employers too often violate
18 these rules, and the law has not made a difference in
19 their work conditions. In New York City, there are
20 more than 240,000 home attendants, about five to
21 seven percent of whom work 24-hour shifts. Opponents
22 of this act argue among other things that the cost of
23 fairly compensating these workers is too high.
24 Failure to support this legislation because of its
25 price tag however is the denial of basic human rights
for some of the city's most marginalized people.

2 The No More 24 Act would ensure that home health
3 care workers could rest and spend time with their
4 families and be paid for every hour of their labor.
5 We urge the City Council to please pass this bill.
6 Thank you.

7 CHAIRPERSON DE LA ROSA: Thank you.

8 COMMITTEE COUNSEL: Our next witness is Kathy
9 Fabraio.

10 SERGEANT AT ARMS: Time has begun.

11 KATHY FABRAIO: Thank you. I'm Kathy Fabraio,
12 President of the New York State Association of Health
13 Care Providers representing the spectrum of home care
14 agencies across New York State. HCP recognizes that
15 our home care workforce is essential. The people
16 home care serves are also essential. Intro. 0175 as
17 written, does not provide a solution to the 24-hour
18 work day. We strongly encourage the Council to work
19 closely with state legislators to address the
20 systemic challenges of 24-hour care in New York.

21 HCP does not support coercing aides to work hours
22 they do not want in order to keep their jobs. But
23 limiting voluntary overtime does not work either.
24 Workers should have the freedom to work hours if they
25 wish.

3 If my members could pay workers for 24 hours they
4 would but state laws, regulations and Medicaid
5 funding and reimbursement policies make this
6 impossible. 0175 forces live-in cases to at a
7 minimum be converted into two 12-hour split shifts,
8 which would require at least two aides every day
9 instead of one.

10 Agencies cannot shoulder this added cost without
11 commensurate reimbursement, so the states budget
12 allocation for home care must be dramatically
13 increased to cover the cost of additional workers.
14 This can't be done at the City Council level.

15 In light of the crippling workforce shortage, the
16 worst in the nation, there aren't enough aides to
17 meet the increased need this bill would trigger.
18 Many New Yorkers will go without care. The proposed
19 legislation creates a burden on consumers and
20 society. The unintended yet likely consequences of
21 this legislation are increased emergency department
22 visits, social admissions to hospitals and
23 institutionalization. All are an inefficient use of
24 resources leading to rapidly escalating medical costs
25 and counter to what everyone of us wants.

SERGEANT AT ARMS: Time has expired.

3 KATHY FABRAIO: To remain at home. The solution
4 is not limiting the hours but to work with the state
5 to provide a systemic solution and we are here to
6 work with you to do that. Thank you.

7 COMMITTEE COUNSEL: Thank you for your testimony.
8 Our next – this concludes this panel of witnesses.
9 Our next panel of witnesses will be entirely virtual.
10 The six individuals we'll be calling in the following
11 order are Gina Barbara, Alfredo Cardillo, Kathryn
12 Freed, Ki Yu Lee, Jeannine Kiely, Richard Corman.

13 Gina Barbara, you may begin when the Sergeant
14 starts the clock.

15 SERGEANT AT ARMS: Time has begun.

16 GINA BARBARA: Good evening. My name is Gina
17 Barbara and I'm here as one of the many advocates
18 representing downstate New York Downstate New York
19 ADAPT. We are a grassroots non-hierarchical
20 community of individuals with various disabilities.
21 We represent five counties in New York City, two
22 counties on Long Island, as well as Westchester,
23 Dutchess, Orange, Rockland, Putnam, Ulster, and
24 Sullivan counties.

25 I come to discuss my strong opposition of the
proposed bill Intro. 0175-22. First there is already

3 a shortage of home care attendants due to the poor
4 wages received, which is less than the salary made in
5 the fast-food industry. The proposal would further
6 restrict our workers by placing limitations by only
7 allowing for a workers to work 12 hours in a 24-hour
8 period and a combined total of 50 hours weekly.
9 Thus, leaving a lot many for an extension of these
10 guidelines in an emergency situation.

11 I was hoping for clarification as to what was an
12 emergency. This proposal, while good intentioned,
13 poses an immediate danger and the lack of
14 understanding of the needs of both disabled, as well
15 as elderly constituency. It also subjects
16 individuals to be placed in a hospital or
17 institutionalized setting. Thus, placing them in
18 higher health risks and stripped of their rights and
19 freedoms.

20 Another key issue is the violation of State
21 Department of Health regulations, violations of the
22 Americans with Disabilities Act, and a violation of
23 the Olmstead position.

24 In closing, I asking this Committee to opposed
25 this bill due to its dangerous and immoral nature and
I also caution the immediate emergency that will take

3 place should this bill become law, as 24-hour care
4 occurs statewide -

5 SERGEANT AT ARMS: Time has expired.

6 GINA BARBARA: In New York City. I thank you for
7 the opportunity to speak today and I have also
8 submitted a more elaborate written testimony for you.
9 Thank you.

10 COMMITTEE COUNSEL: Thank you for your testimony.
11 Our next witness is Alfredo Cardillo.

12 SERGEANT AT ARMS: Time has begun.

13 ALFREDO CARDILLO: Am I on mute or let's see.
14 There we go. Thank you very much. I'm Al Cardillo,
15 I'm the President of the Home Care Association of New
16 York State. I want to commend the Council for
17 conducting this hearing today and the attention that
18 you're bringing to the needs of recipients and
19 personnel and organizations who provide this
20 exceptional care.

21 The testimony today has been really exceptional
22 on the goals of the bill and the approaches to
23 advance these goals. The intent and support of the
24 workers and the quality of patient care is very
25 powerful but for many reasons, including those that
were passionately cited by the consumer panel and the

3 consumers throughout the day, as well as Assembly
4 Chair, Health Chair Gottfried and Rivera, the design
5 and jurisdiction within the bill are not the answers
6 and need to be redirected to the state level with due
7 flexibility.

8 You know many of the issues that are being
9 rangled with in the hearing are things like the 13-
10 hour rule, which is a payment rule that I don't think
11 one person today had anything good to say about and
12 that includes us.

13 That rule creates dilemmas for workers, agencies,
14 plans and ultimately the patients. What compounds
15 the shortage is also the overall shortage of
16 personnel and the increasing demand for care, which
17 is inherent in state policies that have been going
18 for 40 years. If we had time, I would love to delve
19 into those with you.

20 Beyond what's been said about home care and those
21 who provide the service, is that it's not just part
22 of the delivery system. Home care service providers
23 are among the most critical in the entire system.
24 The home care venue is the most challenging and
25 dynamic across the entire system and we've heard time

3 again today about the vulnerability and needs of the
4 patients throughout the system.

5 To focus really specifically on 0175, again, we
6 are eager to work with you, to work with the state -

7 SERGEANT AT ARMS: Time has expired.

8 ALFREDO CARDILLO: On solutions that really
9 address these problems and again, we believe that if
10 we could instead advance solutions directed at the
11 state and federal level, we can much better get to
12 the goal. I thank you.

13 COMMITTEE COUNSEL: Thank you for your testimony,
14 our next witness is Kathryn Freed.

15 SERGEANT AT ARMS: Time has begun.

16 COMMITTEE COUNSEL: Kathryn, you're on mute.

17 KATHRYN FREED: Yeah.

18 COMMITTEE COUNSEL: We can hear you now.

19 KATHRYN FREED: You can hear me now. Okay,
20 thanks. Uhm, yeah, hi, my name is Kathryn Freed, I'm
21 a former City Council Member, actually from the first
22 district and a retired New York Supreme Court Justice
23 and I appreciate the opportunity to address the Civil
24 Service and Labor Committee. I support Intro. 0175.
25 I've listened to the entire day of testimony but all
I can say is that two wrongs do not make a right.

3 And allowing the industry to continue to abuse and
4 exploit the home care attendants isn't going to solve
5 the problem. There is clearly a problem There's a
6 problem with the necessity to pay additional monies
7 to acknowledge the value of the services that are
8 being provided and at the same time, there's clearly
9 a timing problem because the bills in Albany have got
10 to move ahead.

11 But I agree with, I think it was Harvey Epstein
12 who said that - and Deborah Glick who said that this
13 bill, Intro. 0175 will be a good way to push the
14 state legislature ahead on this issue. I understand
15 that some of the consumers are concerned about the
16 fact that there may be a lag that would cause a
17 problem for them, but I think that's a problem that
18 can be addressed.

19 But and additionally the entire industry is going
20 to have to change. As I said, they have to value the
21 work that's being provided a lot more than they do
22 right now. It's just too easy to exploit not only
23 women, mostly women but also people of color, largely
24 amounts of immigrants. They are a very easy
25 population to abuse and clearly a lot of this
industry has counted on that -

3 SERGEANT AT ARMS: Time has expired.

4 KATHRYN FREED: So, again, I support passing
5 Intro. 0175 but obviously, a lot of work has to be
6 done and the entire industry has to be reimagined, so
7 that it works to provide the services to the people
8 who need them but also acknowledge and provide
9 services and a decent wage to the service providers.
10 Thank you.

11 COMMITTEE COUNSEL: Thank you for your testimony.
12 Our next witness is Ki Yu Lee.

13 SERGEANT AT ARMS: Time has begun.

14 KI YU LEE: Good evening everyone. My name is Ki
15 Yu Lee, I'm a candidate in political science at
16 University of Illinois Chicago working on my
17 dissertation comparing Chinatown, Chicago, San
18 Francisco and New York City.

19 I'm testifying today in support of the bill
20 Intro. 0175 from my perspective as a researcher. I
21 spent the last two summers doing work in New York
22 City's Chinatown. When I was joining the picket line
23 in front of the museum in Chinese America on
24 Wednesday's and Sunday's, I had conversations with
25 several female Chinese home care attendants who
shared with me their experience in working 24-hour

3 shifts and told me that they themselves became
4 patients.

5 I remember one home care attendant when talking
6 to organizer of the Chinese Staff and Worker
7 Association that "stray violence is visible, but no
8 one can see the damage to our body caused by the 24-
9 hour working shift, physically and mentally."

10 While those Asian American elected officials were
11 voicing their anger and claiming to fight back
12 against anti-Asian hate crime, they are ignoring the
13 exploitation of the Asian American working-class
14 families by the few Asian American elites.

15 By contrast, in 2021, New York State Assembly
16 Member Ron Kim's office, published a report titled,
17 'The Nonprofit War on Workers, Weapons and Labor
18 Violence.' The report found that this Chinese
19 American Planning Council has stolen its workers'
20 wages and subjugated them to the grueling 24-hour
21 shift.

