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COMMITTEE ON GENERAL WELFARE

CITY COUNCIL
CITY OF NEW YORK

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TRANSCRIPT OF THE MINUTES

Of the

COMMITTEE ON GENERAL WELFARE

November 21, 2019
Start: 10:19 a.m.
Recess: 1:33 p.m.

HELD AT: Council Chambers - City Hall

B E F O R E: STEPHEN T. LEVIN
Chairperson

COUNCIL MEMBERS:
VANESSA L. GIBSON
BARRY S. GRODENCHIK
ROBERT F. HOLDEN
BRAD S. LANDER
ANTONIO REYNOSO
RAFAEL SALAMANCA, JR.
RITCHIE J. TORRES
MARK TREYGER

COMMITTEE ON GENERAL WELFARE

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

Fabienne Laraque
Medical Director for the New York City Department
Of Homeless Services, DHS

Corinne Schiff
Deputy Commissioner for Environmental Health from
The New York City Department of Health and Mental
Hygiene, DOHMH

Sharifah Harvey
Member of the Client Advisory Group at the
Coalition for the Homeless

Janet Perry
Resident of New York City

Lakayla Booker
Former Graduate of Americorps, Resident of New
York City

Katrina Corbell
Client Advisory Group with Coalition for the
Homeless

Giselle Routhier
Policy Director at the Coalition for the Homeless

Jacquelyn Simone
Policy Analyst at the Coalition for the Homeless

Deborah Berkman
Senior Staff Attorney in the Public Benefits Unit
And Shelter Advocacy Initiative at the New York
Legal Assistance Group, NYLAG

Barbara Hughes
Executive Director of City Beet Kitchens at
Project Renewal

Roxanna Henry
Social Worker and Advocate for the Urban Justice
Center, Safety Net Project

Cee Cee
Resident of New York City Homeless System

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COMMITTEE ON GENERAL WELFARE

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

Froska McGallister
Representing Urban Justice Safety Net Project,
Resident of Bushwick Houses

Lilly Knopf
Resident of Susan's Place

Felix Guzman
Coalition for the Homeless

Elohim Ray
Resident of New York City Homeless System

[gavel]

CHAIRPERSON LEVIN: Good morning

everybody. Alright, my name is Steve Levin, I'm

Council... Chair of the Council General Welfare

Committed joined here today by Council Members Barry

Grodenchik and Bob Holden of Queens. Today we will be

hearing... today's hearing will be addressing the issue

of food access, quality and safety at our Department

of Homeless Services shelters. Every single New

Yorker regardless of their housing status or level of

income deserves safe and nutritious food. It is

imperative to this Committee that individuals and

families in shelter have access to quality food not

only because it is the humane thing to do but also

because diet is a critical part of health and overall

wellness. As we all well know housing status is very

much a public health issue. Those experiencing

homelessness are more likely to have medical needs

and health issues than their securely housed

counterparts... more, more likely to have medical needs

and health issues than their securely housed

counterparts. Poor and inadequate diet can exacerbate

or even cause some of these health issues and

conditions that disproportionately affect those

experiencing homelessness. Housing insecurity is incredibly stressful, and the experience of homelessness is fraught with hardship and difficult challenges. Accessing food, good and nutritious food should not be one of those. During 2017 over 18 million meals were served in New York City's homeless shelters. There are 100 shelters overseen by DHS that have food catered or prepared onsite. While food served by city agencies must meet certain requirements regarding nutrition per the food standards set by the city, we know through the state comptrollers audit last year, talking to those in shelter and news reports that these meals are often inadequate for individuals and families served. The recent news reporting that six people became violently ill after eating food suspected to be spoiled at the Auburn family residence in Fort Greene and many reported incidences before it underscores the need for the city to ensure that food served is safe and healthy. Barriers to healthy and adequate food remain for those in the shelter system. Most of those individuals and families in shelter cannot assemble or prepare meals for themselves with these settings lacking the proper space and resources to do

so. With lengths of stay averaging well over a year in shelter the... this inability to make such basic decisions as to what you will feed yourself and your family must take a toll. At a bare minimum we need to ensure that the, the food provided to residents is safe, healthy and accommodates any dietary restrictions. Today the Committee will examine DHS and DOHMH food quality and safety standards, the inspection process for both agencies and the quality assurance measures put into place to ensure access to nutritious food at city operated and provider run shelters. I want to thank the members of the administration and the advocates who are here today for joining us and I look forward to hearing from all of you on these critical issues. You know just on, on a personal not I was telling my two and half year old daughter this morning what I was going to be doing at work today I struggled to explain to her what this hearing would be about because I didn't want her... it was hard to explain why some, some children don't have a kitchen and why some children don't have access to a home cooked meal, why some children don't have a home and I, I decided to, to not... to not burden her with that this morning because I knew that

1 it would concern her because no child should be
2 without the ability to have, you know a home cooked
3 bowl of oatmeal in the morning or a home cooked
4 dinner at night and until, until we are ensuring that
5 every child is able to have that that's in our city
6 shelter system then we still have a lot more work to
7 do. So, I want to thank my colleagues that are here
8 again Council Member Grodenchik and Holden and I want
9 to also thank staff for preparing today's hearing
10 Aminta Kilawan, Senior Counsel; Crystal Pond, Senior
11 Policy Analyst; Natalie Omary, the Policy Analyst and
12 Frank Sarno, Finance Analyst as well as Jonathan
13 Boucher my Chief of Staff and Elizabeth Adams my
14 Legislative Director. And with that I will turn it
15 over to members of the administration for testimony.
16 We are joined by Doctor Fabienne Laraque, the Health
17 Director at the New York City Department of Homeless
18 Services and Corinne Schiff, New York City Department
19 of Health and Mental Health and I will ask Committee
20 Counsel to swear you in.

22 COMMITTEE CLERK: Would you please raise
23 your right hand? Do you affirm to tell the truth, the
24 whole truth and nothing but the truth in your
25

testimony before this Committee and to respond
honestly to Council Member questions?

[panel affirms]

COMMITTEE CLERK: You may begin.

FABIENNE LARAQUE: Thank you, good
morning Chairperson Levin and members of the General
Welfare Committee. Thank you for this opportunity to
testify and speak on the important work to transform
the haphazard shelter system that build up over many
decades and in particular on food access, quality and
inspection at DHS shelters. My name is Doctor
Fabienne Laraque and I am the Medical Director for
the New York City Department of Homeless Services. My
colleague, the Administrative Nutritionist Miss Diana
Salerno should have joined us, she's directly
responsible for food services however she's currently
nine months pregnant and in the hospital and I'm also
joined by Corinne Schiff, Deputy Commissioner for
Environmental Health from the New York City
Department of Health and Mental Hygiene. As you know,
in 2017, Mayor DeBlasio announced Turning the Tide on
Homelessness in New York City, a plan that places
community and people first in addressing
homelessness, giving homeless New Yorkers, who come

from every community across the five boroughs, the opportunity to be sheltered in their home boroughs, as close as possible to their support networks, anchors of life, including schools, jobs, health care, family, houses of worships, and communities they called home, in order to more quickly stabilize their lives. This will be achieved by ending the use of 360 cluster shelter and commercial hotel locations while opening 90 borough-based shelters in all five boroughs, which will shrink the Department of Homeless Services' footprints by 45 percent and allow us to implement a more equitable system that takes into account the individual needs of the children and adults which we shelter. And we continue to make good on this promise, just earlier this week, we announced the planned conversion of 14 cluster buildings, used to house homeless families into over 200 affordable permanent housing units. As far as the Office of the Medical Directors, our efforts to transform the past approach to providing shelter has included investments in how DHS delivers and ensures health care for those seeking or residing in shelter. One of those investments was adding appropriately licensed and experienced clinical staff to the office I

manage, the Office of the Medical Director. These additional staff allow DHS to better respond to those in shelter with medical and behavioral health needs and to design, plan, and oversee such services. The Office of the Medical Director has oversight with regards to medical, health, and mental health standards and related consultation needs of the DHS system. My office, comprised of an integrated and complementary highly-skilled team; has implemented a successful overdose prevention program; is working with DOHMH and DHS' Program teams to provide hepatitis A vaccinations to street homeless clients and clients residing in mental health and substance use shelters; is developing tools and mechanisms for increasing access to care and is improving the quality of food and medical services; lastly, works to develop standard guidelines and procedures in collaboration with the DHS Facility and Logistics Division and Program Divisions which, respectively, conduct overall shelter inspections and have oversight on all aspects of shelter operations and shelters compliance with standards. Foodborne illness, obesity, and heart disease are conditions that are impacted by the food a person consumes, and

particularly for foodborne illness, a serious health concern, we take strong measures to ensure shelters meet the state sanitary code, federal guidelines, and the New York City Health Code, and the New York City Food Standards. The health and safety of our clients are of the utmost importance. For this reason, we invest in providing guidance, training, developing tools, providing technical assistance for proper food services in shelters. All shelter employees responsible for receiving, storing, preparing, and/or distributing meals to DHS clients must follow guidelines set forth by the agency, based on New York City Health Code Article 81, and federal and state guidelines. For instance, shelter employees must be trained on food safety; free of communicable diseases transmittable by food, water, hands or air; and compliant with work requirements, such as wearing hair restraints and gloves, when serving food, and practicing good hand hygiene. Sites that prepare, store, heat and/or distribute meals to DHS clients are required to obtain a food service establishment permit from the Health Department and comply with the City Health Code and the food and nutrition standards. Sites are annually inspected by the Health

Department and must communicate the inspection results with DHS. As with all food service establishments in New York City, the DHS sites must have a certified New York City food handler, who has received food protection training, present at all hours of the food service operation and when receiving meals and food ingredients. DHS is regularly monitoring the status of shelters' permits as they are annual permits, there is constant surveillance of permit statuses across the DHS system to ensure the sites are abiding by the DOHMH permit requirement. Along with regular food service inspections completed by DOHMH, DHS, as part of the Routine Site Review Inspection which is our primary tool to inspect and assess the physical plant conditions of our shelters to ensure they are in compliance with codes, regulations, and laws, also conducts semiannual food service inspections at all DHS directly-run and contracted shelters. If necessary, a corrective action plan must be submitted to DHS within 14 business days. Shelters are required to develop and implement procedures to ensure meals meet the food safety standards outlined in local, state and federal food sanitation codes, and to

conduct regularly... regular food safety quality tests to maintain high food safety standards. An important point to underscore is that when food is delivered, good food safety management is essential. Shelters must ensure that all food ingredients and meals received are not expired, are properly labeled, are of acceptable temperature and quality, and are subsequently stored according to sanitary standards. To assist shelters in their efforts to ensure, ensure food safety and abide by food sanitation codes, DHS has issued a procedure bulletin that outlines all the food safety points that I have mentioned, and well... as well as other important areas to prevent food-borne illnesses, such as: proper heating, reheating, and cooling of meals; monitoring of served food, refrigerator and freezer temperatures; proper washing of cooking and serving utensils and sanitizing of dishes and food contact surfaces. To support shelters in their efforts to comply with food safety standards, we develop training tools and guidance documents, offer corrective action plans, and are developing a webinar which shelter staff will have to review annually to keep up with their training on food safety. In addition, the DHS nutritionist

provides regular technical assistance to shelter staff to assist with implementation of food safety standards. In terms of nutrition, obesity is a risk factor for many health conditions including diabetes, cardiovascular disease, and hypertension. In New York City, obesity is epidemic; more than half of adult New Yorkers are overweight or obese. The rate of childhood obesity is rising, nearly half of all elementary school children and Head Start children are not at a healthy weight. As the Administration testified in the Council's Food Equity hearing in September, we are well aware of the concern of access to nutritious and healthy food for low-income New Yorkers. With our Administration partners and sister agencies, we are committed to increasing this access. An example is the creation and implementation of the Plentiful app to increase food pantry usage and help clients reduce the amount of money spent on food. Moreover, scientific evidence indicates that health outcomes are directly tied to access to adequate nutritious food. New York City created the New York City Food Standards to reduce the prevalence of obesity-related health conditions by increasing access to healthy foods and improving dietary intake.