22 The report also documented the CPC stunning
23 content from their own workers rights and the sheer
24 dehumanization that immigrants and women of color
25 live in our economic society. In other cities within
New York State are [INAUDIBLE 6:17:19]. 24-hour care

3 requires two caregivers that alternate every 12
4 hours. New York City should have played a leading
5 role in stopping the 24-hour working shift and
6 capping each shift at 12 hours. But it is not too
7 late, especially for those who refuse to support this
8 bill because of their losing campaign donations,
9 employment opportunities provided by the home care
10 agency such as CPC.

11 One thing we can learn from all the past legal
12 efforts, protests and rally is that collectively we
13 can say no to social injustice. I also want to
14 quickly respond to the State Senator and Assembly
15 Member and other public participants -

16 SERGEANT AT ARMS: Time has expired.

17 KI YU LEE: I believe cities can play a leading,
18 important role in dealing with issues of home care
19 agencies and other issues like immigration, climate
20 change. The argument that this problem should be
21 resolved at a state level, doesn't mean cities can do
22 nothing. Thank you for your time.

23 COMMITTEE COUNSEL: Thank you for your testimony.
24 Our next witness is Jeannine Kiely.

25 SERGEANT AT ARMS: Time has begun.

3 JEANNINE KIELY: Good evening Chair De La Rosa
4 and Council Member Marte. Thank you for still being
5 here. I am Jeannine Kiely; a Democratic District
6 Leader downtown and I support the No More 24 Act.

7 Both my parents were career public school
8 teachers and proud union members and still they both
9 relied on home care workers in their final years.
10 They too were vulnerable and needy, and their home
11 attendants were paid for every hour worked.

12 My mother died of breast cancer at 38. Home care
13 workers cared for her daily, changing her bandages
14 because her wounds never healed and were consistently
15 infected. As a young child, I watched these
16 wonderful caretakers, but I would have been too young
17 to do it myself. She was blessed to get this care.
18 My father suffered Parkinson's disease for more than
19 20 years and needed 24/7 care his last five years.
20 His home attendants changed his diapers, bathed him,
21 managed his complex medicine, strolled him to doctors
22 appointments, calmed him after frequent Parkinson's
23 related nightmare, cooked his meals, helped him in
24 and out of bed and in and out of a wheelchair, tidied
25 his space and most importantly remained on call for

2 whenever he needed help. There was rarely a five-
3 hour period where my dad did not need help.

4 I've heard a lot of suggested improvements today
5 but what I don't like hearing is we have a long way
6 to go or lobby the new Health Care Chair. It wasn't
7 quite said that way but that was how I heard it. If
8 you're a patient in a New York City hospital and 1199
9 SEIU Union worker cares for you and that person is
10 paid for every hour worked.

11 In New York City, the NYPD are paid for every
12 hour worked, including overtime. Same with the
13 Department of Sanitation and many other city
14 agencies. In parts of upstate New York, we heard
15 today home attendants are paid for every hour worked.
16 Why not New York City?

17 In honor of hardworking home care workers, that
18 we may all likely need one day and in memory of our
19 parents, I urge you to pass the No More 24 Act to
20 ensure that our loved ones are cared for by home
21 attendants who are fairly paid. Thank you.

22 COMMITTEE COUNSEL: Thank you for your testimony.
23 Our next witness is Richard Corman.

24 SERGEANT AT ARMS: Time has begun.
25

3 SERGEANT AT ARMS: Richard, I think you're on
4 mute. We can hear you now.

5 RICHARD CORMAN: Okay, let me start again, thank
6 you. Good evening, I'm Richard Corman, President of
7 Downtown Independent Democrats. Thank you for this
8 very powerful and moving hearing. I'm speaking today
9 in favor of this bill to end the 24-hour work day for
10 home care workers.

11 Early this year, our club passed a Resolution,
12 calling for an end to this practice and justice for
13 home care workers. This is as much a moral issue, an
14 issue of humanity as anything. Debate the
15 practicalities. In my mind, there is no debate about
16 working people for 24 hours and paying them for half.

17 This has conflicted, not only with our
18 principles, but our laws and yet it persists, and it
19 seems mostly here in New York City, the very last
20 place we would imagine this happening.

21 Some have said this bill is not the solution, but
22 scathing reports have been written, investigations
23 done, laws passed, and yet it persists. Some have
24 said the solution lays not with this but with the
25 state increasing the funding. While the state
increases the funding have been far from sufficient

3 and does nothing to end the 24-hour shift. It
4 persists.

5 Some say there could be unintended consequences
6 of this bill, if the very real consequences of the
7 24-hour work day persists. Some say we can't stop
8 this practice until we stick some root cause but even
9 the administration admits, here we still are. It
10 persists and all the while, it's on the backs of
11 these mostly immigrant women of color. They bear
12 this and so do their patients.

13 If there is a root cause, who's fixing that? If
14 there is a root cause, something needs to force that
15 to be fixed because nothing has done that so far.
16 It's just so much easier to let these workers, these
17 women suffer. Just don't call it exploitation. Call
18 it compassion for their patients. But this is
19 exploitation and not compassion and it has gone on
20 for way too long.

21 SERGEANT AT ARMS: Time has expired.

22 RICHARD CORMAN: And with history behind us,
23 without this bill, it will just persist. Thank you.

24 CHAIRPERSON DE LA ROSA: Thank you so much. That
25 concludes this panel. The next panel is a folks who
are here in person. Heidi Siegfried Esquire,

3 Bernadette Bird, Elizabeth Valdez, Diane Barrett,
4 Michael Ring, and Marie Hickey. Thank you for your
5 patience.

6 HEIDI SIEGFRIED: Good evening, my name is Heidi
7 Siegfried and I'm the Health Policy Director at
8 Center for Independence of the Disabled New York.
9 Our mission is to help people with disabilities
10 access the care and services they need to live as
11 independently and fully as people without
12 disabilities in the community.

13 This mission is supported for over 30 years now
14 by the Americans with Disabilities Act, our Civil
15 Rights Statute that gives people with disabilities
16 the right to participate in and benefit from all
17 aspects of society to the same extent as their non-
18 disabled peers.

19 Including access to long-term care and by the
20 Olmstead decision authored by Ruth Bader Ginsburg,
21 which gives people with disabilities the right to
22 that care in the community and not in institutions
23 like nursing facilities.

24 Intro. 0175 is legislation that would introduce
25 new chaos into the home care system and would
jeopardize CIDNY mission to ensure that people with

3 disabilities receive services and support to live
4 independently in the community.

5 We have spent our summers trying to secure
6 meetings with cosponsors of the legislation to
7 explain why this legislation is not the solution. As
8 has been mentioned, the Medicaid program is what
9 funds home care and that's where it needs to be
10 addressed. CIDNY specifically has an open doors
11 program, which specifically works to transition
12 people out of nursing facilities to the community,
13 while our open-door specialists report that they
14 secure a split shift care for people who need 24-hour
15 continuous care. We are aware that there are over
16 17,000 New Yorkers who have a Medicaid authorization
17 for live in care. We have no idea what would happen
18 to these people. Would they have to get this care
19 outside of New York City in some other county where
20 they could get it or you know, and they would have to
21 not just you know get care there for a day like most
22 post jobs decision, but they would have to be
23 abandoning their families and social networks that
24 they've built up over their lives.

25 So, we urge the City Council Members to vote
against this legislation.

3 SERGEANT AT ARMS: Time has expired.

4 HEIDI SIEGFRIED: Go back to the drawing board.
5 Identify another avenue to solve this very real
6 problem.

7 CHAIRPERSON DE LA ROSA: Thank you.

8 DIANE BARRETT: Hi, good after- good evening; I
9 almost said good afternoon. Good evening everybody.
10 My name is Diane Barrett. I am the Vice President of
11 Government Relations and Public Affairs at Arch Care.

12 Arch Care is the health care ministry of the
13 Archdiocese of New York. We are one of the nations
14 largest and most dynamic not-for-profit health care
15 systems. Arch Care appreciates the New York City
16 Council's hard work and steadfast dedication to
17 protecting New York's Home Health Aides.

18 Although we agree with the spirit and intent of
19 Intro. 0175, we have concerns about the proposed
20 legislation. The bill as proposed will open an era
21 of unintended consequences and jeopardize the health
22 of thousands of New Yorkers that rely on in home
23 services. Specifically, I am here to discuss the
24 staff shortage and patient care.

25 First, in a poll conducted my morning consult in
August 2021, they reported over nine in ten Medicare

3 beneficiaries say they would prefer to receive post
4 hospital short-term health care at home. Health care
5 services gives the patients the health care choice
6 they desire. Although New Yorkers rely heavily on
7 home health services, the number of people who can
8 receive services is diminishing and the shortage is
9 expected to worsen.

10 According to Mercer in its August 2021 report,
11 demand for health care workers will outpace supply by
12 2025. Home health will have the most significant
13 deficit of workers over the next few years. By 2025,
14 the United States will need over 446,000 health care
15 workers to meet our patient demand. And I do want to
16 point out here, I know that it's been said today that
17 a lot of this has to do with conditions and wages and
18 it does. But it's also important to note that health
19 care workers have retreated from all health care
20 services. A lot of it is just pandemic related.

21 I realize that my time is almost up, so I do want
22 to just thank you all for your interest and support
23 today.

24 CHAIRPERSON DE LA ROSA: Thank you.

25 BERNADETTE BIRD: Hello everyone. My name is
Bernadette -

2 CHAIRPERSON DE LA ROSA: Your microphone is off.
3 Press the button please. Thank you.

4 BERNADETTE BIRD: Hello everyone. My name is
5 Bernadette Bird. I am personal assistant for over
6 ten years working for the customer affiliated with
7 concepts of independence. The best thing of this
8 bill firstly, it's very important for consumers,
9 especially with severe disabilities to have at least
10 one or two workers who have full attention over the
11 consumer needs and equipment.

12 They require stability and a certain level of
13 trust and comfort for their personal assistance who
14 assist them in many ways. This cannot be achieved
15 with a period of workers coming through because these
16 hours limited.

17 Also, in order to make ends meet, they will be
18 forced to work with multiple consumers. This
19 [INAUDIBLE 6:29:12-6:29:16] and wellbeing of
20 consumers. Need I remind you of the COVID-19
21 pandemic, especially in its earlier stages. I stayed
22 COVID-19 free, thus preventing my one and only
23 consumer who has respiratory issues from contracting
24 the potentially deadly virus. The bill also
25 diminishes that my ability to take care of my family

3 and my own wellbeing. I'm a single mother, mother of
4 a child with a learning disability. I won't be able
5 to manage my basic bills and mortgage if I am forced
6 to cut back my working to 50 hours a week. In fact,
7 it takes away my ability to work overtime is
8 available. Most likely, I will be facing foreclosure
9 and I will have to go back to the welfare system and
depend on government programs.

10 Please do not pass this bill. Thank you for your
11 time.

12 CHAIRPERSON DE LA ROSA: Thank you.

13 COMMITTEE COUNSEL: Thank you. That concludes
14 this panel of witnesses. We will call seven
15 registered witnesses who registered to testify
16 virtually next in the following order: Caret Fanit
17 Fautjamarn(SP?), Henry Lynn, Victoria Hillstum,
18 Marianna James, Taylor Banning, Mariam Bensman,
19 Caputo Attendee.

20 Caret, you can begin when you're ready.

21 SERGEANT AT ARMS: Time has begun.

22 CARET FANIT FAUTJAMARN: Hi, good evening. Yes,
23 I work for [INAUDIBLE 6:31:00] Independent and I
24 began there - I worked there since I was 15 and
25 first, I'd like to say that uhm it's very emotional

3 that they like to cut hours, the hours down to 50
4 hours because as you know, everything is inflation.
5 The food went up. The rent, we have to pay a high
6 rent bill and for them to cut the 50 hours, it's not
7 fair for us.

8 We can barely make it as is. I have a sick
9 daughter who in Thailand. I have to send the money
10 and uhm, I mean, I have a sick patient. She had a
11 stroke. She on dialysis. Three times a week that
12 she needs somebody to attend dialysis and it's very
13 hard for people to work for her because she also
14 bipolar and she would like to testimony. I mean, a
15 lot of people tried to work for her and it's just not
16 working out. They punish her, they abuse her. So,
17 these are city programs and there's only two people
18 that work on this case and four or five [INAUDIBLE
19 6:32:18]. But if you got plans to cut down the
20 hours, how are the city workers going to survive?

21 It's not that we ask for the rest or anything but
22 let's take it into consideration that if you keep in
23 mind, you cut the hour, mark my words for this one.
24 There will be even more crime. There will be more
25 robberies because people cannot survive with little
[INAUDIBLE 6:32:45] by the time you get your money,

3 you're already out the door. How can you survive?
4 How can you feed your kids? You have two children,
5 1,200 a month.

6 SERGEANT AT ARMS: Time has expired.

7 CHAIRPERSON DE LA ROSA: Thank you. Thank you
8 for your testimony today.

9 COMMITTEE COUNSEL: Our next witness is Henry
10 Lynn.

11 SERGEANT AT ARMS: Time has begun.

12 HENRY LYNN: Okay, I think I was muted for about
13 20 seconds. Do you think I could get those back?

14 CHAIRPERSON DE LA ROSA: Go ahead please, go
15 ahead.

16 HENRY LYNN: Thank you. My name is Henry, I'm a
17 student and researcher in the University of Chicago
18 on the topic of gentrification and critical urban
19 theory. I'm here to speak in support to Intro. 0175.
20 Home attendants are the subject of my field studies.
21 I have talked to them. They have shared stories with
22 me. I deeply sympathize with them. They are not
23 working in an acceptable condition right now.

24 We cannot allow home attendants to be forced to
25 work 24-hour shifts. These issues are
disproportionately affecting low-income female

3 minorities in New York City. I want to ask everybody
4 sitting there. In kindergarten, when your teacher
5 hand out a piece of paper and write down who you want
6 to be when you grow up, how many of those slips have
7 home attendants written on them?

8 This has been an historically low pay occupation
9 with strenuous working conditions that lacks legal
10 protections. This is an institutional issue and I
11 want to say to both the home attendants and the
12 disabled, the entity copiable of this situation are
13 the corrupt union home care agencies and government
14 inactions and they are the ones who pick one
15 vulnerable group against another, and this bill is
16 trying to fix that. Trying to step out. Take one
17 step at a time, not wait. Not wait for them to bill
18 in the future, not ten years from now, not five
19 months, now.

20 And at the end, I want to read some law. I want
21 to read you a law. Chapter four, working hours, rest
22 and leaves. Article 36, the state shall practice a
23 working hour system where in labor shall work for no
24 more than eight hours a day and no more than 44 hours
25 a week on the average.

SERGEANT AT ARMS: Time has expired.

2 HENRY LYNN: That's not state law in the United
3 States. That's not from Europe, all from Australia.
4 That's the labor law of peoples Republic of China.
5 New York City, you can do better. New York State,
6 you can do better.

7 CHAIRPERSON DE LA ROSA: Shh, please, please,
8 order please.

9 HENRY LYNN: And I yield my time. Thank you.

10 CHAIRPERSON DE LA ROSA: Thank you for your
11 testimony.

12 COMMITTEE COUNSEL: Our next witness is Victoria
13 Hillstum.

14 SERGEANT AT ARMS: Time has begun.

15 VICTORIA HILLSTUM: Hello, can you hear me?

16 CHAIRPERSON DE LA ROSA: Yes, we can hear you.
17 Please go ahead.

18 VICTORIA HILLSTRUM: Hello, thank you very much
19 Chairman and of course City Council. I apologize, my
20 voice is a bit weak today. I am here to testify in
21 favor of Intro. 0175. We have heard heart wrenching
22 testimony.

23 More than the home health care workers, the
24 disabled people and the people that require full-time
25 care, being threatened and in fear that they would

3 not receive the care that they provide. Much of it
4 based in fear. In reality, it would not matter
5 whether two shifts covered 24-hour care or one.

6 The real question here is, how have we allowed
7 this absolutely horrid behavior toward our friends in
8 Chinatown and across the city, women of color, women
9 that are supporting their families that deserve pay,
10 good pay, a fair wage and decent hours. This is not
11 who we are. I have spent a great deal of time
12 working in Albany to strengthen the laws, to
13 strengthen the laws that impact New Yorkers most.

14 In this circumstance, our state assembly and
15 senators failed to address this matter for years
16 while our friends are being forced to work these
17 unthinkable hours without pay, wage theft and lord
18 only knows what they have suffered, many of whom do
19 not speak English.

20 SERGEANT AT ARMS: Time has expired.

21 VICTORIA HILLSTUM: There has been a lot of talk
22 about unintended consequences. I would just like to
23 say, these are intended consequences and Governor
24 Hochul needs to take that \$80,000 billion away from
25 Fernando and we need to take care of our disabled,
our elderly and our home health care workers.

2 CHAIRPERSON DE LA ROSA: Thank you. Thank you
3 for your testimony today. Thank you.

4 VICTORIA HILLSTUM: Thank you.

5 COMMITTEE COUNSEL: Our next witness is Mariama
6 James.

7 SERGEANT AT ARMS: Folks, keep it down please.

8 SERGEANT AT ARMS: Time has begun.

9 MARIAMA JAMES: Hi, my name is Mariama James. I
10 am a 911 survivor and an advocate for 911 survivors,
11 many of which live in Chinatown and some of which
12 that don't like my own mother who was then a Harlem
13 resident but worked at Deutsche Bank by the World
14 Trade Center and developed stage IV colon cancer as a
15 result.

16 2018, they told us there was nothing else they
17 could do for her and that her tumor was inoperable,
18 but we prayed on it and she - uhm, they found a way
19 to take it out in 2019. As a result, she needed
20 care, and she had a home health aide that was coming
21 in and we were concerned in part that this home
22 health aide seemed to need help herself. She was
23 overworked, she was a senior and she was always in a
24 lot of pain and that was not the only factor, but it
25 was a contributing factor to why we ended up putting

3 my mother in a home for temporary long-term care,
4 insisted living facility/nursing home in the Bronx
5 because she wasn't able to get the care that we felt
6 she needed being a stage IV cancer survivor and
7 always in a lot of pain and also having like a stage
8 one dementia.

9 So, I'm here to speak in support of the bill. I
10 find it really, really concerning that people are
11 afraid to go to homes. Like, they are going to die
12 if they go to homes. I think that's another thing
13 that we should be addressing. If there's a problem
14 with the homes, that that needs to be worked out.
15 Not that we just avoid going to them.

16 And I'm all for the state working on Medicaid and
17 I don't know if it's possible, but I would wonder if
18 ZADROGA could; there's a ZADROGA bill that covers 911
19 survivors, could possibly help to present another
20 like funding stream. People who are suffering with
21 911-

22 SERGEANT AT ARMS: Time has expired.

23 MARIAMA JAMES: Certified, maybe their care could
24 be covered through ZADROGA.

25 CHAIRPERSON DE LA ROSA: Thank you. Thank you so
much for your testimony today.

2 COMMITTEE COUNSEL: Our next witness is Taylor
3 Banning.

4 SERGEANT AT ARMS: Time has begun.

5 TAYLOR BANNING: Hi, my name is Taylor, and I
6 grew up living with my grandparents, who lived with
7 me and my family in NYC. My grandparents were always
8 there when I got home from school to listen to me
9 practice my flute terribly, but they never
10 complained. Their wish was to age at home with their
11 family.

12 After my granddad passed and my grandma was less
13 mobile, we worried about her falling in the night
14 alone. So, when I came home from college, I tried
15 taking the night shift. During the day, I had my
16 first job and at night, I slept on her living room
17 floor.

18 Some nights, she didn't want to go to bed, which
19 meant I didn't go to bed. Some nights she got up
20 multiple times, so I got up multiple times. Some
21 nights she cried out in her sleep, so I got up to
22 soothe her and over the months, I got less, and less
23 sleep and she needed more and more help. Working all
24 day and working all night, was not working for me or
25 for her. And honestly, it started to negatively

3 impact my health and I remember one time, I didn't
4 get up with her because I was too tired, and I just
5 hoped that wouldn't be the time that she fell.

6 And at the time, I had minimal needs and
7 responsibilities in my life, yet many home care
8 workers are also parents and have their own health
9 issues and have their own parents aging at home. If
10 that routine didn't work for me, her granddaughter,
11 for a few months, how could it work for a home
12 attendant working consecutive 24-hour shifts for
13 years? And I slept on an air mattress. Last time I
14 checked, not many homes at NYC have extra bed or
15 bedroom, so where are people supposed to sleep and
16 what about the care patients need? While attendants
17 get their rest, if they get it.

18 People like my grandma actually needed all 24
19 hours of that care. And if 24-hour shift had been
20 illegal in other industries to protect workers and
21 patients, why have we let this go on for so long in
22 NYC? In an industry supporting the most vulnerable
23 people and it's women of color and immigrants being
24 on pay. Who does that benefit? Not the patient.
25 Not the worker. So, I'm joining the home attendants
in calling for the end of the 24-hour work day.