These standards set forth the amount of nutrients, including sodium, protein, fat and sugar, and the types of food to be used. For example, the use of whole grain products. Today, the Standards apply to the approximately 250 million meals and snacks per year that are served in places such as schools, senior centers, homeless shelters, childcare centers, after school programs, correctional facilities, public hospitals and parks. At DHS, we work closely with shelters to comply with the New York City Food Standards which contain standards for purchased foods as well as meals and snacks served. The Food Standards overarching goal is to help lower the risk of obesity, diabetes and cardiovascular disease for New Yorkers served by City agencies, a goal carried out by increasing the amount of fiber and decreasing the amount of fat, sodium, and sugar in clients' diets. DHS' Administrative Nutritionist works with DHS sites to monitor compliance with the NYC Food Standards, review meal menus and portions and conduct or review nutrient data analyses to ensure healthy nutrition standards are met, and provide technical assistance to staff on means to enhance nutrition and improve meal services. Annually, DHS collects food

metrics data from shelters and sites to comply with the New York City Food Standards and are... those are included in the Mayor's Food Metrics Reports, as well as to identify areas that need to be addressed to make sure clients are being served nutritious and healthy food. As part of our ongoing effort to improve the nutritional health of our clients, three initiatives we are currently working on are; to provide available interactive nutrition demonstrations with healthy eating lessons to increase acceptance and consumption of fruits and vegetables, implement Meatless Mondays at DHS-run shelters, and carry out an increase in the caloric intake standards for male clients in the shelter system to ensure clients receive sufficient calories for their daily living according to their needs. This particular change follows current federal dietary guidelines. Previously, the recommended calorie intake standard was 2,000 for both men and women. We recognize that some of our clients come from different backgrounds and have different needs. For clients who have medical conditions or dietary restrictions, such as requiring kosher or hallal meals, DHS' reasonable accommodation policy requires

that their dietary needs are met. As you've heard, DHS is committed to working with our shelters to ensure that our clients receive nutritious and safe meals. Thank you for this opportunity to testify and I look forward to your questions.

CHAIRPERSON LEVIN: Thank you very, very much Doctor Laraque. I also want to acknowledge Council Member Brad Lander has joined us. So, I'll start by asking throughout the, the shelter system there's different formats of shelter, correct?

FABIENNE LARAQUE: Yes, that's correct.

CHAIRPERSON LEVIN: Can you explain a little bit how food service works in the various iterations of shelter whether it's a single adult shelter, city run, not for profit run and then within family shelter there are three versions of family shelter, tier two, hotels and cluster sites if you can kind of go through a little bit of how, how, how New Yorkers in shelter are interacting with food.

FABIENNE LARAQUE: So, thank you for your question. So, for single adult shelters those are all a congregate setting where clients share a large room, in all of the single adult shelters food is provided, they receive three meals a day plus snacks.

They, they receive the same basically type of food.. sorry, they actually... there, there are different ways that the food is served so some shelters can cook on site and depending on the setting of the facilities some actually have a, a full kitchen and they cook on site, some shelters receive batch meals in, in large trays and proportion and others receive trays that are individual trays and sealed. They... again they're providing three meals a day and the meals follow the food standards and the food and safety codes. In terms of the family shelter, the tier two shelters have full apartments and kitchens so the family cook for themselves. In the hotel because the... of the lack of kitchen this is not possible, so they receive meals. My understanding that the cluster sites also apartments so clients cook for themselves. In terms of contracted and directly run, the directly run sites and a small number of contracted sites receive food from DHS directly held food contracts whereas the rest of the providers have their own subcontractors and food caterers that, that they can use. Regardless they have to follow contractor rules, they have to follow the food standards, they all have to follow the sanitary code, their menus are reviewed

by a dietician and if any menu is not compliant there will be corrective action to bring the menus into compliance.

CHAIRPERSON LEVIN: Okay, so with regard in particular to hotels, you know I'm very concerned about children that are residing in hotels, I imagine if there's 22,000 children in the shelter system there's got to be seven, eight, 9,000 that are in hotels and the length of stay is, is... has continued to go up over time and so the average length of stay is over 400 days now and I'm very concerned about those family's ability to just appropriately feed their children, having a microwavable pre-cooked meal, three meals a day for a year and a half for a young child I, I think that that can be very, you know detrimental to their health, to their kind of psychological perspective, I think it would be impactful and it's... just the idea that you don't have... I mean do they have refrigerators in hotels, I mean do they have a... maybe a small minifridge probably but... [cross-talk]

FABIENNE LARAQUE: They can request a refrigerator, that's correct.

CHAIRPERSON LEVIN: Minifridge but, but not enough to keep a carton of milk necessarily... or you know you can maybe have a carton of milk but you, you can't have a carton of milk and a carton of orange juice and leftovers and... etcetera and what I'm concerned about is when families don't have... or you know are, are... grow... maybe grow wary of the, the... you know the, the microwavable food that is provided may, may order out, may do take out, food that's high in sodium, you know it can... it can have, you know a variety of impacts on both children and adult's health, this relates to high blood pressure, diabetes, etcetera. So, what, what do we do about that, I mean how are we... you know and, and just, just to... one other thing is that, you know most of the hotels are actually run by just two providers, there's really just... you know the big contracts, it's about 500 million dollars between two providers to do hotels and so you know a very large part of the system and actually as cluster sites are being phased out we are continuing to rely on hotels and I think that that's probably going to be the case for the foreseeable future. So, how are we approaching that issue strategically?

FABIENNE LARAQUE: Thank you for your concern, this is a very serious concern. The health of our client is critical to us especially with children that are so vulnerable. Our heart definitely goes to the children and that's why we want to phase out the hotels, so our plan is to phase out the hotel and build as part of our 90 new shelters enough family shelters for our families. Of course, this takes, you know a little time to get that transition in the meantime we work closely with the hotels to ensure that the food is safe and nutritious.

CHAIRPERSON LEVIN: Right but how are we... so, the contractors themselves are doing the... or the, the... you know the, the provider agencies are doing the contracting for the food, how are we... [cross-talk]

FABIENNE LARAQUE: Yes... [cross-talk]

CHAIRPERSON LEVIN: ...what's... how are we inspecting their... I know that the... actually if you could speak a little bit to the comptrollers report and the findings there, state comptroller from, from 2018 which noted that of the sites that they visited only, only 59 percent of the inspections, the relevant inspections had been done, can you speak a

FABIENNE LARAQUE: Certainly, thank you for the question. We work very closely with the auditors from the comptroller's office and provided all the information that we had. Note that the... some of the years that the comptroller's office reviewed were prior to this new set of staff in the medical director's office, we agreed with most of the recommendations and we have put corrective action in place and we are in compliance with the recommendations. As far as inspections are concerned our routine inspections review all the shelters twice a year, we are in compliance and we have reviewed all the... inspected all the shelters twice, twice a year. If a deficiency is found depending on the level of the deficiencies a corrective action will be requested and we will work closely with the providers to, to improve. In addition, DOHMH conducts an inspection once a year.

CHAIRPERSON LEVIN: So, on provider run shelters who, who has the responsibility on, on ensuring food safety, is it the... is it the provider or is it the food vendor?

FABIENNE LARAQUE: It's all of us. So, if they have a food vendor and they do not cook on site then the food vendor has to meet all the federal, state and city guidelines, their food has to be nutritious, it has to be... it has to be safe, it has to be transported and stored at the... in the right conditions, the shelter also... as... the moment they receive the food they have a responsibility for verifying that they are receiving the food that was ordered, that was expected and that the food is at the right temperature, its not expired, there is no broken labels then once they receive the food they are... they store the food at the right temperature, their refrigerators have to be working, they have to check refrigerator's temperature, all the conditions, they have to store the food according to guidelines and then on the DHS side we inspect all the facilities, we... and we work to... for corrective action and DOHMH also inspects all of the facilities.

CHAIRPERSON LEVIN: Prior to January of 2018 before the routine site review inspection process was incorporated was... were inspections done regularly and who did those inspections then?

FABIENNE LARAQUE: There were two administrative contract staff that were... that did the inspections in the... in the administrative office so they conducted inspections.

CHAIRPERSON LEVIN: Were they... were they trained in food safety?

FABIENNE LARAQUE: I believe so. But because we... clearly, we didn't think that was sufficient that's why we now have 28 inspectors.

CHAIRPERSON LEVIN: And that's up from two inspectors prior? So there's... realistically it's unlikely that two inspectors would have been able to adequately inspect all of the shelters in New York City and all of the... or just... twice a year, it just seems unrealistic and so are we reading... reaching the targets that we're setting for ourselves now about twice a year inspections for each... [cross-talk]

FABIENNE LARAQUE: Yes, we are.

CHAIRPERSON LEVIN: Okay, are there any exceptions to that?

FABIENNE LARAQUE: No.

CHAIRPERSON LEVIN: Is OTDA notified when there are violations that are issued?

FABIENNE LARAQUE: Yes, OTDA... we have an office of regulatory compliance that communicates with OTDA.

CHAIRPERSON LEVIN: Okay. And now... and where... when does DOHMH inspection come into the process or is there... is there... is there... are they separate inspections, are there follow up inspections that are done by DOHMH or...

CORINNE SCHIFF: So, the, the Health Department has long inspected homeless shelters that are providing food to their clients, our inspect... we inspect once a year and more frequently if we find issues that require follow up.

CHAIRPERSON LEVIN: Okay and so that's a bare minimum of once a year, in coordination with DH... DOH... DHS or is it a totally separate process?

CORINNE SCHIFF: These are separate processes, these are unannounced inspections and I... and I should say that the New York City health code sets out require... food safety requirements and those apply to any type of food service establishment whether it's a restaurant or a homeless shelter and our inspection is the same; we're looking for same kind of compliance with the very same rules. We are

1 coordinating very closely with DHS to communicate
2 findings with them and, and since the audit revealed
3 and, and I... and you know that we agreed with some of
4 those findings revealed that there were providers
5 that we... that the Health Department was not aware of
6 and so even though we had long been doing inspections
7 there were ones that we did not... that we were not
8 aware of and so we committed together to make sure
9 that all of those shelters came into compliance with
10 permitting requirements and with... and with... so that
11 we could do those inspections and so we're now
12 working closely to make sure that that information
13 stays up to date.

14
15 CHAIRPERSON LEVIN: No... why wasn't DOHMH
16 aware of those providers, they just hadn't filed for
17 permits?

18 CORINNE SCHIFF: That's right and that
19 can happen with any food service establishment...
20 [cross-talk]

21 CHAIRPERSON LEVIN: Uh-huh... [cross-talk]

22 CORINNE SCHIFF: ...it happens, you know
23 with, with restaurants as well, someone can, can open
24 for business and, and it... we may not know that they
25 exist and so we have systems in place and I think

1 what we learned... all learned in that audit was that
2 some of those systems had, had, had failed and so
3 we've now put them into place and so we have a very
4 routine coordination now to make sure that our
5 information stays current so that providers know that
6 they need to get a permit from us and we... and DHS
7 lets us know when those providers come online so we
8 can work with the shelter to make sure that they come
9 into the permitting process and then... and, and that
10 they are then inspected.

12 CHAIRPERSON LEVIN: And that was just a
13 communication or coordination issue between DHS and,
14 and DOHMH that they were not informing DOHMH of the...
15 [cross-talk]

16 CORINNE SCHIFF: I think that the, the,
17 the information wasn't kept current and, and, and as
18 you know I clearly reviewed the audit and, and as
19 obviously did we and that was something that was
20 revealed and so we have... we've essentially fixed
21 that... [cross-talk]

22 CHAIRPERSON LEVIN: Uh-huh... [cross-talk]

23 CORINNE SCHIFF: ...and have a really good
24 close coordination now and so I think that our
25 information stays very much up to date.

CHAIRPERSON LEVIN: Before I turn it over to my colleagues, I did want ask about the incident at Auburn and whether there's been any clarity as to how that happened, I've, I've read conflicting press accounts of, of, of what happened there, I mean the first question is, you know were in fact these individuals food poisoned; second question is have we determined who tampered with, with the expiration dates and, and... or what happened there and, and what the action is going to be taken being that this is a city run shelter and not a... not a non for profit shelter?

FABIENNE LARAQUE: Thank you for these questions. On behalf of DHS my heart goes with all of those that went to the hospital, due to pending litigation we cannot comment on the particulars of the issue at the time but what I can say is that DOHMH testing from the incident show that the food was negative for bacteria pathogens and we provide and we, we will continue to provide nutritious, safe food to our shelters.

CHAIRPERSON LEVIN: And there's nothing more that you could say due to the litigation?

FABIENNE LARAQUE: That is correct.

CHAIRPERSON LEVIN: Okay, I'm going to turn it over to my colleagues for questions, Council Member Lander first.

COUNCIL MEMBER LANDER: Thank you Mr. Chair for convening this esteemed hearing and thank you both for being here and I'll start by... this is obviously a really critically important topic and, and I'll confess it's one that I have not focused on enough myself even though I have both shelters and hotels in my district serving families and kids so I want to push us to do better but I don't want to do it like self-righteously, I appreciate that this is something that we all need to give more attention to than we've been... than we've been giving and I guess I want to start with a question of like, you know I understand especially responding to the state comptroller's report and the health code why it's easy to think of this as we've got standards that we must make sure we live up to it but it, it strikes me there's an opportunity here to treat it a little differently than just like there's some minimum standards that we must be held accountable to, we've got our most vulnerable kids and families and here's an opportunity to provide them with like nutrition

and a way of thinking about and relating to food and getting ready for themselves to... so, it, it... but it doesn't sound to me like we are... we have that at all, I mean if what we're doing especially for folks in hotels is just like some vendor delivers minimally adequate meals and once a year we inspect and make sure they're not subpar and then I want to ask a few more questions about the shelters where I'm guessing there's a couple that probably have some models for doing this well but is there a... is there a plan within DHS to say like not... nutrition is not just like minimal compliance with state health guidelines but an opportunity to do right by our most vulnerable children and, and families and if so where is it?