3 SERGEANT AT ARMS: Time has expired.

4 MARIAMA JAMES: I'm asking for the Council to
5 please pass No More 24-Hour Act to ensure quality
6 care and respect for people like my grandma and home
7 care workers and in some cases, some might just want
8 to go home to listen to their granddaughter practice
9 her flute, much better than I did I'm sure. Thank
10 you.

11 CHAIRPERSON DE LA ROSA: Thank you so much for
12 your testimony.

13 COMMITTEE COUNSEL: Our next witness is Mariam
14 Bensman.

15 SERGEANT AT ARMS: Time has begun.

16 MARIAM BENSMAN: Hi, can you hear me?

17 CHAIRPERSON DE LA ROSA: Yes, we can hear you,
18 yes.

19 MARIAM BENSMAN: Okay, great. My name is Mariam,
20 and I just lost my text. Just a second. Can you let
21 the next person go and I'll come back to you?

22 CHAIRPERSON DE LA ROSA: Sure.

23 COMMITTEE COUNSEL: We will now call Caputo
24 Attendee and we will return to Mariam Bensman.
25 Caputo, you can begin when the Sergeants start the
clock.

2 SERGEANT AT ARMS: Time has begun.

3 CEPUTO ATTENDEE: My name is Anthony Caputo, I'm
4 the CEO of Concepts of Independence, which pioneered
5 the first consumer directed program here in the city
6 back in 1980.

7 You could read my full testimony, so what I'd
8 like to do is tell you a true story of one of our
9 consumers. An 80-year-old polio survivor spending
10 the last 73 years as a quadriplegic.

11 During the pandemic, she lost an aide and found
12 it impossible to hire replacement, though recruiting
13 43 candidates. Therefore, the reality that this bill
14 would create open positions that will be filled as an
15 unreasonable [INAUDIBLE 6:44:51].

16 Here are some facts. Last year Concepts spent
17 over \$5 million in overtime, with one aide earning
18 \$96,000. If the hours were capped at 50 per week,
19 the aide would have earned only \$46,000. The 50-hour
20 weekly limit would reduce paychecks for over 1,100 of
21 our aides. This bill's 12-hour daily limit would
22 have affected 1,600 aides covering all City Council
23 districts by reducing over 51,000 weekly paychecks.
24 That's a lot of rent, that's a lot of food.

3 Also, New York's Aide Social Service law
4 prohibits consumer directed agency like Concept from
5 scheduling consumers aides. Therefore, any fines
6 would mostly likely have to be assessed against the
7 Medicaid consumer who assigned the hours. In
8 summary, this bill will result in an unconscionable,
9 unintended consequences, as consumers and dramatic
10 cut in wages to CDPEP aides.

11 There's a positive affect though. Ten years ago,
12 an aide was making only \$10 an hour and not paid
13 extra for overtime. Now, aides earn overtime and in
14 three weeks, in New York City could earn overtime pay
15 at \$31.64 per hour this year and \$33.14 per hour next
16 year. Therefore, capping hours will drastically cut
17 home care income in future years.

18 We all agree with the intention of this bill,
19 everyone that testified today. So, the City Council
20 can get the state to eliminate 24-hour shifts on
21 their own, without disrupting consumers, then we
22 applaud you -

23 SERGEANT AT ARMS: Time has expired.

24 ANTHONY CAPUTO: Every home care worker, get
25 every support of every home care worker and if you
think it would be better to add the disabled

3 community and all the advocates in the union, then
4 please drop the bill and follow Senator Rivera and
5 Assembly Member and establish a coalition where all
6 of us work together at the state level with
7 Assemblyman Epstein to obtain the necessary funding
8 for live in aides.

9 CHAIRPERSON DE LA ROSA: Thank you.

10 ANTHONY CAPUTO: Thank you.

11 CHAIRPERSON DE LA ROSA: Thank you so much for
12 your testimony.

13 COMMITTEE COUNSEL: We'll now return to Mariam
14 Bensman.

15 SERGEANT AT ARMS: Time has begun.

16 MARIAM BENSMAN: Hi, my name is Mariam Bensman.
17 I live and make good trouble at Central Queens with
18 several groups. Today, I'm speaking for myself on
19 the topic that's very personal to me. My mom died
20 seven years ago after her long and active retirement
21 ended with two years of severe physical and mental
22 impairment as a result of a stroke.

23 My mom was lucky though. She was able to
24 continue living at home after her stroke, thanks to
25 wonderful home care. Joan and Veronica took turns
feeding, medicating, dressing and bathing her. They

3 helped her with physical and language recovery
4 exercises, cooked for her and cleaned her apartment.
5 They did all the things that we, her family couldn't
6 do enough of because we had jobs and lived a little
7 ways. I will forever be grateful to them for the
8 loving care they provided. We made sure they got
9 breaks, though not enough. I'm ashamed of that.

10 So, I understand the need for 24-hour care, and I
11 honor the skill and the patients needed to provide
12 it, but I see no need for 24-hour shifts. No one
13 should be able to require – should be required to
14 work 24-hour shifts, even if they're paid for all 24
15 hours. Why are 24 hour shifts even a thing? No
16 other state allows 24-hour home care shifts and even
17 in New York State, it's mostly a city thing.

18 I do not believe that 24-hour shifts are needed
19 for continuity of care. They are not used in
20 hospitals and nursing homes, except for interns and
21 residents and it's being phased out for them because
22 it's abusive and –

23 SERGEANT AT ARMS: Time has expired.

24 MARIAM BENSMAN: They end up making mistakes.

25 CHAIRPERSON DE LA ROSA: Thank you for your
testimony today. Thank you.

3 MARIAM BENSMAN: Okay, thanks bye.

4 CHAIRPERSON DE LA ROSA: Okay, thank you. That
5 concludes our virtual panel. We will turn to an in-
6 person panel. When I call your name, please come up
7 to the dais. Margaret Lee, Lily Randall, Jesenia
8 Torres, Louis Marciano, Daisy Castillo, Chris Boa,
9 and David Eisenbach.

10 State your name, so that I can identify you here.

11 MARGARET LEE: Margaret Lee.

12 CHAIRPERSON DE LA ROSA: Thank you. You can
13 begin when you're comfortable.

14 MARGARET LEE: Okay, this testimony is on behalf
15 of my mother, a retired 1199 SEIU registered nurse.
16 She began her career in the health care industry as a
17 home care worker.

18 In the 1990's, when she began working as a care
19 giver, she was assigned 12-hour night shifts.
20 Working 24-hour shifts was unheard of at that time.
21 The work was difficult, and the hours were difficult,
22 but she had no other options as this was the only job
23 available to her given her limited skills and limited
24 English and our family desperately needed the money.

25 I told my mother that immigrant women like
herself were now being forced to work 24-hour shifts.

3 This made her very angry and sad. It brought up
4 memories of the difficult work. She kept saying,
5 "but how could anyone rest working a 24-hour shift in
6 a stranger's home?" She said that there would have
7 been no way for her to work 24-hour shifts and attend
8 community college to continue her studies so that she
9 could eventually become a registered nurse.

10 She knows too well how lucky she is to have found
11 a path towards financial security for our family
12 through hard work. But she said hard work can only
13 get you so far when you are up against inhumane
14 conditions. The 24-hour work day would have stolen
15 her time and health in ways that would have made it
16 impossible for her to work towards her goal of
17 becoming a registered nurse. My family was saved by
18 the opportunity health care work provided and
19 therefore cannot sit by and watch that opportunity be
20 stolen from others and worse, to see this job steal
21 the health and lives of these essential workers.
22 This is why we are in support of the No More 24 Act.

23 CHAIRPERSON DE LA ROSA: Thank you so much. Next
24 panelist, please identify yourself.

25 LILY RANDALL: Lily Randall. My name is Lily
Randall, and I am a resident of Council District 1.

3 I am testifying in support of Intro. 0175, as I
4 believe that the right to safe working conditions, a
5 humane workweek, and fair compensation should be
6 afforded to all working people.

7 Hearing today's testimonies puts into focus the
8 impending need for my father, who is a veteran and
9 suffers from physical and psychological disabilities
10 to rely on the labor and generosity of home
11 attendants in the near future. He has recently begun
12 to receive in-home health care assistance and while
13 he does not yet receive around-the-clock care, he
14 needs help with mobility, grooming, and hygiene-tasks
15 that require strength, stamina, alertness, and
16 patience on the part of his caregivers.

17 Once his health needs increase, the toll on the
18 workers who care for him will increase as well. If I
19 am to expect my father's health to be well looked
20 after by his caregivers, how could I not also demand
21 that those who provide care for him be treated with
22 the same dignity and respect? I strongly support the
23 proposed 50-hour work week cap because I believe that
24 workers deserve fair working hours. The argument
25 that putting a cap on the number of hours a worker
can log would limit their overtime earning potential

3 is incredibly misleading. The greatest obstacle to
4 these workers' earning potential is, in fact, not
5 paying them their earned wages.

6 Home attendants would be earning exponentially
7 more if their agencies paid them for all the care
8 they provide to their clients outside of the 13/24
9 hours they are compensated for. If there are workers
10 currently asking to be assigned in excess of the
11 proposed 50 hours, it should be noted that as things
12 stand now, in order to receive 50 hours', pay,
13 workers would actually need to work close to 90 hours
14 a week to make up for those 11 unpaid hours for each
15 24-hour shift.

16 The World Health Organization concluded last year
17 that working 55 plus hours a week puts people at
18 increased risk of death due to stroke and heart
19 disease. How could we advocate for this? Under Int.
20 0175, not only will workers be granted access to a
21 much better work-life balance, they will earn more
22 per week without having to watch half of the hours of
23 attentive service go completely uncompensated.

24 SERGEANT AT ARMS: Time has expired.

25 LILY RANDALL: Who would choose to work 24-hour
shifts for 13 hours' pay, if given the option for 12-

3 hour split shifts? No one. This option is not
4 offered – uh the option for 12-hour shifts is not
5 offered by agencies because they know that if given
6 the option, workers would not choose to work 24-hour
7 shifts.

8 CHAIRPERSON DE LA ROSA: Thank you. Thank you
9 for your testimony today.

10 LILY RANDALL: I urge you to pass 0175 into law
11 and set a precedent that shows working people in this
12 city that not only are the labor and care they
13 provide valuable, but so is the quality of life they
14 experience when they get home at night.

15 CHAIRPERSON DE LA ROSA: Thank you. Thank you so
16 much.

17 LILY RANDALL: Thank you.

18 CHAIRPERSON DE LA ROSA: Uhm, up next, we have
19 David Eisenbach and Chris Bao.

20 DAVID EISENBACH: My name is David Eisenbach. I
21 support this bill. I'm an historian and I teach
22 history at Columbia, and I'd like to provide a little
23 historical context for this fight.