FABIENNE LARAQUE: Thank you very much for your question, this is obviously a very important question and as public health specialists we take at heart the health of our children. DHS hired... for example, myself as a public official but also an administrative nutritionist who has long experience in providing food to vulnerable populations. What our administrative nutritionist did when she started at the end, end of 2016 she surveyed... so, so there's a plan, she surveyed all of the shelters, she spoke to

all the directors, she catalogues what type of food is served, what is happening in the shelter so under one hand we are going to... we are making sure that the standards are, are applied so that's one part of what we do, she created... we... DHS created a, a whole comprehensive series of food standards of food policy, we provided assistance, we developed tools for... and... to work with shelters and providers. On the other hand, yes, we have creative ideas, we want to improve nutrition, so our nutritionist conducted two food surveys one in the adult shelter system and one in the family. One of the things that we like to do is really hear from our clients, how can we develop programs if we don't hear from them, so we've gotten into the habit of having focus groups, interviews, surveys with our client to hear from them. So, she... we are using the recommendations from both surveys to make changes. Our nutritionist also collaborates with other city agencies, the Department of Health, the Office of Food Policy, even DFTA, she regularly speaks to other agencies and reviews the literature and is up to date and so we want to do food demonstrations for our clients, we want to promote the use of the Plentiful app, Plentiful is an app

that was developed by the food collaborative that...
HRA puts stipend in and with that app you can
actually better access food pantries and reserve food
in advance and not have to, to, to have a line so we,
we... [cross-talk]

COUNCIL MEMBER LANDER: I, I downloaded
it when I was at Masbia maybe two or three weeks ago,
they use it and, and it is a... it is a, a good... that's
a good system. So, the, the surveys you mentioned and
the plan you mentioned have those been made public or
shared with the council?

FABIENNE LARAQUE: No, we haven't, the
surveys are still internal we're still finalizing the
report and, and present it showing... in terms of
sharing it I'm going to have to defer to the
administration in our... and our... and talk about that.

COUNCIL MEMBER LANDER: Okay, well I'm
going to ask for the record will you please provide
them to the Council?

FABIENNE LARAQUE: Yes.

COUNCIL MEMBER LANDER: Okay and I mean I
guess you can follow up with the Chair on our Council
as to what... as to what deadline, you know the kind of
things that you won't surprise you that often come

1 out of these hearings are like a bill requiring you
2 to develop a plan and so if you already have the plan
3 and the surveys and you want to share them with us so
4 we don't need to do it by law that would be great and
5 I'm eager to see what, what things... you know and look
6 I'm sure people said because we saw the pictures of
7 the food and evidence from the comptroller's report
8 that people said the food stinks so I understand why
9 the survey is not going to be like the food is great
10 so... but let's... and I think... will that be broken down
11 by who was in a hotel, who was in a shelter where the
12 nonprofit themselves provided the food and who was in
13 a shelter where a contractor provided the food?

15 FABIENNE LARAQUE: Yes, it is also broken
16 down, we... yeah, with the type of food, whether
17 they're batch meals, cook on site or trays and not...
18 and surprisingly the, the cook on... the meals that are
19 cooked on site are preferred but the results are not
20 as bad as you might think.

21 COUNCIL MEMBER LANDER: Okay, well then,
22 all the more reason to provide them to us soon. Can
23 you just give us a breakdown of the categories you
24 said here, I mean the Chair asked some of these
25 questions but I think it will helpful for us to

understand in the hotels it sounds like from the Chair there's two contracts so can you just like for the hotels and the shelters can you just give us a breakdown of... yeah, like who has the... you know how big are the contracts and what shelters are doing cooking on site and what shelters are contracting for their food?

FABIENNE LARAQUE: We can certainly provide you this information, I don't have all the details from the top of my head, we know that there is a number of shelters that, that cook on site and that receive batch meals, we know who the vendors are and we can provide you that category, certainly.

COUNCIL MEMBER LANDER: So, so that'll be good and again respectfully like that's the kind of data was reasonable to maybe bring to this hearing since this hearing is about exactly that topic so I wish you had it today but if you will provide it and follow up that would be... that will be great and then we'll look... we'll look forward to getting the kind of results that break down what the feedback and responses were. Go ahead, sorry.

FABIENNE LARAQUE: I'm listening.

COUNCIL MEMBER LANDER: And is there any difference in inspection regime either from DHS or from DOHMH or other partners depending on what the... you know whether the... whether it's delivered by contract in a hotel or whether it's... it sounds to me like there's more reason to be concerned about whether the hotel food, the food that, that are families that are in hotels are getting is, is more likely to be not living up to the standards than the ones in the shelters so are we providing any extra scrutiny in places where there's reason to be more concerned or is it just the kind of once a year across the board?

FABIENNE LARAQUE: So, as far as the inspections are concerned we do it twice a year, it's the same inspection across the board, we have a standard tool that is quite detailed that we review but in terms of the... we also do a separate... we also review the nutrition standards so there's a food safety that is subject to the inspection and then there's the nutrition contents so every shelter that provides food has to report their nutrient analysis, the nutrition is compiled as information, look at it very, very, very carefully and if there is any

deficiency identified we actually will work with the... with the shelter to make sure that the food meets the standards. This report is compiled and sent to the Department of Health, the Mayor's Office of Food Policy for their annual report and I can actually report that we are 93 percent compliant which is the same as the city average.

COUNCIL MEMBER LANDER: And for the places where... and I guess again without the data it's a little hard to know but it sounds like for the hotels we've got a couple of large providers and, and maybe for the shelters that are contracting there's also a couple of large providers that... I mean on the one hand you could go on site and inspect the shelter and see the food but on the other hand if we have a couple of vendors providing large scale amounts then there's opportunities to sort of focus on them, you could go upstream, you could look at the places they're making it and delivering it and give feedback and push for better kind of upstream rather than by the time it arrives at the shelter, what's the relationship with the large... with the large providers?

FABIENNE LARAQUE: Certainly, we... our nutritionist works with the vendors as needed and if there are... you know the food caterer she's in, inspected and visited... not fully inspected but she's visited the food caterers and she works closely with them, the large food caterers though are... they have to meet federal standards, state standards and the New York City food codes so we are quite confident that our food is safe and nutritious.

COUNCIL MEMBER LANDER: Okay but... okay, do you believe that the fed... the minimum federal standards, state standards and New York City food codes as a nutrition... and I... look, I want to... I don't doubt that what you want is like really robust healthy families but I know the way that we contract often produces the least common denominator like that's how the world works so I don't know who wrote the contract, I might get to that in a minute but are those standards... do you believe that those standards are what you would want for the families in our homeless shelter system?

FABIENNE LARAQUE: So, the food standards are based on, on evidence, on health evidence, their goal is to reduce the incidents of cardiovascular

diseases and obesity and obesity is the... is, is a problem in... for both adults and children, we see children developing adult onset diabetes, you know as children so the food standards... the aim of the food standards is really set the proper nutrition proportion in terms of salt and fat and sugar. I understand that when clients are served food the, the choice is removed in, in terms of what they can eat but the, the goal of the food standard is not to, you know restraint and, and meet minimum standards it's really what all of us should follow, we should all follow the food standards, that, that's, that's the healthy way to eat.

COUNCIL MEMBER LANDER: Have you or the administrative nutritionist given input or feedback for what should be in those contracts?

FABIENNE LARAQUE: The contract, yes, yes, absolutely. We... for the... for the directly run contract the, the new RFP was written closely in collaboration with administrative contract and, and our nutritionist. The nutritionist reviews every menu, she needs to get them every time, she needs to get them when they are changed, she will take... so, every four weeks... so, the... they, they provide menus

1 in four week cycles that get repeated, four week
2 cycles, three meals a day, that's dozens and dozens
3 of meals, every meal has different ingredients so she
4 looks at every single ingredient, every single meal,
5 the food content, the... and she does a nutrition
6 analysis so the, the menus are really scrutinized. We
7 also hear complaints, if... say if a city is receiving
8 cheese sandwich every other day we hear that or she
9 will identify such a... its not a deficiency per se
10 but, you know not necessarily the best and she will
11 suggest a substitution in the menu for more variety
12 and, and diversity.

14 COUNCIL MEMBER LANDER: Okay and does
15 that then result for particular contractors or
16 vendors in some sort of, you know report card scoring
17 system if there are vendors to whom you're having to
18 say more often this is a problem, is there some
19 evaluation system by which the vendors and providers
20 are, are scored, evaluated, monitored, improved?

21 FABIENNE LARAQUE: They... so for the... we...
22 the nutrition report, we communicate with them when
23 they're not compliant. In terms of having a standard
24 scoring, DHS started shelter report cards, the food
25 and nutrition portion is not yet on it but this is

the... a thought of this new administration is to really increase compliance, raising the bar so we're really working hard to raise the bar so that is something that definitely I can take back to the agency in terms of... [cross-talk]

COUNCIL MEMBER LANDER: Just so I understand you, are you saying there, there is a plan to add a food element or you're saying that might be a good idea that you'll go we'll consider?

FABIENNE LARAQUE: That's a good idea and we'll bring it back... [cross-talk]

COUNCIL MEMBER LANDER: Okay... [cross-talk]

FABIENNE LARAQUE: ...to the agency... [cross-talk]

COUNCIL MEMBER LANDER: ...great, very good, thank you. And then I guess my last question then I'll... appreciate the time and I'll, I'll yield back. I'm guessing that our best providers and I know some of... you know some of them I've been in, you know the Kensington Family Shelter has a wonderful kitchen, you know and I know they do education and training programs, do you have either as sort of like best practice models or as obligation some guidance

that... for shelters to do education and training programs that are helping people develop good healthy eating and, and cooking practices?

FABIENNE LARAQUE: Thank you for the questions. We... this is definitely something that, that we want to do, that is kind of the fun part of the job if I may say as public health specialist so that's something that's in our plan. We have for example a, a vista fellow that is working with our nutritionist and we are... the... it's, it's our plan to develop tools and, and promote education and help shelters be in contact with community organizations that can provide this type of education.

COUNCIL MEMBER LANDER: Okay and you know my hunch... the... you know from having seen a couple of it is that if you, you know sort of source from some of them some of them are already doing this and it might be possible to just take best practices that are already existing and try to spread them over...
[cross-talk]

FABIENNE LARAQUE: Exactly, in fact we had a demonstration not long ago, a healthy three bean salad or... and it was really well received, I

mean healthy food can be good and I can attest to that... [cross-talk]

COUNCIL MEMBER LANDER: Yeah... [cross-talk]

FABIENNE LARAQUE: ...and so the demonstration was well received, yes.

COUNCIL MEMBER LANDER: And, and I'll just end with this as a statement not as a... as a question so I, I don't take any more time but on school food, you know I think if you had looked at school food ten or 15 years ago you would have said uniformly we are not doing all that well at providing healthy nutritious, appealing food to kids and broadly, you know and we made some progress, a lot of that progress was led in places where parents have more time, have more money, were able to lean in, raise some dollars, bring in wellness in the schools and then people rightly asked equity questions and so some of those practices have now been spread across the whole system although we still have a ways to go obviously that's a little less the case in our shelter system where you don't have like lovely PTAs raising money at fundraisers to say can we bring in a not for profit that can up our food game but it just

strikes me that, you know especially this week of having read the Eliza Shapiro story and it being thanksgiving and kind of hearing this that you know we should just all push ourselves to be the PTA that wants to make sure that homeless families in our system like not only don't have food that doesn't meet standards but actually have food that we would want to feed our own kids so let's, let's keep working hard to do better. Thank you.

FABIENNE LARAQUE: Thank you.

CHAIRPERSON LEVIN: Thank you Council Member Lander. I just wanted to follow up on... a little bit more around hotels and then I'll, I'll call on Council Member Holden. What is the... because there's... sorry, starting off, the... because there's really two main providers that do hotels are there... are there just... who hires the catering companies, they're, they're the ones that hire the catering companies, is that right?

FABIENNE LARAQUE: I believe so.

CHAIRPERSON LEVIN: Okay and it's just then a single catering company with a contract for, for either of those so there's two catering companies

that are feeding probably 35 percent of the children in shelter?

FABIENNE LARAQUE: I will have to get back to you in terms of whether they use one or two caterers but when the hotel is starting... started to provide the food our nutritionist actually worked very closely for program start and provided training to the hotels.