24 Someday, we're going to look back at this
25 humanity that we've heard about today and we will ask
ourselves, how did this happen? How did we allow

3 this to continue? In the same way that we look back
4 at the early 20th Century and child labor in America.
5 When 20 percent of American children worked in
6 factories, textile mills, and coalmines. In 30
7 years, in 1890 to 1920, 30,000 boys died in coalmines
8 in America. Now, we look back and we say to
9 ourselves, how is that possible?

10 Well, we kind of heard a little bit about that
11 today. The arguments against getting rid of child
12 labor in America, unintended consequences. If we
13 fire the kids, we're going to have to replace them
14 with adults. It's going to cost a lot more. It's
15 going to bankrupt the coalmines.

16 CHAIRPERSON DE LA ROSA: We need quiet please, so
17 that he can finish his testimony and we can hear
18 everybody else. I apologize Mr. Eisenbach, go ahead.

19 DAVID EISENBACH: That's okay. They also said,
20 well, we can't do it on the city level, we have to do
21 it on the state level and then on the state level, we
22 have to do it on the federal level and on the federal
23 level, well we have to do in the states. And so, it
24 bounced around for decades and nothing got done. And
25 then once they passed it, the sky didn't fall. We
still had coal. We still had the textile mills

3 running and life went on and we looked back and we
4 said, "oh, of course." The same thing is going to
5 happen after we pass this bill. So, please, from
6 what you heard today, end this injustice. Thank you.

7 CHAIRPERSON DE LA ROSA: Thank you for your
8 testimony. Thank you. Chris, Chris Boa.

9 GARY: Hello, my name is Gary, I'm providing
10 testimony from Chris Boa, who could not make it
11 because he's working a long shift at the hospital
12 tonight.

13 My name is Chris Boa(SP?), and I am an Infectious
14 Disease Physician and Former Labor Organizer for SEIU
15 CIR. I'm writing this on behalf of my peers and
16 colleagues and I'm asking for the strong support of
17 all Council Members for the No More 24 Act Intro.
18 0175, sponsored by Council Member Marte in District
19 1. We have collectively worked throughout the COVID-
20 19 pandemic as physicians and throughout our training
21 and work, I've become no stranger to long and
22 intensive work weeks, often totaling over 80 hours a
23 week and we have all become familiar with working
24 within a fragmented, unforgiving and exploitative
25 system but we were still shocked to learn that our
home health care attendants are being forced to work

3 excessive 24-hour shifts. Sometimes working back-to-
4 back consecutive shifts.

5 As fellow health care workers, we are appalled to
6 learn that this matter has been called to attention
7 and brought forth to the City Council for years, yet
8 no action has been taken to protect our most
9 essential workers, many of whom are Black, Asian and
10 Latino women. It currently appears that this
11 situation is exclusive to New York City. In other
12 parts of the state home health care attendants are
13 only required to work eight, 12-hour shifts.

14 Additionally, our home health care workers are
15 only paid for 13 of the 24 hours that they work and
16 live with their patients. They're expected to have
17 eight hours of sleep, take three one-hour meal breaks
18 and thus are not paid for this time. However, this
19 cannot be farther away from the truth as these sick
20 patients often need help during these unpaid 11
21 hours. As they usually require around the clock
22 maximum assistance given their age and underlying
23 medical comorbidities.

24 Working over 24 hours is unsustainable and
25 undoubtedly impacts the quality of care given to our
most vulnerable patients. It is tragic that our

3 health care workers should have to endure such
4 circumstances, unacceptable that our elected
5 leadership continue to overlook such regressive and
6 inhumane working conditions.

7 SERGEANT AT ARMS: Time has expired.

8 GARY: Now is the time to stand together,
9 advocate on behalf of workers and correct this
10 injustice through passing and supporting the No More
11 24 Act Intro. 0175.

12 CHAIRPERSON DE LA ROSA: Thank you. Thank you
13 for your comments today. I just want to verify
14 Jesenia Torres, Louis Marciano or Daisy Castillo,
15 none of you all are present? Then this concludes
16 this panel. Thank you so much for coming tonight.

17 Up next, we have James C. James C., Kevin C.,
18 Yolanda Zhang, Karen Low, Vicki New. James C., Kevin
19 C, uh? Oh, Shi, Shi, okay. Yolanda Zhang, Karen
20 Low, Vicki New. Thank you. You may begin when
21 you're ready.

22 YOLANDA ZHANG: Uh, this is Yolanda Zhang. Oh,
23 hi all, my name is Yolanda. I spoke to close to 100
24 Chinese-speaking home health aides who reside in NYC,
25 who have been driven by anger to speak up against 24-
hour work days. Many of them work 24-hour shifts for

3 days on end in which case, they had to get up eight
4 to five days up to eight to five times a night on
5 average to assist their patients. For those who work
6 or have worked multiple ten hour or twelve-hour
7 shifts, accruing to more than 50 hours per week,
8 workers physical and mental health is equally
9 threatened and destroyed. This is because home care
10 workers are especially dedicated to providing their
11 patients with the most comprehensive, meticulous care
12 and that the duty of home care often involves heavy
13 lifting with patients weighing more than 175 pounds.
14 And frequent handling of diapers, under garments, and
15 cleaning of the patients excrement and secretions.
16 Multiple times per single shift, they have to use
17 their bare fingers; this is, content warning, it's a
18 little graphic to help push out the patients stools.
19 Okay, this is the heavy, disgusting, dirty you know
20 work. The nature of home care work is very different
21 from those of other industries too.

22 And they have to do it for 50 hours a week. That
23 would bring a lot of tremendous mental and physical
24 fatigue, trauma, and indignation. To this, many
25 workers have expressed that not even money could ever
buy back their health and dignity. The fact that

2 workers are currently assigned to working 24-hour
3 work days and working over 50 hours per week, fully
4 shows the discriminatory nature of NYC home health
5 industry. As the majority of the home care workers
6 as many of have said today, consists of immigrant
7 women of color. As a daughter of an immigrant woman
8 of color myself, who didn't make any memories with my
9 mom because she always had to work long hours -

10 SERGEANT AT ARMS: Time has expired.

11 YOLANDA ZHANG: I call on the City Council to end
12 this racist and sexist practice and pass Intro. 0175.
13 Thank you.

14 CHAIRPERSON DE LA ROSA: Thank you so much.
15 Please go-ahead James. You can borrow the microphone
16 next to you. Thank you.

17 JAMES SHI: Hi, my name is James Shi, I'm a
18 resident of New York City. Thank you Council Member
19 Chris Marte, Councilman De La Rosa for having this
20 hearing. In many ways this hearing really is very
21 long overdue. When you think of how long many
22 workers in this room have been fighting in absolutely
23 inhumanity of the 24-hour work day. One of the
24 previous speakers mentioned how back in the past,
25 child labor was deemed as acceptable and that if we

3 were to change things, it would really make things
4 unpredictable. That things would not function but
5 that, we realize how insane that is.

6 What is more insane about the fact that people
7 are having to work 24 hours a day and being paid for
8 only 13 hours of them, is a fact that people are
9 willing to defend that. That is insanity because how
10 can you seriously say for anyone, and you have heard
11 testimony from many people today, that if home health
12 aide, people who require round the clock care, can
13 actually get eight hours a sleep. Five hours
14 uninterrupted sleep. Three one-hour meals a day and
15 not someone have that affect their health and the
16 patient care. The 24-hour work day is an absolute
17 disgrace and even humanity and that this bill, Intro.
18 0175 is a means to end that. For people who say that
19 is not possible, that is not the role of the City
20 Council.

21 I wish, I am sad to say but I'm sure the workers
22 will not be surprised, which includes 1199. They
23 say, oh, that should be the state, or it should
24 Medicaid, it should be the federal. I should remind
25 people that 1199 like to call themselves Dr. Kings
favorite union. How about Dr. King has some words I

3 think that they should keep in mind. Wait has almost
4 always meant never. Justice delayed and justice
5 denied. Do not belay justice any longer. Pass
6 Intro. 0175 now. Thank you.

7 CHAIRPERSON DE LA ROSA: Thank you so much.
8 Kevin.

9 SERGEANT AT ARMS: Quiet down.

10 KEVIN SHI: Okay, my name is Kevin Shi and I'm a
11 resident of New York City and I'm here to support
12 Intro. 0175, Council Member Christopher Marte built
13 to end the unjust and unjustifiable practice of 24-
14 hour work days for home health aides in New York
15 City. It's very clear that both a legalized system
16 of exploitation and a widespread system of wage theft
17 that has existed for a long time in the home health
18 care industry that must be addressed now for the sake
19 of workers and patients everywhere.

20 Allowing such exploitation of mostly immigrant
21 women of color to continue as business as usual,
22 while hoping for the New York State government to
23 some day do the right thing should not be acceptable
24 to anyone who cares about the health and safety of
25 both the home health aides and their patients.

3 Listening to the testimony of some of the
4 opponents of Intro. 0175 today, including some who
5 are actual state legislators, I was struck by the
6 apparent synergism overall [INAUDIBLE 7:05:24] and
7 this City Council in particular, ability to do
8 anything meaningful to end this long-standing
9 practice of exploitation occurring across the New
10 York City home health care system.

11 In a time of widespread synergism, towards the
12 ability of governance to do anything to improve
13 peoples lives and the antidemocratic forces that have
14 been growing as a result of it. It is incumbent upon
15 this current City Council to prove the naysayers
16 wrong. The City Council can best do this now by-
17 passing Intro. 0175. The City Council has in its
18 power to help end this longstanding system of
19 exploitation now by supporting and passing Intro.
20 0175. If it cannot do so, then why are we all here
21 today regardless on where we stand on Council Member
22 Marte's bill.

23 Intro. 0175 is about accountability. It is
24 about justice. It's about sending a message to
25 people everywhere, especially immigrant women of

3 color. That's all of us, no matter what kind of work
4 we do -

5 SERGEANT AT ARMS: Time has expired.

6 KEVIN SHI: Can and should not control over our
7 time and our lives. No More 24. Pass Intro. 0175
8 now. Thank you.

9 CHAIRPERSON DE LA ROSA: Thank you. Thank you so
10 much. Thank you so much. Vicki, please go ahead.

11 VICKI NEW: Hi, my name is Vicki New, I am a
12 resident of City Council District 3, and I am here to
13 testify in support of Intro. 0175.

14 As we've all heard today at length, the 24-hour
15 work day is rampant here in New York City, but it is
16 not elsewhere in New York State. Why do home
17 attendants in this city work for often days at a time
18 without sleep and without half their wages when home
19 attendants elsewhere in New York with the same
20 Medicaid regulations, work eight- or twelve-hour
21 split shifts?

22 The difference is that our home care work force
23 in this city is largely immigrants, unlike the mostly
24 White, mostly citizen home care workers outside of
25 New York City.

3 Most of the home attendants providing care in
4 this city are immigrants like my parents, mostly
5 immigrant women of color and not only that, but so-
6 called community organizations in our neighborhoods,
7 like the Chinese American Planning Council, actually
8 run job placement programs to place recent immigrants
9 into home care jobs.

10 Governor Hochul's office has even stated that
11 this immigrant worker home care pipeline is a way to
12 kill two birds with one stone. Both providing
13 employment for new immigrants and addressing the
14 growing need for care. I hope that we can all agree
15 in this room that the 24-hour work day is inhumane.
16 That it is abusive. That it is violent to go without
17 sleep.

18 So, if we are growing our need for care and if we
19 still have the 24-hour work day, all we are doing is
20 growing a pipeline that is forcing immigrants into
21 work that will destroy their lives, destroy their
22 body, rob them of wages. When we talk about
23 systematic violence, this is systemic violence. When
24 we talk about institutional racism, this is
25 institutional racism over seen by the state, carried
out by nonprofits and signed off by unions like 1199.

3 So, I implore the City Council today to not act with
4 cowardness but actually stand and stop the turning
5 wheels of this racist violence, to end the 24-work
6 day and pass Intro. 0175. Thank you so much.

7 CHAIRPERSON DE LA ROSA: Thank you so much.
8 Thank you all for your testimony tonight. That
9 concludes this panel. Thank you for your patience
10 and for testifying.

11 Up next, we have Sonia Ussario, Joseph Jung(SP?),
12 Anne Kochman, Simon Kostelanetz(SP?), I think it
13 says. Phoebe Lopez and Audrey Hill, Twill, okay,
14 just say it on the record because I can't read the
15 handwriting. It looks like Hill. Thank you and
16 identify your name as you speak. Thank you so much.
17 You may begin when you're ready.

18 ANNE KOCHMAN: Good evening, my name is Anne
19 Kochman. I have been a registered nurse in New York
20 for 35 years and I'm a member of the National
21 Mobilization Against Sweatshops.

22 I'm here to urge you to vote in favor of this
23 bill, to pass Intro. 0175 and to prohibit 24 shift
24 and to cap weekly hours at 50 in home care. For
25 decades now, nurses in New York State and throughout
the U.S. have organized and struggled to protect

3 nurses from mandatory overtime to protect our health,
4 and the health of our patients.

5 We know from our personal experiences on the job
6 and our unions know, the unions that represent
7 nurses, know that health workers cannot work hours
8 and days on end in a safe manner.

9 In June of this year, June of 2022, Unions
10 including 1199 SEIU, the New York State Nurses
11 Association, New York State, AFLCIO and several
12 others released a statement applauding the New York
13 State legislature for passing bills to protect nurses
14 from unfair mandatory overtime. And I quote Mario
15 Salento, President of the New York State AFLCIO, "we
16 cannot continue to schedule our nurses for double or
17 triple shift with minimal breaks and expect quality
18 care and safe working conditions."

19 Our home attendant colleagues deserve the same
20 rates. They are often the sole support for their
21 patients who need the care and attention of well-
22 rested and healthy home attendants.

23 You've heard already from so many home attendants
24 now who speak to the need to be available to their
25 patients at every moment of their shift. They're
frequently the only support for those patients.

3 I just want to add and in the home, home
4 attendants are isolated. They are isolated. In the
5 hospital setting, you have other people you can call
6 upon but in the home, often times they are the only
7 ones there. They are by themselves.

8 Why are we treating home attendants who do this
9 critical work -

10 SERGEANT AT ARMS: Time has expired.

11 ANNE KOCHMAN: Differently from the nurses who
12 work in the hospital? Pass Intro. 0175.

13 CHAIRPERSON DE LA ROSA: Thank you so much for
14 your testimony.

15 PHOEBE LOPEZ: Hi, I'm Phoebe Lopez, supporter of
16 No More 24, Intro. 0175. I'm a New York resident and
17 I just want to say, I think I have like three points
18 to make. I'm going to try to keep it brief.

19 As a young person living in New York, it's kind
20 of very disappointing to see a union as prolific as
21 1199 uhm, kind of put forth all the values and
22 behaviors that they want to express and use here and
23 pat themselves on the back for the values that they
24 put on their website and things that they say. And
25 then, kind of directly contradict those values with
the decisions that they make with the funding that

3 they funnel into stuff that they say that they do,
4 and they don't.

5 Uhm, like the settlement that was made that was
6 uh, mentioned before, a very meek, very weak \$18
7 million. Also, the sit ins that had happened this
8 week, this past week, calling the NYPD on their own
9 members. That's really crazy.

10 And I get that unions you know, how can you get
11 mad at someone that says that they are with you.
12 That they want to help you and want to fund you and
13 then just go behind your back and you know, yes.

14 One of the other things that I wanted to say was
15 that looking at the past few years, it's very clear
16 that the majority of the government and local
17 government prefers to - with respect to Chinatown
18 especially, prefers to fund projects that oust the
19 community, rather than support it, fund it, support
20 businesses there. Yeah, and I guess, one of the main
21 hang ups that I've been hearing today is about
22 funding and I know that everything is about funding.

23 SERGEANT AT ARMS: Time has expired.

24 PHOEBE LOPEZ: Uhm, the hang ups about what will
25 happen in the grey period with care and if this bill

3 is passed whatever, I feel like it could very well be
4 funded. Yeah.

5 CHAIRPERSON DE LA ROSA: Thank you.

6 PHOEBE LOPEZ: Thank you.

7 CHAIRPERSON DE LA ROSA: Thank you for your
8 testimony.

9 SIMON KOSTELANETZ: My name is Simon Kostelanetz,
10 and I am here to testify in support of Intro. 0175.
11 I have many family members who are in the field of
12 health care, and I've seen the toll that 24-hour
13 shifts has had on them. They don't sleep and this
14 nearly costs them their lives.

15 Due to having to drive after sleepless nights, my
16 own mother, an immigrant woman and health care worker
17 has gotten into car accidents, during which the
18 vehicle she has been driving gotten totaled and she
19 is lucky to be alive today.

20 I had a longer testimony but I'm going to
21 supplement that with the testimony of Lucy
22 Streya (SP?) who is not able to be here today because
23 she had to leave.

24 So, my name is Lucy Streya. I worked for 11
25 years, 24-hour shifts, four days a week. I am a
26 member of 1199. I want the City Council to pass this

3 bill to end 24-hour shifts. I couldn't sleep when I
4 worked 24 hours. Maybe only two hours because I had
5 to give them medicine or cook at midnight for the
6 patient or because I had to watch my patient all
7 night. 24 hours effects my health. I have an
8 abdominal hernia due to the effort of moving my
9 patient and I was operated on two times.

10 But when my son's wife died, I couldn't go to the
11 funeral because there was no replacement. When my
12 son had surgery, I couldn't go to be with him. When
13 my other son vomited blood, I had to wait three days
14 for a replacement to go to him. When my daughter had
15 two C-sections, I couldn't be with her. They never
16 sent someone to replace me.

17 I would like them to divide the 24-hour shifts,
18 so that those who work now 24 hours don't suffer what
19 I suffered. Also, it is important that they do not
20 work more than 50 hours per week for their health.
21 It must be 12 for four days and no more. If they
22 divide the 24 hours, the patients are going to have
23 better care because the care givers could sleep.

24 How many women have died without justice? I
25 could be one. I could imagine that I would die

3 working, so please pass this law and end the 24-hour
4 work day. Thank you.

5 CHAIRPERSON DE LA ROSA: Thank you so much for
6 your testimony.

7 JOSEPH JUNG: Hello. Good evening, my name is
8 Joseph Jung, and I am here to testify in support of
9 Intro. 0175.

10 Over the past two years, I have met dozens if not
11 hundreds of immigrant home care workers, many who
12 have shared with me their experience of working 24-
13 hour shifts. These shifts have inflicted
14 irreversible tolls on their bodies, their spirits and
15 on their relationships with their loved ones, as you
16 have heard. These immigrant women who are older than
17 my own mother have been made to sacrifice their
18 health and dignity to financially provide for
19 families they hardly ever get to see.

20 I'm sorry.

21 CHAIRPERSON DE LA ROSA: It's okay, take your
22 time.

23 JOSEPH JUNG: The most heartbreaking is the fact
24 that the brutality of these shifts has been no
25 secret. Workers have filed hundreds if not thousands
of wage and hour violation claims with the state

2 government, protested state agencies, their
3 employers, and even their own union, which included
4 in workers contracts and mandatory arbitration clause
5 and all of the pressure they were applying.

6 Through organizing and demonstrating alongside
7 workers, I've met over one-dozen SEIU members who
8 have never even heard of the 24-hour shift and were
9 shocked to hear that their own union was not fighting
10 tooth and nail to end it immediately. These workers
11 have been fighting for over seven years and in this
12 time period, many have suffered irreparable injuries.
13 These workers lose sleep for days on end and I once
14 spoke with a worker who was in their patients home
15 for nearly two weeks because the agency would not
16 send a replacement worker.

17 This bill is the first legislative effort
18 advanced by the government body to meaningfully
19 tackle this issue. I have multiple active health
20 care professionals in my family. When they heard
21 that workers were working 24-hour work days, they
22 were shocked beyond belief. 12 hours they say is
23 already incredibly difficult. They are not scheduled
24 to work beyond 12 hours a shift, 80 hours across two
25

3 weeks because it is dangerous to their health and to
4 the patients that they serve.

5 If an upward bound of 12 hours makes sense for
6 doctors and nurses, it makes sense for home care
7 workers. Please pass this bill. Thank you.

8 CHAIRPERSON DE LA ROSA: Thank you so much.

9 AUDREY HEWEY: Hello, my name is Audrey
10 Hewey(SP?), and I am a college student and resident
11 of City Council District 1. In the past several
12 months, I have talked to hundreds of people while
13 tabling and petitioning to end the 24-hour work day.
14 I found that people are very easily drawn to our
15 table because they are in complete disbelief that a
16 24-hour work day exists.

17 Sometimes people wouldn't believe that this is
18 happening in the U.S. in New York City. People often
19 had the same chain of reactions that I did when I
20 first found out about the 24-hour work day. Firstly,
21 they couldn't believe that not only is the 24 shift
22 entirely legal but that workers are only paid for 13
23 of those 24 hours. Despite the reality that they are
24 working for the entire shift and not receiving the
25 breaks they are legally entitled to. While it is
illegal for agencies to not pay their workers for

3 those hours, such practice is implicitly sanctioned
4 as legislators ignore it.