CHAIRPERSON LEVIN: Okay. What is the... what's the per diem per meal, how much are the per diem per, per... [cross-talk]

FABIENNE LARAQUE: Per day... [cross-talk]

CHAIRPERSON LEVIN: ...per person? I think it's eight... [cross-talk]

FABIENNE LARAQUE: I think it might be seven dollars... [cross-talk]

CHAIRPERSON LEVIN: Eight dollars and 39 cents I believe... [cross-talk]

FABIENNE LARAQUE: ...maybe or... I believe but we can get back to you with the exact amount, yes, I think that's around... [cross-talk]

CHAIRPERSON LEVIN: Okay... [cross-talk]

FABIENNE LARAQUE: ...that.

CHAIRPERSON LEVIN: No, that's per day, that's per day, that's per day, eight dollars and 39 cents I believe per day so that comes to a little bit less than three dollars per meal. That's what the con... that's what the, the non for profit is provided to spend for their food allocation as per their contract with DHS. My concern is that they... the incentive for the provider is to go with the lowest bidder that is out there providing these catering services because their contract is not flexible in that regard, they're... you know they're provided their allotment for, for food... for, for food services and if they had an option to have a caterer that could meet their needs but provides healthier food but costs more money because healthier food does cost more money that... because fresher food or whole foods that they wouldn't be able to do that or their incentive would be because every homeless provider has budgetary constraints, I'm not going to get into the... some of the budget... you know the kind of broader contracting and budgetary issues but suffice to say that we've heard plenty about, about contracting issues. So, how do we reconcile that or how involved is DHS in that specific question being that there's

only two providers really that are... have the... I think the vast majority of the hotels if not the, the entire hotel portfolio.

FABIENNE LARAQUE: Thank you for your questions, these are very, very important questions. I believe that our providers are really committed to serve our population especially the nonprofit providers. We review the menus and we ensure that the menu meets the food standards, but I definitely hear you in terms of the details of using the lowest bidder... [cross-talk]

CHAIRPERSON LEVIN: Uh-huh... [cross-talk]

FABIENNE LARAQUE: ...given that we meet the nutritional standard and we meet the food safety standard I'm pretty confident that the food is nutritious and healthy, but I do hear your concern and that's something that we can take back and discuss some more.

CHAIRPERSON LEVIN: Do we have a... any data on utilization of food particularly in, in hotels so how many... how many meals are actually being eaten and... with these focus groups are we finding out how many times a week a family is getting food outside of the shelter?

FABIENNE LARAQUE: Yes, we do have that information, I don't have the data with me. From the surveys and focus groups we have some information on how much... not exactly but how much of their money to spend on food, how much do they eat, eat in the shelter system. In addition... [cross-talk]

CHAIRPERSON LEVIN: Right... [cross-talk]

FABIENNE LARAQUE: ...we also... [cross-talk]

CHAIRPERSON LEVIN: You should know how many meals are not being eaten, right, I mean that, that... [cross-talk]

FABIENNE LARAQUE: Right and then...

[cross-talk]

CHAIRPERSON LEVIN: ...that we would know...

[cross-talk]

FABIENNE LARAQUE: ...that's what I was going to say in terms of meals received so the shelter... a shelter with 200 beds received 200 meals so there are discard reports on how many... so there are reports on how many are not being served which obviously vary from shelter to shelter so the tendency is that breakfast and lunch is used a lot more... I mean breakfast and dinner is used a lot more and whereas lunch less but they also can get a bag

1 lunch if, if... because they're available for people
2 but we can get you... we will have to get you the exact
3 number of meals that are not being used.
4

5 CHAIRPERSON LEVIN: Absolutely because
6 they should be... if, if it... if it was... if everything
7 was running as... and... as best as it could run that...
8 the, the, the number of meals not eaten should be
9 very, very small because people should want to be
10 able to eat the dinner that is catered if it's a
11 decent meal and or... and, and the breakfast if it...
12 lunch is a different question I understand but, but
13 that remains... I mean I saw it firsthand, I went out
14 to a shelter, a hotel, I saw what, what was being
15 provided it did not look particularly appealing and
16 it just... I... like I'll just give you an example, I
17 worked with a constituent for a long period of time
18 through a... through... prior to entering shelter it was
19 a, a woman and her 17 year old daughter, they went to
20 a family shelter so I was working with them prior to
21 entering shelter throughout the full year that they
22 were in shelter and then... and then when they left
23 shelter. The, the mother told me that during that
24 time... and this was a city run family shelter of which
25 there are very few but this was one and the mother

1 told me that she throughout that year gained 20
2 pounds or 30 pounds and her daughter lost 20 or 30
3 pounds which... and the entire time I mean I talked to
4 her twice a week during that year and the entire time
5 she complained to me about the food and that she
6 couldn't cook because... and you know she was used to
7 cooking when she had her home and, and that she ended
8 up eating out all the time and it was causing all
9 types of high blood pressure issues for her and
10 again, you know obviously gaining or losing 20 or 30
11 pounds in a year either direction is not good for
12 one's health. So, that's just what I saw personally
13 and so it... I think that it's something that we... my,
14 my hunch is that there's... this is an... yet another
15 instance where budget is driving policy and that is
16 very, very concerning because we are sacrificing
17 quality because we don't want to pay an extra dollar
18 or two per day for healthier food. So, I'll leave it
19 at that, I'll call on Council Member Holden.

21 COUNCIL MEMBER HOLDEN: Thank you Chair
22 and, and thank you Doctor for your testimony. A few...
23 a few questions, I just want to follow up on the, the
24 hotels where the meals come in frozen?

25 FABIENNE LARAQUE: I believe so.

COUNCIL MEMBER HOLDEN: You believe so?

How... so, if not all the rooms have microwaves is there... the provider will have an area where they heat up the, the meals and... [cross-talk]

FABIENNE LARAQUE: That's correct.

COUNCIL MEMBER HOLDEN: Do you... do you have... could you provide the committee with a weekly menu of what a typical menu would be for a shelter, for a... I'm sorry, a hotel, they're all frozen foods, right that...[cross-talk]

FABIENNE LARAQUE: We can provide a menu.

COUNCIL MEMBER HOLDEN: Could you, you... we... a typical in the city of New York in a hotel, you can provide that, and we can... [cross-talk]

FABIENNE LARAQUE: Yes... [cross-talk]

COUNCIL MEMBER HOLDEN: ...see what type... could you describe what a breakfast is?

FABIENNE LARAQUE: A breakfast might be a bowl of oatmeal, it's a piece of fruit, milk, a cup of juice, lunch might be a chicken sandwich with fruits and vegetables on the side and dinner might be roast chicken, mashed potato, peas and carrots for example. Meals tend to be warm, hot food.

COUNCIL MEMBER HOLDEN: And they have to be warmed and so are there eggs in, in... let's say for... [cross-talk]

FABIENNE LARAQUE: Yes... [cross-talk]

COUNCIL MEMBER HOLDEN: ...breakfast?

FABIENNE LARAQUE: Yes, we can... eggs, so they don't get the same food every day so one day might oatmeal and one day might be cold cereal, one day might be eggs so what's pretty consistent is that there will be fruits, there will be a carton of milk and so in terms of lunch they may have, you know a cup of, you know pasta with, with a side, different type of sandwiches so I, I mean there's... [cross-talk]

COUNCIL MEMBER HOLDEN: Alright, so if you... [cross-talk]

FABIENNE LARAQUE: ...so, so there's a four... [cross-talk]

COUNCIL MEMBER HOLDEN: ...could... [cross-talk]

FABIENNE LARAQUE: ...week cycle menu that... where the, the menu... the, the meals change.

COUNCIL MEMBER HOLDEN: Yeah, I... because I'm, I'm interested to see how these... not only the, the listing of the, the, the menu of what they're

being fed but I'd like to see actual... a photograph of what this food looks like and, and how it's been handled and how if its frozen when was it frozen and expiration dates and so forth, I know it goes on... you, you said you inspect it, do you inspect the, the food that's coming from providers that are going into hotels, you inspect that at the... [cross-talk]

FABIENNE LARAQUE: So... [cross-talk]

COUNCIL MEMBER HOLDEN: ...source... at the source where it's being frozen or...

FABIENNE LARAQUE: At delivery, so work starts at deliveries so the food is inspected at delivery so the food handlers which exist in every shelter and have to be present in the shelter at the time of deliver, they will make sure that the food is frozen... [cross-talk]

COUNCIL MEMBER HOLDEN: So, so you... I'm just... want to be clear, where it comes from, where... that, that it's being prepared it's not inspected?

FABIENNE LARAQUE: By... not by DHS because they are food caterers, so they have to follow USDA guidelines so I'm sure they're inspected but DHS doesn't inspect the large food caterers that are providing food to many different places.

COUNCIL MEMBER HOLDEN: They're all in New York City, right, or are they coming from out, out of the city?

FABIENNE LARAQUE: I know there's one in Long Island, they may be in, in other places but I imagine that they are... that they are nearby.

COUNCIL MEMBER HOLDEN: Does the Department of Health... [cross-talk]

FABIENNE LARAQUE: So, we visited them... [cross-talk]

COUNCIL MEMBER HOLDEN: ...inspect... [cross-talk]

CORINNE SCHIFF: So, for the... for the most part the suppliers are subject to state inspection and not... [cross-talk]

COUNCIL MEMBER HOLDEN: State inspections... [cross-talk]

CORINNE SCHIFF: ...and not... for, for the most part there might... you know might depending on the details but for the most part the supplier would be under state regulation.

COUNCIL MEMBER HOLDEN: But, but... so if they're in... if the providers are in New York City you don't inspect?

CORINNE SCHIFF: It, it's not... it's not a... the jurisdictional matter is not location but the type of provider.

COUNCIL MEMBER HOLDEN: Okay, when... let, let's go to shelters now, the, the kitchens in the shelters, how many shelters, full, full shelters, do they all have kitchens?

FABIENNE LARAQUE: No, so we have different types of shelters, the single adult shelters are congregate settings, they do not have... they do not have kitchens, they are providing three meals a day, in the adult family shelters a number of them are... you know have kitchens or clients have microwaves in their room, for the others they are provided the meals, a large proportion of the family with children shelters have their own kitchen.

COUNCIL MEMBER HOLDEN: They have their own kitchens so, the, the kitchens that are... the central kitchen in a... in a... in a typical shelter you said you inspect twice a year and you have... [cross-talk]

FABIENNE LARAQUE: That's correct...
[cross-talk]

COUNCIL MEMBER HOLDEN: ...28, 28

inspectors?

FABIENNE LARAQUE: That's correct.

COUNCIL MEMBER HOLDEN: Are the
inspections announced?

FABIENNE LARAQUE: Oh, good question, my...
[cross-talk]

COUNCIL MEMBER HOLDEN: Because we heard...
[cross-talk]

FABIENNE LARAQUE: I... I would imagine...
[cross-talk]

COUNCIL MEMBER HOLDEN: We heard... [cross-
talk]

FABIENNE LARAQUE: ...that they are not.

COUNCIL MEMBER HOLDEN: I heard they were
announced, okay, so if you could just check that
because we're getting complaints that they were... they
are announced... [cross-talk]

FABIENNE LARAQUE: They are announced...
[cross-talk]

COUNCIL MEMBER HOLDEN: ...so they clean it
up and we know that the Department of Health doesn't
announce and I think it's convenient that if they're...
and if it's true that they are announced like maybe

you need to... need the... you need to change that policy very quickly because you... now the Department of Health comes in once a year, right?

CORINNE SCHIFF: So, we're inspecting at least once a year.

COUNCIL MEMBER HOLDEN: At least once a year... [cross-talk]

CORINNE SCHIFF: ...where and it would be more frequent... more frequent if we see things that need follow up so it's at least once a year.

COUNCIL MEMBER HOLDEN: And same standards as you would inspect a restaurant?

CORINNE SCHIFF: That's right, the rules are the same for all food service establishments and the inspection is the same.

COUNCIL MEMBER HOLDEN: And anybody been shut down?

CORINNE SCHIFF: Anybody you mean DHS... [cross-talk]

COUNCIL MEMBER HOLDEN: Any, any... yes, any location that has a kitchen in a shelter were they... just say... you just shut them down like you do restaurants?

CORINNE SCHIFF: So, the, the protocol would be the same if we found... a closure is required when we find what we call a public health hazard that can't be immediately corrected and we did look back for a couple of years in preparation for this hearing and we don't have a record of a closure.

COUNCIL MEMBER HOLDEN: You don't have any records, what about DHS, anybody shut... get shut down by you guys?

FABIENNE LARAQUE: No, we don't have any instances of shelter... [cross-talk]

COUNCIL MEMBER HOLDEN: Okay... [cross-talk]

FABIENNE LARAQUE: ...that was... food... a service that was shut down.

COUNCIL MEMBER HOLDEN: But I think that's important that we, we see what's going on in, in the shelters so we, we don't have incidents of food poisoning and, and other health related issues. So, that, that's important. The obesity that half the school children are overweight in the city of New York, do you have figures on the shelter system, is that the same, same figures you think or...