5 Secondly, people couldn't believe that it was the
6 first time they had heard of this issue, as it had
7 been going on for so many years, completely invisible
8 to them. The 24-hour work day is invisible violence.
9 As we have heard today, current and former attendants
10 have reported long standing, debilitating physical
11 and mental health issues. This treatment is
12 essentially slow murder or death with a clear
13 perpetrator. How could this not be considered
14 violence.

15 The overwhelming majority of home care attendants
16 are immigrant women of color. Treatment of these
17 women is disposable, devalued and subhuman, extends
18 to and sets a precedent for violence and public acts
19 of hate on the streets. This painful and horrific
20 organization such as CPC, an act that racist violence
21 towards their workforce. While simultaneously
22 publicly advocating to stop Asian hate. This is a
23 life-or-death issue. How can we allow this treatment
24 to continue any longer?

25 I urge you to end the racist violence of the 24-
hour work day by supporting Intro. 0175. Thank you.

3 CHAIRPERSON DE LA ROSA: Thank you so much. That
4 concludes this panel. Thank you for your patience
5 and for testifying tonight.

6 We're coming up on our last panel. We will call
7 Kathy Lu, Zeke Lugar, Jihye Song, JoAnn Lum, Kiran
8 Chongry and Sarah On(SP?).

9 KATHY LU: Hello, my name is Kathy Lu, I am a
10 Rank-and-File Member of the Union DC37. I am very
11 disappointed to see my union being against the No
12 More 24 Act. For the good of all union members and
13 all workers across trades, we should set reasonable
14 limits on working hours like unions fought for in the
15 20th Century.

16 We need to protect our work, our health as
17 workers and make sure we can have lives outside of
18 work. The 24-hour work day for home care workers is
19 an especially egregious case of overwork that is
20 racist and violent. 24-hour work days for home care
21 workers are prevalent only in New York City where the
22 home care workers are immigrant women. Whereas,
23 elsewhere in New York State, patients get 24-hour
24 care from multiple workers in split shifts. 24-hour
25 work days continue in New York City because home care
agencies are getting away with breaking labor laws to

3 pay the immigrant women workers only 13 hours of
4 wages per 24-hour shift, stealing almost half of
5 their wages.

6 The State Court of Appeals, the highest court in
7 New York State ruled in 2019, that if workers don't
8 get five hours of continuous sleep at night, home
9 care agencies are obligated to pay all 24 hours of
10 wages. As you have heard over and over today, 24-
11 hour work days, caring for patients who need constant
12 physical and emotional attention without any sleep,
13 have completely destroyed women's health.

14 Meanwhile, patients also suffer because their
15 caregiver is suffering and exhausted. We have heard
16 today that workers are forced into 24-hour shifts,
17 not assigned other work unless they refuse the 24-
18 hour shifts. We have also heard patients are afraid
19 of being sent to nursing homes unless their home care
20 workers are forced into 24-hour shifts for 13 hour
21 pay. Those patients deserve real 24-hour care.

22 SERGEANT AT ARMS: Time has expired.

23 KATHY LU: No one benefits from this 24-hour work
24 day system except home care agencies and insurance
25 companies, many of whom you heard testify against the
bill today.

3 As the first majority woman City Council, please
4 do not allow this racist, sexist systems to continue.
5 Killing women of color and hurting their patients,
6 just so home care agencies and insurance companies
7 can continue to profit. Please pass Intro. 0175 and
8 end this violence now.

9 CHAIRPERSON DE LA ROSA: Thank you.

10 ZEKE LUGAR: Hi, my name is Zeke Lugar. I live
11 in Queens in District 29. My bubby, my grandmother
12 has needed 24-hour care for the last eight years. At
13 an early stage of her dementia, my bubby began to
14 lose her balance. At first, she tried to live her
15 life as she used to. She tried dressing herself,
16 walking downstairs and going to the bathroom on her
17 own but she risked injury every time, especially at
18 night.

19 She experienced several nearly fatal falls and
20 would have had many more if it weren't for two
21 dedicated and caring home attendants who provide her
22 with around the clock care. I saved my bubby's life
23 and I help her to live with dignity every day.

24 When I go over to my bubby's I see firsthand, not
25 just how physically and emotionally demanding it is
for the home attendants to help her move around the

3 apartment and be constantly alert to her every move
4 and need, but I also see how deep the bond is between
5 my bubby and the workers who care for her. I see
6 first hand how her mood is always a reflection of
7 that of the workers and how the quality of her care
8 is a reflection of the conditions her home attendants
9 work under.

10 There's been a lot of rhetoric going around about
11 how patients will be impacted by this bill, but I can
12 tell you first hand that ending the 24-hour work day
13 is the only way that we can fundamentally change the
14 conditions in our home care system for the patients,
15 the workers, and for our families.

16 Ending the 24-work day is the only way we can
17 restore a sense of common humanity and dignity in our
18 work, in our care, and in our lives. I hope that
19 Council Member Lynn Schulman and members of the City
20 Council, please vote yes on Intro. 0175. Thank you.

21 CHAIRPERSON DE LA ROSA: Thank you so much.

22 JIHYE SONG: My name is Jihye Song, I live in
23 Harlem, and I am a member of the National
24 Mobilization Against Sweatshops. I have met hundreds
25 of home attendants who have worked 24-hour shifts.

3 All of them have been immigrants, and nearly all of
4 them have been women of color.

5 All of them have been deeply harmed by working
6 24-hour shifts. They can't sleep, they have chronic
7 pain, they need canes to walk, even women as young as
8 40 because of injuries sustained through working 24-
9 hour shifts. They suffer from depression, they have
10 miscarried, their children are strangers to them.
11 They have spent so many years isolated in their
12 patient's home, that they literally cannot go in
13 public without experiencing panic attacks. They have
14 died as a result of poor health caused by these
15 shifts.

16 They end up needing the same kind of care they
17 once provided. Many home attendants spoke today, but
18 I want to emphasize that their stories are only one
19 small fraction of the total pain that these 24-hour
20 shifts have caused. I'm sorry, I'm tearing up
21 because I have literally listened to hundreds of
22 women tell you how terrible these shifts have been to
23 them, and it is indescribable. Hold on.

24 Those opposing this bill will claim that there is
25 a labor shortage and that there is simply not enough
home attendants to split the shifts. But this so-

3 called shortage is manufactured by home care agencies
4 to maintain the 24-hour work day.

5 As many home attendants have said and as I hope
6 you will read in their testimony, when they say they
7 don't want to work 24 hours anymore, they are
8 assigned too few hours. It's either four hours or 24
9 hours. Sometimes they are fired on the spot.

10 On top of that, there are countless home
11 attendants who are forced to retire early because of
12 their injuries who leave the industry because they
13 are so traumatized from working in the home care
14 industry doing 24-hour shifts and who end up becoming
15 the same patients who need this kind of care.

16 Without a doubt, if you split the shifts, there would
17 be more home attendants who would want to work them.

18 SERGEANT AT ARMS: Time has expired.

19 JIHYE SONG: If they were a reasonable hour and
20 time, more home attendants would want to work them.
21 There is no shortage of home attendants. There would
22 be no shortage if there were no 24-hour shifts and I
23 want to say it's maintained because the home care
24 agencies and health insurance companies make more
25 money when they make one worker do the job of two.
It is the definition of racism to exploit thousands

3 of immigrant women of color, sending them to an early
4 grave. Also, a select few can get rich. So, please
5 Council Member De La Rosa and Council Member Marte,
6 thank you for staying with us. And the 24-hour work
7 day is disgrace to New York City. It is perhaps the
8 most racist and sexist labor practice in existence in
9 modern America and we need to pass this bill today to
10 end it once and for all. Thank you.

11 CHAIRPERSON DE LA ROSA: Thank you. Okay, thank
12 you.

13 JOANN LUM: My name is JoAnn Lum, and I am an
14 Organizer with the National Mobilization Against
15 Sweatshops. The worker center that Jihye just spoke
16 of.

17 As Jihye mentioned, we have seen so many home
18 care workers, especially since 2015 and they all say
19 the same thing. Whether they work in unionized, non-
20 unionized agencies, the conditions are as you have
21 heard today. To 24 hours and the long hours of over
22 50, 60, 70 hours a week, it's really killing women.

23 Many, we've lost maybe one dozen, 15 home care
24 workers during COVID because their health had been
25 compromised already because of these 24-hour shifts.
We've had people who have died early because the toll

3 that these 24-hour shifts have taken upon them really
4 have shortened their lives.

5 This is also not - it has inhibited their ability
6 to provide the kind of quality care that they would
7 like to provide. So, how can we justify continuing
8 24-hour shifts, depriving, denying disabled elderly
9 people the kind of care that they should have?

10 In this city, New York that prides itself on
11 being progressive and forward looking, not like those
12 backward red states, how is it that we allow home
13 care workers, primarily women of color and immigrants
14 to be treated like garbage? As if their lives don't
15 matter. This is blatantly and several people have
16 spoken to this, racist and sexist. It's really a
17 form of violence. No wonder so many workers leave
18 this industry.

19 A century and a half ago -

20 SERGEANT AT ARMS: Time has expired.

21 JOANN LUM: I'll just finish with this, workers
22 and labor unions around the country took to the
23 streets a century and a half ago to demand the eight-
24 hour day. The idea was eight hours for work, eight
25 hours to rest, eight hours for what we will. And
what happened? Why now are we faced with this 24-

3 hour shift and why is it that there are unions like
4 1199 and other advocates that are defending the 24-
5 hour work day, defending the right to work more than
6 50 hours. This is unconscionable.

7 And then, if they care so much about the wages,
8 why do they encourage wage theft? Why do they
9 celebrate an award of .3 percent of what the workers
10 are owed for the 11 hours of stolen from them. This
11 is shameful.

12 CHAIRPERSON DE LA ROSA: Thank you.

13 JOANN LUM: I call on the City Council to pass
14 this law, 0175.

15 CHAIRPERSON DE LA ROSA: Thank you so much.

16 KIRAN CHONGRY: I'm Kiran Chongry(SP?), I am
17 reading the testimony of Lois Gonzales(SP?), who was
18 here earlier today and needed to leave. Lois
19 Gonzales says, I urge the City Council to pass Intro.
20 0175 to end the 24-hour work day. She says, I worked
21 as a home care worker from 2003 to 2019, all those
22 years with 24-hour shifts, three days a week. I did
23 it because it was what they offered. When you go to
24 apply, they ask you, "will you work 24 hours?" If
25 you don't say yes, they don't give you an
application.