FABIENNE LARAQUE: We don't have those figures; they are not weighed when they enter so... [cross-talk]

COUNCIL MEMBER HOLDEN: What, what type of... [cross-talk]

FABIENNE LARAQUE: ...I don't believe we have that figure... [cross-talk]

COUNCIL MEMBER HOLDEN: What type of issues are you... health issues are you seeing in the shelters mostly amongst children?

FABIENNE LARAQUE: Asthma.

COUNCIL MEMBER HOLDEN: Asthma?

FABIENNE LARAQUE: Uh-huh, asthma is, is, is a large one that... I, I want to say by far the number one health issue.

COUNCIL MEMBER HOLDEN: And what about in adults what, what would that be?

FABIENNE LARAQUE: In adults it, it varies by groups, interestingly in the adult in the... in, in the family... that are among families they have a lot of asthma also but for the most part you're seeing the same that you see in the general population; diabetes, hypertension, heart disease,

back pain, joint pain, these, these are the, you know the top conditions.

COUNCIL MEMBER HOLDEN: So, and I just want to go back one... I'm just thinking about this if you... if you're in a hotel with a family do you ever get fresh food, I'm, I'm talking about fresh vegetables not frozen, do you ever get that? So, you could be in there for, for 14 months do you ever get anything fresh that's not frozen?

FABIENNE LARAQUE: I'll have to get back to you on that, they do get fruits that are fresh in addition... [cross-talk]

COUNCIL MEMBER HOLDEN: Well yeah, you don't want... you can't freeze most fruit, I mean it wouldn't... but we know... yeah, that's, that's a given but what about... I'm talking about vegetables which are important, some vegetables don't do well when, when they're frozen as you know... [cross-talk]

FABIENNE LARAQUE: Uh-huh... [cross-talk]

COUNCIL MEMBER HOLDEN: ...so fresh fruit and vegetables should be actually required once a week, twice a... I mean it should be every day but if we can't do it but it should be at some point let's stop freezing everything every, every day and give

1 people in shelters nutritious food that's healthy,
2 that's not just frozen and then just put on a tray, I
3 mean so I think it... that needs to... we need to look at
4 that as a city so if you could... if you could actually
5 come up with a plan to do that we'd... that would be I
6 think beneficial. I can... okay, I think that's it,
7 thank you Chair. Thank you.

8
9 CHAIRPERSON LEVIN: Thank you Council
10 Member Holden, Council Member Grodenchik.

11 COUNCIL MEMBER GRODENCHIK: Thank you
12 Chair. A little dismayed, I thought maybe somewhere I
13 would hear that there was some kind of fresh food
14 being served, by my math the shelter system is
15 serving tens of millions of meals a year, if... I, I'll
16 use the, the DHS number there's approximately 60,000
17 people in the shelter system and three meals a day
18 would be 180,000 meals and you can times that by 365,
19 next year it'll be 366 but are you telling us Doctor
20 that's there no fresh fruit... fresh cooking going on
21 at all anywhere? I'm not really surprised because
22 it's not happening in our school system either and
23 I'm old enough to remember when it did at Jamaica
24 High School in I.S. 237 but I'm... I'll just ask you
25 for the record.

FABIENNE LARAQUE: So, the food is provided in a variety of ways so actually some shelters cook on site or receive food from another shelter that cooks on site... [cross-talk]

COUNCIL MEMBER GRODENCHIK: Okay... [cross-talk]

FABIENNE LARAQUE: ...and that's, that's fresh food... [cross-talk]

COUNCIL MEMBER GRODENCHIK: Okay, that's good to hear... [cross-talk]

FABIENNE LARAQUE: ...some of them are receiving batch meals so that, that is fresh food and a number do receive the, the frozen meal. In terms of families they actually have access to SNAP, and they are in the Plentiful app and they are actually able to receive... you know to get fresh food. We are also trying to promote things like the health bucks which is, you know fun to, to go to... you know use farmers market etcetera, but we hear you.

COUNCIL MEMBER GRODENCHIK: So, there are some places, could you get back to the committee and let us know approximately how many of the shelters, I'm not going to hold you to an absolute percentage but I'd be curious to know I, I think the city of New

York serves probably more meals in New York City than anybody else between schools and, and homeless shelters, prisons, events that the city holds is... I would like to think there's more and more fresh cooking going on but I'm not so sure that there is. Do you know what the budget is for food in the shelter system for the whole year, I mean I could do the math but I'm sure that the... when you throw in bureaucracy the number is probably even higher.

FABIENNE LARAQUE: Yes, so for the directly run facility... for, for the facility for whom we provide food the budget is about 17 million and in addition the provider run facilities have a budget of 35 million per year.

COUNCIL MEMBER GRODENCHIK: That doesn't seem to add up to be honest with you because if you take... that's 52 million dollars and my math is correct Mr. Chairman?

CHAIRPERSON LEVIN: I'll check.

COUNCIL MEMBER GRODENCHIK: Okay, 17 and 35, professor Holden, 17 and 35, 52?

CORINNE SCHIFF: I just checked it's correct.

COUNCIL MEMBER GRODENCHIK: Okay, thank you. Okay, so if we're dealing with approximately 60,000 people in the shelter system at eight dollars and 39 cents a day, 60,000 times eight would be 480,000 and you add another point four so that's another 24,000 so let's say 500,000 just to be fair, rounded down a little we're looking at 175 million dollars... 182 and a half million dollars a year at eight dollars and 39 cents per, per person and that's nowhere near the 52 million dollars that you tell me that it's at, how's my math? My math... the, the, the force of states confirm my math so I would be interested knowing why there's such a large discrepancy in what your numbers are and what my numbers are, you know and I'm married to a math professor, full disclosure so I just want you to know that so I would like to know... would like you to get back to, to this committee, the Chair and the staff and all the members and let us know exactly what we're paying for food because I would think before we can determine where we're going we need to know where we're coming from and the number... the dollar number is very, very important because I'm seeing a lot more

money being spent, more than triple what the official sources from the administration.

FABIENNE LARAQUE: Certainly.

COUNCIL MEMBER GRODENCHIK: Okay, so I thank you. I, I will wait for those numbers and I thank you Mr. Chairman.

CHAIRPERSON LEVIN: Thank you Council Member Grodenchik. Kind of want to go through a few more questions and I want to conscious of your time. There is... I met with... there's a, a program that we support out of the Council through Project Renewal that has a... trains clients in, in, in... you know getting a food handlers license and culinary program and they have an affiliated not for profit caterer company called I believe it City Beets... hold on a second, I have the name of it, City Beets... City Beet Kitchens and they are... they are... they are a contracted provider with some... with some shelter providers, my understanding is that they're... right now as, as a not for profit that, that as... is mission driven, it, it... obviously it hires former clients that within the market there are as we... as I mentioned before other catering companies that are kind of... have entered the market and are essentially

underbidding or bidding lower amounts and so I just... I'm not... I don't... you don't need to speak specifically about a particular provider or company that's... or not for profit, that's not what I'm getting at but how does DHS approach the issue of mission driven providers or not for profit providers in all of this because again as I said you know every not for profit or every shelter provider even with the model budget, stuff that went into place last year struggles to figure out how to pay the bills every month and, and pay their staff and retain their staff and, and so when, when they're able to save some money on a caterer, I mean that's what's happening now, I think that we're, we're seeing that happen, going in, into place and so I'm just... I'm just kind of wondering how... if you could fill us in a little bit on how the, the... what the relationship is between your office and DHS's office, of budget and OMB on questions like this, like... because if we're seeing, you know in reality that we're getting more and more kind of larger... providers that might not be mission driven or might just... you know and, and the not for profits themselves don't have much of a choice they have to try to meet their budget needs.

If you can speak a little bit more... in a general sense to that question.

FABIENNE LARAQUE: Thank you for your question and the... for the opportunity to talk about our turning the tide plan so DHS has a, a plan to raise the bar, redefine our services, we look at them, we've been raising the bar so as part of that we... our plan is to work... is to work more with mission driven providers that, that's the idea, you're absolutely right, we want to work with mission driven providers and, and phase out more commercial providers. In terms of the budget and relationship with OMB my office provides advice, guidance on, on food and other areas, in terms of the direct work with OMB that would be the executive office of... department obviously that would work with them.

CHAIRPERSON LEVIN: I'd like to ask about like special needs, medical needs, dietary restrictions, religious, religious needs when it comes to diet, how are those needs met, you mentioned, you know a... an example menu for, for hotels, how does that... how... what are the... are there... for every single resident there's... is there a vegetarian, hallal, kosher option?

FABIENNE LARAQUE: Yes, absolutely, so I'll first start by saying that for most chronic disease; diabetes, hypertension the regular standard menu because it meets the food standards and set say less than 23,000... 2,300 milligrams of sodium, a certain amount of fibers and sugar that, that diet that meets the food standards is... satisfied most chronic diseases... [cross-talk]

CHAIRPERSON LEVIN: Uh-huh... [cross-talk]

FABIENNE LARAQUE: ...in terms on the medical side but we understand our clients have a lot of chronic diseases so if there is a diet that is more restrictive than what the food standard can provide then there is a reasonable accommodation process which is a standard process where a client can request a more strict diet. For example, if you have renal disease on dialysis you may need less potassium even and so they can request that type of meal. In terms of the non... [cross-talk]

CHAIRPERSON LEVIN: But do you need a doctor's note for that?

FABIENNE LARAQUE: Yes.

CHAIRPERSON LEVIN: Okay.

FABIENNE LARAQUE: Yes. The... and we also we, we have a process that we use a doctor note, we will help clients get the note if that's... if that's difficult so we really support them through the process. In terms of the nonmedical meal, the hallal, we provide hallal, kosher, vegan, vegetarian, pura diet so, yes, we do accommodate for religious meals.

CHAIRPERSON LEVIN: Are there any consequences if a provider is not adhering to the food standards or what's the remediate of effort in that sense or in that... in that case?

FABIENNE LARAQUE: Right, so we believe that working with our providers and providing technical assistance and, and, and tools and review their product and, and get back to them works and it's been a, a pretty effective in getting them to, to apply the corrective action, I mean they really welcome the support of our nutritionist and generally that works. If something is more serious or they don't then there is a process for compliance, they may be called for a pre-conference, there will be a discussion, they'll have to write a corrective action plan and if that still doesn't work then they, they

will have a, a, a regulatory compliance conference meeting in person.

CHAIRPERSON LEVIN: We have it in our... in our report that shelters are exempt from nutrition requirements if... the nutrition... nutrient requirement of the food standards if they are regularly serving fewer than 200 meals... 200 people per meal, is that... is that true?

FABIENNE LARAQUE: That was correct before we had a nutritionist, now that we... [cross-talk]

CHAIRPERSON LEVIN: Okay... [cross-talk]

FABIENNE LARAQUE: ...have a nutritionist no one is exempt and she's been working very closely with them to review their menus, they have to create menus that are very detailed with all nutrient... the nutrient content, she gets the menus enters them into a nutrition software and analyze all the requirements, add everything for the day and make sure that they meet the food standards, if they don't meet the food standard then she'll get back to them and say hey, you need to correct item X, Y or Z.

CHAIRPERSON LEVIN: For any... because there are plenty hotels that are less than 200 people

1 I believed, right? Okay. Going back to the hotels,
2 there... so, when... for something like a dinner, its
3 microwavable because it's frozen if it's 6:30 and
4 there are... I mean I went to one of the hotels where
5 I, you know I saw where people are getting their
6 food, it's one small hotel room because it's a hotel
7 and, and it had a, you know big boxes of food and
8 like... I, I think I saw like one microwave, is there...
9 so is there... dinner time is dinner time, how are... how
10 do, do they have people standing in line waiting to
11 microwave their meals or... microwaving a frozen meal
12 could take six or seven minutes, you got your meal,
13 two or three kids, that's, that's like 20 minutes and
14 there are, you know 60 families, I mean how does that
15 work?

17 FABienne LARAQUE: Right, we are very
18 concerned with the health and wellbeing of our
19 families and we understand that hotels are not the
20 ideal location for a family which is why we want to
21 phase them and have purpose-built shelters.

22 CHAIRPERSON LEVIN: Right, I, I, I agree
23 with that wholeheartedly, in fact I, I know it's,
24 it's kind of common wisdom that the clusters are the
25 worst and the hotels are not as bad, I think hotels

are worse than clusters in a lot of ways because at least clusters you have a, a kitchen but I have been in... I've been on... a member of this Committee for almost ten years, I am pretty sure that hotels are going to be part of our portfolio for the foreseeable future, I would be very surprised in five years if we are entirely out of hotels and I'd be surprised if in ten years we are entirely out of... out of hotels, I would be shocked in five years if we were out so what are we... I mean what's the... what's the... what is the daily experience of shelter residents in hotels in trying to just get their frozen meal unfrozen and warmed up so that they can serve it to their kids?

FABIENNE LARAQUE: Yeah, I do understand and, and, and my heart... our heart at DHS really goes to the client, the, the issue of having not enough microwaves is, is a real one and because of the right to shelter we, we have to have capacity for, for everyone and our plan is really to really try very hard not to have hotels.

CHAIRPERSON LEVIN: But people do wait in line at a microwave... [cross-talk]

FABIENNE LARAQUE: That's my understanding that does happen.

CHAIRPERSON LEVIN: Yeah.

FABIENNE LARAQUE: If a microwave...

[cross-talk]

CHAIRPERSON LEVIN: Is there... are there
more... [cross-talk]

FABIENNE LARAQUE: ...does not work...

[cross-talk]

CHAIRPERSON LEVIN: ...microwaves... [cross-
talk]

FABIENNE LARAQUE: ...I, I believe there
are two micro... there, there's, there's more than one
and if it doesn't work they get really fixed or
replaced right away, that doesn't wait...

CHAIRPERSON LEVIN: Okay. Okay, that's
just something I'm going to look into more because
again if there are 60 families, you know times three
it's 180 meals, you just can't possibly cook that,
three, three, three meals per family, I mean it's
just... it, it seems entirely egregious to be able to...
I mean that's like... I mean I, I would imagine those
microwaves would probably burn out pretty quick if
they're running it for three hours a night or
something like that from six to nine but it's also
just... I mean you know people have their lives and you

1 know you shouldn't have to wait in line for, for an
2 hour to, to get your, your, your tv dinner made, I
3 mean it's... that's not... its not a really... it's... on top
4 the indignity of living in a hotel which is just... I
5 mean I can't even get into how detrimental and as the
6 Medical Director I think you, you probably agree that
7 living in a hotel room for a year and a half is so,
8 so devastating, I mean just thinking about this
9 morning, I could... I could bare... I could barely tell
10 my daughter about it and I think about families and
11 children living it for a year or two years, I mean I
12 didn't even want to... I didn't even... I didn't even
13 want to tell my daughter about it. It is... it is
14 devastating, it is devastating for these children
15 and... because they have nowhere to play, there's no
16 recreation space, they can't go to after school
17 because we can't figure out a way to coordinate if a
18 kids in shelter to go to after school because they
19 can't get transportation home. They are... they... their,
20 their recreation consists of running up and down the
21 hallways in a hotel, it is... it is just
22 psychologically developmentally, emotionally and
23 physically horrible and so we ought to figure out a
24 way that they can just eat dinner in a dignified way.
25

FABIENNE LARAQUE: Thank you for your concern, yes, as the Medical Director and public official I agree with you that homeless families in need and our mission is to help them through that need through various processes, I mean our family with children divisions work with families very closely to provide support again the non-hotel facilities may have daycare, they have a, a playroom so... which is why again we want to move to, to tier two shelters. We are working for example also with the American Academy of Pediatrics Committee on Vulnerable Children that's a, a project that we have to help... to have pediatric residents come and, and speak to families that's, that's an additional project so we are trying to kind of, you know think outside of the box but also collaborate, I mean we are DHS we don't have necessarily the resource and manpower to do everything so that's why we like to collaborate, collaborate closely with the Department of Health and, and sister agencies and nonprofits and, and others to really improve the system.

CHAIRPERSON LEVIN: Okay, along those lines I wanted to ask about the relationship between DHS and school food, every child that's four or older

1 is likely in a school setting for a good portion of
2 their day and as Council Member Lander said we've
3 made a lot of progress with school food over the last
4 decade, what is the... how... what's that relationship
5 like for... especially for kids that are in... that are
6 in hotel settings or in a... in a... in a shelter setting
7 that does not have a kitchen?

9 FABIENNE LARAQUE: To go back to the
10 microwave situation if you... [cross-talk]

11 CHAIRPERSON LEVIN: Okay... [cross-talk]

12 FABIENNE LARAQUE: ...hear of anything, any
13 compliant let us know please.

14 CHAIRPERSON LEVIN: I will... [cross-talk]

15 FABIENNE LARAQUE: We'll look into it
16 right away or any other... [cross-talk]

17 CHAIRPERSON LEVIN: Absolutely... [cross-
18 talk]

19 FABIENNE LARAQUE: ...issues, you've been
20 in... you're in the community and therefore let us know
21 and that is valid for any members of this committee.

22 CHAIRPERSON LEVIN: We will for sure.

23 FABIENNE LARAQUE: We work very closely
24 with DOE; I will have to get back to you in terms of
25 the school food specifically but... [cross-talk]

CHAIRPERSON LEVIN: Uh-huh... [cross-talk]

FABIENNE LARAQUE: ...DHS works very, very closely with the DOE, our family with children's division has a liaison, DOE has staff in shelters... [cross-talk]

CHAIRPERSON LEVIN: Uh-huh... [cross-talk]

FABIENNE LARAQUE: ...and so... but specifically with, you know school food I will have to get back to you on that.

CHAIRPERSON LEVIN: Okay because there's... I mean perhaps there's an opportunity where school food could provide hot meals, you know to take home, right, you know there's... we're... they're cooking on site obviously in their cafeteria, yeah, we should just figure out a way to make sure that families are getting a hot meal at night. Okay, Council Member Holden.

COUNCIL MEMBER HOLDEN: Just a follow up to the Chair's remarks on closing cluster sites and being very proud of the fact that they were closing cluster sites and putting families in hotels without a kitchen, I, I... if I'm in a, a cluster site I'd rather have a kitchen and be able to cook my meals and fresh... have fresh food than be thrown into a, a

small room with a family and only frozen food so I don't know why the... this administration was so proud on closing cluster sites without having a backup plan and without just having the hotels as a site so I never bought that argument unless it was being done by... for developer friends, I don't know why they were closing cluster sites so fast when they had no backup, if you, you have... you close the cluster sites if you have a better alternative, the hotels were not a better and still are not a better alternative than cluster sites, that was convenient and there's... that needs to be looked at as to why that decision was made. Think of a life in a hotel room, think of years in a hotel room with only... with no fresh food, think about that and again if you had a choice what would you make, you... I would certainly want to live in a cluster site with a kitchen at least a kitchen, at least a little bit more space than be thrown into a hotel so that needs to be looked at as to why that decision was made and it was... and the administration was so proud of it so I can't figure that out, I argued then and I'll argue now that that's not an alternative to put somebody in a hotel room for over a year with a... with a family so we need to look at

that as to why that was done and I never understood it and I still don't. Thank you.

CHAIRPERSON LEVIN: Thank you Council Member, Council Member Grodenchik.

COUNCIL MEMBER GRODENCHIK: Thank you Chair, I want to thank you for holding this hearing, I think it's a, a... shine, shined a very interesting spotlight on some of the practices that we've been hearing about today. I, I want to put into the record based on and I want to thank you for being here today Doctor Laraque and, and Deputy Commissioner. Based upon what we're hearing today Mr. Chairman we've heard testimony that indicates that less than two and half percent of all the spending on homeless services in the city of New York goes to food and I would argue that that is a very, very low number, I think the average family probably spends much more than two and a half percent of their total budget on food and so I think that's something that we need to bring up with, with Commissioner Banks who is the Social Service Commissioner when he's before this Committee again and I know he'll be here again shortly because budget time is just around the corner so, I want to

thank you Mr. Chairman for allowing me the time and
again thank the DHS staff for being here today.

FABIENNE LARAQUE: Thank you.

CHAIRPERSON LEVIN: Okay, thank you so
much for your time and testimony and for answering
our questions so thoroughly, we really appreciate
you, you taking the time with us. If you can stick
around for the first panel because we have clients
who are... who are set to testify so if you can stay
for another 20 minutes or so that would be greatly
appreciated.

FABIENNE LARAQUE: Certainly.

CHAIRPERSON LEVIN: Thank you. Okay, it's
a large panel but... it's a large panel.

FABIENNE LARAQUE: That's okay, I will
stay.

CHAIRPERSON LEVIN: Okay.

[off mic dialogue]

CHAIRPERSON LEVIN: Lilly Knopf, Froska
McGallister, Lakayla Booker, Sharifah Harvey, Katrina
Corbell, COMMITTEE CLERKB, is that right and Janet
Perry. And whoever wants to begin. I'm sorry and...
yeah, if the red light is on and there's three
minutes for, for test... for testimony.

SHARIFAH HARVEY: Okay, hi, good morning.

My name is Sharifa Harvey and I am... I'm a member of the client advisory group at the Coalition for the Homeless and in June of last year I was denied religious accommodation when I entered shelter at the Franklin Women's Intake and Assessment shelter in the Bronx. Upon my arrival to the shelter I immediately informed the intake specialist of my need for religious accommodation, it was Ramadan, she explicitly denied any religious accommodation saying it was against the rules so I asked to speak with a supervisor and she denied that request. After intake I called 3-1-1 to report the incident, spent the next five days going through official channels including the ombudsman office trying to enforce my religious right to eat in the shelter at the prescribed times. The first day I was allowed to eat on the front steps outside the shelter and if you're familiar with that shelter you know exactly what that's like, it was dark and that's not a place to be eating. And then the next day I was made to eat on the steps and then I was told to go out... off the steps and go across the street, if you're familiar with that area then you know this is not appropriate. So, then... this should

never have happened, not upon intake nor for the next five days and it took the director of social services five days to finally get... to finally notify staff to let me come in and eat food at one... at the prescribed time and that was the last day of Ramadan. So, I'm, I want to encourage DHS administration to remind shelter management and staff that they are to provide religious accommodation especially during Ramadan and if they're unable to do so they are to notify the administration immediately to explain why they're unable to do so. Now I hold... heard, heard Doctor Laraque talk about how there are kosher and hallal meals, I have... at every intake that I have been in I've been told that there is not such a thing, it doesn't exist, they laugh when I... they, they have a little checkmark on the form and they laugh whenever, whenever I say hallal or kosher, either one will work so this is not acceptable and when they say that they have it, they do not. I'm not here to also talk about the quality I'm just here to talk about the dietary restrictions, restrictions. One of the other issues is that with the prepackaged meals, they have meals that have ingredients in them like wine sauce, I can't eat the meal, I never know what's going to be

1 in the food so I always... I, I rarely eat anything in
2 the shelters, I'm always using my... the food that I...
3 the food money that I have to eat outside, that's not
4 acceptable and, and in the previous shelter that I
5 was in I couldn't bring in any fresh food, it would
6 spoil, it's a waste of money, it's a waste of
7 resources and it's a waste of time going from place
8 to place to place trying to find food in... every
9 evening and making sure that you don't have anything
10 on your person that's going to spoil, it's a waste.
11 So, that's, that's been my experience and I wanted to
12 make sure that this was known. Thank you.

14 CHAIRPERSON LEVIN: Are you in a setting
15 right now where you're able to cook your own food?

16 SHARIFAH HARVEY: Absolutely not.

17 CHAIRPERSON LEVIN: No, so, so there is...
18 [cross-talk]

19 SHARIFAH HARVEY: I can bring in food but
20 it's going to be... you know it's going to be prepared
21 foods, I'm able to actually bring in a salad and, and
22 get creative now but I... but I was not able to do that
23 before.

24 CHAIRPERSON LEVIN: Do you have a
25 refrigerator?

SHARIFAH HARVEY: No, not at all and as far as the microwaves in the shelter that I was in there was... it's the premade meals, there's... there were three microwaves, two of them went out of service, one did because some... one of the staff accidentally ruined them so we were working with like one microwave to... for all of those meals for about a month.

CHAIRPERSON LEVIN: How many... [cross-talk]

SHARIFAH HARVEY: There's about 100 clients in that... [cross-talk]

CHAIRPERSON LEVIN: Hundred clients... [cross-talk]

SHARIFAH HARVEY: ...in that shelter... [cross-talk]

CHAIRPERSON LEVIN: How long were people waiting?

SHARIFAH HARVEY: Because I'm coming in and out, I'm not seeing but when I'm... when I have to use the microwave for soup... [cross-talk]

CHAIRPERSON LEVIN: Uh-huh... [cross-talk]

SHARIFAH HARVEY: ...then it's going to be a wait if I'm not getting down there at just the right time.

CHAIRPERSON LEVIN: Yeah, okay, thank you very much for your testimony.

SHARIFAH HARVEY: You're welcome.

JANET PERRY: Okay, hi. My name is Janet Perry, this is my second go around where the food is not edible in these shelters, comfort foods the bastard that ordered them needs to be held accountable to where they are getting their food from because they are sending it right to the shelters. I had the experience where in Franklin Women Shelter we had to put a petition together, get comfort foods into the shelter and talk to them to why we're not getting fresh food, why our eggs are green to the point whereas for three weeks they send us fresh food and resort back to the old green eggs and we're trying to understand why you keep serving us this bad food, who's serving this food to you all to send to us, who's overseeing Ambassador and Comfort Foods where they're getting their food from that is going into the shelters. These, these clients have been getting sick, we had to put out a petition, comfort

1 foods tell us how they make their chicken, they say
2 they use chicken scraps to make chicken patties, I
3 never heard nothing like this. Where are their foods
4 coming from that they can send it right to the
5 shelters and sometimes they know it's not edible but
6 they'll send it anyhow? Who is overseeing these
7 people in the catering business that's sending the
8 food to the shelters? We need assistance in that.
9 Thank you.