2 It's a lie that we do 24-hour shifts because we
3 like it. We do it out of necessity. I had to work
4 because I was a single mother with two kids. I
5 didn't like it. When I said, I don't want 24-hour
6 cases, the agency said, "we'll call you."

7 I waited four weeks for their call and finally, I
8 had to take whatever they gave me. Uh, whatever they
9 gave me for emergency situations. Nothing regular,
10 just emergency replacements, nothing permanent. I
11 wanted eight- or ten-hour shifts. The more hours
12 that you work, the less money you take home.

13 24 hours wasn't good for the patients either.
14 The agency would say to us, tell the patient to go to
15 bed at nine o'clock because you're not going to be
16 paid for the night. But you need to take care of
17 your patient. For three years I punched in that I
18 couldn't sleep at night because I had to help the
19 patient. Still, I never got a penny for the night.
20 When I worked 24-hour shifts, I had to leave my child
21 alone and check in on her constantly by phone. "Are
22 you home?"

23 I never had a Thanksgiving with my kids. Happy
24 New Year was by phone.

25 SERGEANT AT ARMS: Time has expired.

3 KIRAN CHONGRY: 24 hours also gave me insomnia
4 and social phobia. At that time, all that time
5 endures when you can't go out. I developed a phobia
6 to go out. I felt nervous and strained with people
7 around me on the train. Getting rid of the 24-hour
8 shift is better for us and better for our patients.
9 We need to be at home to resolve our problems in our
10 families instead of being stuck inside all the time
11 with our problems. I urge the City Council to pass
Intro. 0175.

12 CHAIRPERSON DE LA ROSA: Thank you.

13 SARAH ON: Hi, I'm Sarah On. Hello everyone,
14 really thank you for sticking it out so long. I'm
15 here to testify in support of 0175. Before talking
16 about why this bill is so crucial to the many home
17 attendants working 24 hours in the city, I would like
18 to talk about why this bill is so crucial to patients
19 and families of patients.

20 My 97-year-old grandma has received home care
21 services for almost ten years, when her dementia
22 first started to become too much for my Aunt, her
23 primary care giver to handle. Having to watch a
24 person nonstop day and night was taking an immense
25 toll on my aunt's mental and physical health. She

3 felt chained to my grandmother and herself sank into
4 a deep depression.

5 Every step of the way we had to fight insurance
6 companies for hours, as she now receives 12 hours a
7 day while my aunt cares for her at night. We have
8 had home attendants leave for various reasons and
9 each time we ask other home attendants to take up the
10 missing days and they would all refuse.

11 The home care worker who has been with my grandma
12 the longest does four days taking care of her. She
13 has said that taking care of a patient with severe
14 dementia is more tasking than any other job she's had
15 before. She has become like family. She would often
16 go over and beyond her duties but when we asked her
17 to take on a fifth day, she flatly refused.

18 Seeing her and my aunt caring for my grandma, I
19 see that home care work is very special and those who
20 do this work need special protections. We will all
21 need a care taker one day. Do we want to be cared
22 for by exhausted workers at their wits end, dying
23 inside or do we want them to be rested? Know that
24 society values and respects the incredibly hard work
25 that they do. We do this by-passing Intro. 0175 by

3 putting the cap on 12 hours a day and 50 hours a
4 week.

5 For the hundreds of immigrant women, like many of
6 the young people you heard today that I have met with
7 and that have shared their story with me, it has been
8 the same story after story about the deep sadness of
9 not being able to get away from work to care for
10 their own dying mothers. About spinal injuries that
11 leave them suffering long after supposedly healed.

12 SERGEANT AT ARMS: Time has expired.

13 SARAH ON: Why they suffer while cleaning urine
14 and feces. About the injustice and anger they feel
15 that they tell their supervisors that they cannot
16 sleep time and time again and they are told there is
17 nothing they can do. If you don't like it then
18 leave, they say.

19 Or sometimes they beg them to stay on because if
20 they don't their patient will be sent to a nursing
21 home. This is a trap that home attendants face.

22 I'll stop here. I urge you to take a stand. City
23 Council must be more progressive than the state and
24 right the wrong that the state failed to address.

25 Pass Intro. 0175. Women of color are not trash. To

3 be used up and discarded. Let's end this racist and
4 sexist practice that plagues the city. Thank you.

5 CHAIRPERSON DE LA ROSA: Thank you so much for
6 testifying. That concludes this panel. I thank you
7 for your patience and for sticking around this long.
8 I want to do a last call for any panelists that might
9 have been overlooked mistakenly. Last call, any
10 panelists? Did we miss anyone?

11 With none coming forward, I want to take time -
12 oh, there's one more, okay. Go ahead please. Sit
13 down, introduce yourself and there's one more person
14 up there. Please come downstairs.

15 [INAUDIBLE 7:37:40]: Hello, my name is
16 [INAUDIBLE 7:37:40]. I'm a staff at Chinese Staff
17 and Workers Association and I am also speaking you
18 know for myself, and I just want to point out three
19 points that has been mentioned in this panel, but I
20 believe have been neglected somehow.

21 First of all, if you look at here, we still have
22 many home attendants still sitting here after eight
23 hours. Because it's very simple, because it's life
24 and death issue. You know and I think many of the
25 opponents will try to pit the workers against the

1 patient, try to let you ignore one fact, is that
2 these workers are also patients.

3 They work these long hours. They already hurt
4 their bodies and they will be taken care of by home
5 attendants one day. And simply put, they don't want
6 the home attendant to take care of them, work 24-hour
7 work days. So, this bill is actually also for the
8 patient. Workers becoming patient. So, we shouldn't
9 let the city and the state government continue to
10 create more. You know patients through these
11 inhumane work days.

12 The second part I want to point out is actually
13 from a patient who spoke earlier, who said that he
14 used to have split shifts and then HR threatens that
15 if you don't get one shift, then you get sent to a
16 nursing home and as we all know, one shift means 13
17 hours instead of being paid 24 hours and we all know
18 that where these 11 hours go.

19 This is a practice simply very clearly benefiting
20 the insurance company and the home care agencies.
21 So, their story actually speak to that fact. So,
22 that should not be ignored. And third, I want to
23 speak as a former student of labor studies, that a
24 century ago, we have an eight-hour work day and now
25

3 we have 24-hour work days. You know, we're
4 regressing. It's shameful as New York City to have a
5 24-hour work day.

6 So, I urge the City Council to do the right thing
7 to stop this violence today by supporting passing the
8 Intro. 0175 to end the 24-hour work day and cap the
9 hours to 50 hours per week. Thank you.

10 YANINE PENYA: Hello, my name is Yanine
11 Penya(SP?). I'm here to read testimony on behalf of
12 a home care worker Belki Si Dabruno(SP?) who has come
13 to the worker center where I organize National
14 Mobilization Against Sweatshops.

15 My name is Belki Si Dabruno, I am from Dominican
16 Republic. I've been in the United States for 13
17 years and have been a home care workers for 13. I
18 came to this country not knowing the language. This
19 was the only job that I could find. I've had many
20 health problems since being forced to work 24 hours.
21 My health has declined significantly. I have joint
22 pain, bone pain. I can't stand up straight without
23 pain. I have mental health issues. My memory has
24 declined, and I cannot retain information. I have
25 chronic anemia. I sleep very few hours. I don't eat
well. I have not been able to eat well because of

3 work. I don't take time off. I'm always working and
4 have no recovery time. I do get vacation time, but I
5 do not take advantage of it because I need the money.
6 I always take the money at the end of the year
7 instead of taking vacation.

8 My husband is sick, and I am not able to work.
9 Since I have been working 24-hour shifts, I haven't
10 been able to take care of him and his health has
11 declined even more. I get no help from the
12 government to care for him. I have done this work
13 out of love for my husband, out of necessity because
14 he can't work.

15 This work has done irreparable harm to my life,
16 physically, mentally and spiritually. I have never
17 been able to return to my home country. Being paid
18 for only 13 hours robbed me of half my life. I
19 cannot afford to retire. I'm getting older now. I
20 have really struggled materially and can't stop
21 working. My time has been stolen from me. I retired
22 two months ago, but I'm still working because the
23 retirement pays so low. I receive \$1,050 from Social
24 Security and get \$52 from 1199. Meanwhile, my
25 condition has deterred significantly. They treat me
like a puppet. I feel like the city and the union

3 are on the side of the agencies and not on my side.

4 Will the City Council stand up with home attendants
5 and pass Intro. 0175 to end the 24-hour work day?

6 Tell us.

7 CHAIRPERSON DE LA ROSA: Thank you.

8 Carlos Rivera: Hello everyone. My name is
9 Carlos Rivera(SP?), I'm a resident worker. Resident
10 workers, we've been very - I'm together with a home
11 attendant because resident workers, we work 12 hours,
12 14 hours, 16 hours. But home attendants work 24
13 hours, and they part of the union, the biggest union
14 in New York City. They say they protect the workers
15 but that's not really protecting the worker. They're
16 killing the workers.

17 So, I'm very short to say this, it's very simple.
18 I'm here to support the Intro. 0175 and no more 24
19 hours.

20 CHAIRPERSON DE LA ROSA: Thank you so much. So,
21 just to clarify. The last call is for folks who have
22 not testified either virtually or in person. Anyone
23 else left to testify?

24 I want to remind folks that everyone can submit
25 written testimony to testimony@council.nyc.gov up to
72 hours after the conclusion of today's hearing.

1
2 Council Member Marte, you have something you want to
3 say?

4 COUNCIL MEMBER MARTE: I want to say, thank you to
5 all the Sergeant at Arms, all the staff, Chair De La
6 Rosa for sticking it out and also the Committee
7 staff, Nick and others for putting the time and
8 effort and energy to make sure that these people,
9 these stakeholders, these activists have a voice.
10 Thank you.

11 CHAIRPERSON DE LA ROSA: Thank you Council Member
12 Marte. I also want to thank the staff, the Sergeant
13 at Arms, the interpreters, all of the folks who stood
14 here so that everyone's voices could be heard. I
15 also want to thank Council Member Marte for
16 passionately defending his values and his community.
17 As he said in the beginning, right, this is deeply
18 personal for both of us. Both of our mothers were
19 home health aides, immigrant women of color who came
20 to this country so that we could stand here and
21 represent our communities on their behalf.

22 And so, today, was the beginning of a
23 conversation here at the City Council and we look
24 forward to righting some wrongs that have
25 historically been done across our communities and we

3 thank you all for the opportunity to hear your voices
4 on both sides of the argument because they help to
5 formulate our plans going forward.

6 So, we thank you. And with that, we want to
7 adjourn tonight's hearing. Get home safe everyone.

8 [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 September 28, 2022