11 CHAIRPERSON LEVIN: Thank you and could I
12 just... so... and, and comfort food there they're the
13 ones there that... they're the contracted provider
14 there... are there... you mentioned two companies, is
15 that right?

16 JANET PERRY: Yeah, it's Ambassadors,
17 it's Comfort Foods, it's Weston's but where are they
18 getting their food from and why they taking the food
19 that comes to them knowing it's bad and still sending
20 it to the shelters?

21 CHAIRPERSON LEVIN: Right, right. And...
22 [cross-talk]

23 JANET PERRY: Okay... [cross-talk]

24 CHAIRPERSON LEVIN: ...this is at Franklin?

25 JANET PERRY: Yes.

CHAIRPERSON LEVIN: And, and Franklin or...
and anywhere else?

JANET PERRY: This is where... at Franklin
the Director worked with us and got the company to
come send... and send somebody in to talk to us and
that's how we grilled him but then again who... the
food that's going to them who's overseeing them,
watching them prepare it correctly before it goes to
the shelter?

CHAIRPERSON LEVIN: I'm assuming they're
not even in the city, maybe they're... [cross-talk]

JANET PERRY: No, some of them are in the
city.

CHAIRPERSON LEVIN: Okay...

JANET PERRY: Some of them are, yeah, in
Brooklyn.

CHAIRPERSON LEVIN: Okay. Yeah, thank
you, thank you and it's... [cross-talk]

JANET PERRY: Uh-huh... [cross-talk]

CHAIRPERSON LEVIN: I very much
appreciate the testimony, thank you.

[off mic dialogue]

CHAIRPERSON LEVIN: Little bit of a
musical chairs.

JANET PERRY: Uh-huh...

CHAIRPERSON LEVIN: Okay.

LAKAYLA BOOKER: Good morning, I really appreciate being here. My name is Lakayla Booker, I'm a former graduate of Americorp and also when I was younger I had an opportunity to work with Jobcorp and my reasons of explaining this is that due to circumstances of some women that are in the shelter they have come to me and expressed to me that they have had serious illnesses such as cancer, gall bladder surgery and, and just many different illnesses that they have, you know went through and the food that has been served as I have been there and witnessed is just horrible. It, it's, it really hurts my heart and to hear that people that I've met, that I had never spoken to that walked up to me to tell me that they're dying of cancer and have to actually eat the food there that is just like slop. So, the, the lady that was sitting here that's over the I guess the medical food what have you she expressed that she's trying to think outside of the box. Thinking outside of the box is taking the consideration of going to different various schools, colleges that have culinary arts, institutes, job

corps that has a, a culinary arts institute, those that are at a higher level of that degree of cooking and have such volunteers far as Americorps to come into the shelters. I am as I stated before an Americorps graduate, we would... we would be so happy to assist certain operations such as DHS to, to volunteer our, our time to make sure that the food is correctly served, cooked, well nourished. So, thinking outside of the box is thinking outside of the box. So, I am here to represent the women of the shelters, Coalition for the Homeless to express our concerns, we are grateful, and we need a change with the food. Thank you.

CHAIRPERSON LEVIN: Thank you so much for your testimony.

LAKAYLA BOOKER: You're welcome.

CHAIRPERSON LEVIN: Thank you.

FROSKA MCGALLISTER: Turn this on... my name is Froska McGallister. I am here on behalf of Urban Justice Safety Net Activist, I'm also a resident of Bushwick Homeless Shelter in Brooklyn. It currently houses or has approximately 200 beds having recently been expanded from a 165. I have been there way too long. When I first came there from another

shelter within less than two months, I was on special vitamin program that was prescribed by my doctor because she told me I was suffering from malnutrition. It's not surprising considering the offerings that they provide at this shelter, it's a provider, it's a subcontractor, what are they called, providers, CAMBA, is what this young lady described for me, slop, I wouldn't feed it for the most part to any of my children, I only had two, they're all gone, thank goodness... I mean adults, I don't mean... okay, breakfast is instant oatmeal or cheerios prepared with one percent or two percent milk which for the most part most of the ladies can't drink or digest, they take it anyway because they need the calcium, they want the milk, they're accustomed to drinking milk but we can't drink it so much anymore not at one percent or two percent. There is no offering 95 percent of the time of even skim milk. In addition, with respect to the microwave, if you want the hot cereal, that is the instant oatmeal you do have to wait on a line to get it into the one microwave, one microwave whereby everybody has to wait, it could be 20 minutes before you get it in there. At other times the microwave, depending on the wattage of the

microwave, it could be longer because after it gets into the machine it may take five minutes to do a little bit of boiling water or whatever it is that they do. In addition, some of the women because the, the milk issue is such a problem have been given to the habit of heating the milk thinking that somehow if... it... that changes how their body processes it, it doesn't necessarily but they feel better when they are upchucking the milk or have the runs, they think they don't do it so much when they do that to the milk. Lunch consists of primarily a sandwich, rotted or really, really bad fruit, it may come to the shelter not so bad, I don't know, I've not really seen it when it wasn't so bad and then what they do with it, it seems is they, they put things like bananas in the refrigerator, bananas don't go into the refrigerator. The lunch usually... this, this is the desert and the fruit is a banana or an apple or an orange; texture is bad, taste is bad, appearance is bad, I mean really, really bad, it's not something that you would want to even look at let alone eat. The sandwiches, tuna salad, chicken salad, turkey, ham and cheese on whole wheat bread, cheese sandwich, peanut butter and jelly, juice but it's not juice,

1 it's fructose drink, something else I wouldn't give
2 to a child, I didn't let my children drink that when
3 they were children, I wouldn't give it to a grown up
4 person and they're minis, they're not even a regular
5 sized drink. The portion size also is something to be
6 remarked upon because they're feeding grown women,
7 older women many of us, many with compromised systems
8 because that particular shelter is largely what they
9 call a mica shelter so you have compromised medical
10 conditions that are being offered this food and
11 they're being... anyways, the lunch, the sandwich, the
12 whole wheat bread and sometimes... what else they... and
13 some other things that usually are hard to identify.
14 And when I say hard to identify their, their
15 combinations or concoctions that I've never really
16 seen before and I'm over 70 years old and I've seen a
17 lot. I saw it every day, I'm surprised at some of the
18 things that are offering. The dinner, I haven't seen
19 too many dinners in truth because I try not to be
20 there. Sometimes it's very inconsistent, the quality
21 is generally poor, you can depend on that but the
22 inconsistencies, it seems so unnecessary. You'll have
23 the little whatever the batch thing that comes in and
24 they'll have vegetables, lately I've been seeing
25

1 green vegetables which makes my heart feel good, I
2 love greens and they'll have broccoli, it may, may be
3 frozen or it might be overcooked but it doesn't have
4 a taste, why would it have a taste? I... you know we
5 don't really need to have food taste. Before I came
6 here I was speaking to one of the security guys and I
7 said you know I'm going to be talking at the City
8 Council and he said about what, I said about the
9 food, he said oh, yeah, he works, he's staff, he says
10 when I first came here I was stunned at women that
11 were getting three mini meatballs, mini meatballs, he
12 said that might not have really been meatballs at
13 all, they might have been soy balls, mini and then
14 the glee that sometimes the director would take in
15 not having seconds and... am I finished time wise?

17 CHAIRPERSON LEVIN: If... you can... you can...

18 FROSKA MCGALLISTER: I'm sorry.

19 CHAIRPERSON LEVIN: ...wrap up, that's
20 fine. Don't worry about it.

21 FROSKA MCGALLISTER: Wrap up. I'm
22 extremely concerned about the testimony of the person
23 that was speaking earlier because I have come to
24 think of these... this behavior on the part of... now I'm
25 not saying it happens everywhere, I haven't been

1
2 everywhere, I'm only talking about this shelter but
3 there seems to be... they seem to have weaponized the
4 food, not only are you homeless, not only are you...
5 have a tremendous loss of your own personal privacy
6 but you are being beat over the head with the
7 breadstick, you know as if eating is a privilege that
8 is not an entitlement that you should be hungry all
9 the time that is the characteristic that I would say
10 is prevalent at the shelter I'm in, the women are
11 hungry all the time. Either they... if they want more
12 they may or may not get seconds, it's like well we'll
13 decide even though they're going to be seconds
14 because... [cross-talk]

15 CHAIRPERSON LEVIN: So many people don't...

16 [cross-talk]

17 FROSKA MCGALLISTER: ...most of the people
18 don't eat... [cross-talk]

19 CHAIRPERSON LEVIN: ...eat it, right.

20 FROSKA MCGALLISTER: The, the, the
21 garbage can... [cross-talk]

22 CHAIRPERSON LEVIN: Plenty of... plenty of...

23 [cross-talk]

24 FROSKA MCGALLISTER: ...is filled every
25 day, I was teaching a couple of years ago at a, a

1
2 junior high school or what they call the middle
3 school now and I was amazed at how much food gets
4 thrown out because it really was not good food...
5 [cross-talk]

6 CHAIRPERSON LEVIN: Yeah... [cross-talk]

7 FROSKA MCGALLISTER: ...but the food at
8 this shelter is worse than that junior high school
9 food and it's even worse for the people because it
10 creates a very ugly atmosphere. In this kind of an
11 environment where people are hungry, they're angry,
12 when they're, they're depressed, they're going to act
13 out.

14 CHAIRPERSON LEVIN: Yeah...

15 FROSKA MCGALLISTER: There's no person
16 that is going to be badly behaved if they've had a
17 comfortable meal. Thank you.

18 CHAIRPERSON LEVIN: Thank you so much.
19 Thank you. Council Member Grodenchik wants to ask...
20 we'll move on to the next testimony and then... and
21 then Council Member Grodenchik will, will ask a
22 question.

23 LILLY KNOPF: Okay. Okay, so I have a lot
24 of allergies, I'm gluten free, I can't... I also have
25 different I guess you could say like medical issues

so I can't have tomatoes, lemon, broccoli, cauliflower and beans. So, that makes things like... you know it's hard in a certain way because that's all the cheap ingredients that people would just throw in, but you can have everything without it if you just cook without it. So, I went to the hospital multiple times because I was told for example that the pasta was tofu, I had breathing problems when I ate it and then I felt tight in my, my throat and my chest and my legs and joints were swelling with agonizing pain but nothing changed. Unfortunately, DHS didn't, didn't, didn't change anything. People who can't eat the food usually throw up or have a lot of bathroom issues, that's like a known thing already therefore 70 percent of the people would eat only one meal a day..

[off mic dialogue]

LILLY KNOPF: Oh, oh okay. Alright. I've heard from... [cross-talk]

CHAIRPERSON LEVIN: I'm sorry and if you can identify yourself for the record.

LILLY KNOPF: Oh, sorry, I'm Lilly Knopf.

CHAIRPERSON LEVIN: Hi Lilly.

LILLY KNOPF: I've heard from... because I asked around, you know I've heard from people who used to go to Susan's place now they're where I'm at, Susan's Place has a cook but the quality is poor so clients there feel the same way about the food. If someone went to an appointment or had something to do during mealtime, they were not able to make the, the... during that time they were not able to be there they cannot get the food. Food portions are half the size of a small meal, so this is one meal I actually brought, I've actually had this meal two weeks ago for three days straight and I've also had it two weeks before that for about three days straight. They order like a lot and it's the same meal, so you have lunch and dinner of the same thing. The rice here is stale, if you touch it you can actually feel it, I tried eating this last night as well, it's, it's really not good. This hamburger here, it's one hamburger and it's, it's actually like... it's gluten, I can't have it. So, the only thing I can really eat here are these veggies which are canned veggies, anyone can tell these are canned veggies. They don't really give you salads or, or any raw veggies that you need... [cross-talk]

CHAIRPERSON LEVIN: I'm sorry, is there an expiration date on that?

LILLY KNOPF: Nothing, nothing is on it.

CHAIRPERSON LEVIN: So, you don't know if the burger... you know it's... [cross-talk]

LILLY KNOPF: No and actually got this frozen also... [cross-talk]

CHAIRPERSON LEVIN: Okay... [cross-talk]

LILLY KNOPF: ...that's another thing.

CHAIRPERSON LEVIN: Yeah...

LILLY KNOPF: They tend to freeze a lot of their food...

CHAIRPERSON LEVIN: Sorry, sorry... oh yes Council Member Holden's going to... can we... can we take a look at it?

LILLY KNOPF: Sure. Yeah, it... you could touch the rice it's, it's hard, you can't mush it, usually rice you can mush, you can't right... you can't mush that.

CHAIRPERSON LEVIN: Uh-huh.

LILLY KNOPF: That's like a meal for a six-year-old, like you can't... that's half a meal even that's... [cross-talk]

CHAIRPERSON LEVIN: Uh-huh... [cross-talk]

LILLY KNOPF: ...you know they should put other things in there, they're not. I know someone who opened up an orange juice bottle and we saw old mold inside it, there's usually more carbs served than nutrient, nutritionist... sorry, foods that have nutrients in it such as pasta, sandwiches, rice, fake mashed potatoes instead of like chicken or soup or raw veggies. Many times, I have... I said that, sorry. There have been mice a lot in the cafeteria, they say they spray it, I don't see them spray it, it could be they spray it but there's no traps whatsoever. I've been in and out of the shelter for, unfortunately many years, at, at one point I was in the shelter for 24 and under and they didn't have any of these things that I could eat so I have like five apples a day and a carton of milk and I was going to school and I was not able to focus whatsoever to the point I was standing at that time, I had this accident for three years but before that I was standing, I was very athletic and I, I, I couldn't walk properly because it was just I couldn't eat properly and that really affected me. Now these meals because I'm not eating properly, I'm actually a full-time student now in college and I'm also... I was in an IT support program,

I don't know if you heard for Solis, it's a 11 program, I actually got dismissed from the program because I was always so hungry, I was always tired, I was... I couldn't focus straight, you know and now I'm also taking pre-calc in Kingsborough and, and my GPA is a 3.56 and now it's a... since I went to the shelter system it's now a 3.4 and, and it's, it's just getting lower because the last test I had I failed and I'm an A student, before this I was A's so that's another thing. The kitchen staff for the meals that save... I eat kosher so for the... for the... a lot of times that's given to clients who don't need to eat kosher only because they don't want to eat something else and then I'm stuck and then let's say I'll be eating this meal and sometimes oh I want that and they'll grab it from me and nobody will do anything, not the security, not the kitchen staff, nobody will do anything. Let me just see... sometimes when there is no food sometimes like I, I actually had my boyfriend, he was in, in the... in the hospital over the weekend, this last weekend I, I would come back usually just thinking there's more meals, there was nothing in the refrigerator whatsoever that was kosher or anything that I could eat and I'm asking

1 for five dollars to go and get myself something to
2 eat and they're like well we can't give you money but
3 when was one point when the laundry was... like the
4 washer there wasn't working everybody got five
5 dollars to do laundry and people would actually even
6 take advantage of it and was like oh you know I do
7 laundry again, I do laundry again and like they just...
8 they'll just take the money but here I need to eat
9 something and I can't have it and then I have vertigo
10 and I get seizures if I don't eat properly and I
11 continuously go into the hospital for that as well
12 because I'm not eating so my... like... it's like an
13 average month... I mean even an average... every, every
14 two weeks or so I'm in the hospital for... about four
15 times so it, it's, it's getting like out of
16 proportions. So, I also, also just want to mention
17 one more thing, unfortunately like I at one point I
18 was... I was studying in the cafeteria, I had
19 permission to study, I always do there, there was a
20 change of shift of security guards and that new
21 security guard did not want me to be in the room with
22 her, she just was being weird and she stabbed me so
23 because of that I was able to meet with the head of
24 DHS three people, they said that they're going to
25

help me out with the foods and be... and I thought I was very fortunate to actually have that opportunity because at least if I was stabbed at least I got something out of it, no, they didn't do anything. So, I just want to mention all that.

CHAIRPERSON LEVIN: Oh, okay. Okay, thank you, I... and congratulations at being in, in school... [cross-talk]

LILLY KNOPF: Trying... [cross-talk]

CHAIRPERSON LEVIN: ...you're... sorry?

LILLY KNOPF: Trying.

CHAIRPERSON LEVIN: Trying, trying and you said you're at Kingsborough?

LILLY KNOPF: Yeah, Kingsborough, I got already kicked out of the IT program because I wasn't focusing well so...

CHAIRPERSON LEVIN: That, that was also at CUNY because... [cross-talk]

LILLY KNOPF: No, it's, it's a not for profit program but... [cross-talk]

CHAIRPERSON LEVIN: Okay... [cross-talk]

LILLY KNOPF: ...but they also are accredited towards any CUNY school, it's... Nancy Pelosi went there, it's a very like well known thing,

bankers go in to try to interview us and try to get us jobs and whatnot so it's a very big well known thing, it's... [cross-talk]

CHAIRPERSON LEVIN: Got it... [cross-talk]

LILLY KNOPF: ...it's two years of school and 15 weeks... [cross-talk]

CHAIRPERSON LEVIN: Okay... [cross-talk]

LILLY KNOPF: ...and you're at the geek squad when you... when you're done.

CHAIRPERSON LEVIN: Okay. With, with CUNY the... we've, we've been working with CUNY and Barry can speak to it as well and Council Member Barron on, on ensuring that CUNY is playing a role in making sure that all their students are... you know are well fed and, and so CUNY has been making some progress so that O'Brien just did a report on it and... on... and... on... I don't know where it was broadcast but it's, it's something that is kind of... is more front and center so, so you... [cross-talk]

LILLY KNOPF: Well the food in all the communities they don't take SNAP so... and then it's like double or triple the price that you would actually... [cross-talk]

CHAIRPERSON LEVIN: Yes... [cross-talk]

LILLY KNOPF: ...pay... [cross-talk]

CHAIRPERSON LEVIN: Right... [cross-talk]

LILLY KNOPF: ...and then with... even with single stop or any of those pantries it's canned food, you're going to hold a can, can opener the whole time, you know it's not like you have real food that you can really... [cross-talk]

CHAIRPERSON LEVIN: Yeah... [cross-talk]

LILLY KNOPF: ...get... [cross-talk]

CHAIRPERSON LEVIN: Yeah... [cross-talk]

LILLY KNOPF: ...so it's... and then you can't bring the food to the shelter so what are you going to do with it.

CHAIRPERSON LEVIN: Right, right... [cross-talk]

LILLY KNOPF: You know.

CHAIRPERSON LEVIN: And do you have where you're staying a refrigerator?

LILLY KNOPF: The... no, we're not allowed to really use a refrigerator or anything... [cross-talk]

CHAIRPERSON LEVIN: You don't have a kitchen obviously.

LILLY KNOPF: No, no, I'm in a regular single space, I was in deviant and moved to a single so.

CHAIRPERSON LEVIN: Okay. Thank you for being here and testifying.

LILLY KNOPF: Yeah.

CHAIRPERSON LEVIN: Greatly appreciate it.

LILLY KNOPF: Thank you.

CHAIRPERSON LEVIN: Thank you.

KATRINA CORBELL: Hi, my name is Katrina Corbell and I'm with the client advisory group with Coalition for the Homeless. I'm currently at a project renewal shelter in Manhattan and I will be submitting the written testimony later in this week. My shelter is one of the shelters that restricts bringing in any food, any food item even any food enhancer like your own salt or your own instant coffee. My neurologist actually prescribes coffee to treat migraines and the shelter won't let me bring in the coffee packet even with the doctor's letters. So, one example for me personally was last December the food I ate at a lunch made me so sick I had to go to urgent care, urgent care sent me to the ER. I ended

up losing my bed because I was in and MRI during the
ten o'clock curfew and it... we ended up deciding...
[cross-talk]

CHAIRPERSON LEVIN: Sorry and how long
had you been there when that... like how long had you
been at that shelter when that happened?

KATRINA CORBELL: I had been at that
shelter for about six weeks and what the doctors and
I figured out or the closest thing to an answer we
had was that it was the amount of vinegar in three of
the... or three of the... three of the dishes served at
the same meal and so my body was reacting to too much
vinegar or too much acid in all of the food...

CHAIRPERSON LEVIN: And where did you go
then that night because you couldn't go to that
shelter because you missed curfew... [cross-talk]

KATRINA CORBELL: No, the shelter just
had me stay in the cafeteria all night, they did not
do the right to bed or right to... something coalitions
helped me learn so for the... [cross-talk]

CHAIRPERSON LEVIN: Right to shelter,
yeah... [cross-talk]

KATRINA CORBELL: ...next two nights I had
to stay in the cafeteria until my... until I could not

1 keep sitting up because I could not keep my muscles
2 up so then I went to the ER again just for the right
3 to sleep in a bed. So, we figured out that I can no
4 longer eat the potato salad or the macaroni salad or
5 the three bean salads because of the amount of
6 vinegar in those side dishes and that's what I've
7 been having to do for the past 12 months is remind
8 this... remind the cafeteria that I cannot eat those
9 side dishes. I have turned in medical letters from my
10 doctors that say the foods I can eat and the foods I
11 cannot eat and my, my then case manager said well
12 then you can use your SNAP benefits to go buy the
13 foods you need and eat them outside the shelter,
14 we're not going to help you. Overall the shelter has
15 made some minor steps of improvement. For instance,
16 in April they started having soy milk which was a
17 surprise to all of us and then in June they started
18 having some plant based options which was again a
19 shock, we don't know for sure when they started to
20 grow a heart but we are grateful for that...

22 CHAIRPERSON LEVIN: Say... where, where is
23 this shelter?

24 KATRINA CORBELL: It is the... [cross-talk]
25

CHAIRPERSON LEVIN: Or you don't have to say if you don't want to, but I was just... [cross-talk]

KATRINA CORBELL: It's New Providence.

CHAIRPERSON LEVIN: Okay...

KATRINA CORBELL: In Manhattan, the only catch is we do not have any choice, I'm a vegetarian, I'm also in a... it's a... oh my... so between my allergist and my pulmonologist, my neurologist and my registered dietician they all work with me on a... it's just called like acid restriction, there's like a fancy word for it but it basically means to eat healthy and when I would take pictures and show them what the food was that we were being served they were kind of working with me to try to eat as healthy as possible around it so even though they started having healthy items at the shelter we cannot control what we are served so sometimes we are still served a soy chicken-less chicken patty ten meals out of the 14 meal period, it's the same thing because different cooks won't know what the other cooks are... for the vegetarians so there's no variety, there's no fresh vegetables, there's no fresh fruit, sometimes the fresh fruit will run out after 20 minutes so if

you're having the rest of the... if you come down to lunch at 12:30 the fruit is already gone so you're just told that you don't get any fruit and at this current shelter we don't have access to any refrigeration, we can't store food, we can't... if we have... and if we go to a work we cannot get a bagged lunch, we were told that they don't have to do bag lunches, they can do save a plate for dinner but then you have to risk if anybody else takes the plate, that's happened both times or... one time I was told that they were going to save... or they were going to prepare lunches for me for when I was working on election day and that never happened. So, I ended up having to spend about 26 dollars for the equivalent of three meals at Duane Reade because Duane Reade was the only thing open at four a.m. on my way to work and then just funny recent things from this past week was for breakfast we had French toast one day, the French toast was served cold. The shelter staff this morning were discussing that they might be able to borrow the refrigerator in the kitchen because their own refrigerator was broke and then we've seen shelter staff be able to eat the food that we're having and get access to milk and stuff they needed

for their coffee. So, that's the food that we're seeing that is there for us that we're seeing staff be able to access.

CHAIRPERSON LEVIN: Thank you so much for your testimony.

KATRINA CORBELL: Uh-huh.

CHAIRPERSON LEVIN: And do you want to... yes, go ahead. So, make sure the red light is on. We were also joined by Council Member Vanessa Gibson and earlier we were joined by Council Member Reynoso as well and Treyger.

CEE CEE: Hi, my name is Cee Cee, glad to be here this morning or this afternoon but anyway the food compliant is that the milk is going bad or is sour before the expiration day and they serve it to us. Also overcooked and undercooked food such as vegetables or pastas and other stuff, molded bread that has been served to the clients. Mice has been seen in the kitchen area, rolling... you know running around and there are days when they do not have enough food to serve the clients so they give them lunch for dinnertime... also is they don't have enough supplies let's say cups, silverware something like that like there are times when I would eat my cold

1 cereal I would have to use a fork because they, they
2 did not order enough supplies. Also... let's do this
3 fast. Okay, there have been clients who have medical
4 problems and they brought it into the staff member
5 attention of what they can and cannot have, the staff
6 ignore the doctor notes. And sometimes the... some of
7 these clients don't have any money and they will use
8 some of their money to buy nutritious stuff because
9 they cannot eat this stuff and another thing is also
10 according to what I was told that the Director has
11 control on what food she orders so that's, that's
12 all.
13

14 CHAIRPERSON LEVIN: Thank you, thank you
15 very much for your testimony, thank you. Council
16 Member Grodenchik has questions.

17 COUNCIL MEMBER GRODENCHIK: Thank you Mr.
18 Chair, I just want to thank you all for being here
19 today. I along with Chair Levin am probably the, the
20 two strongest advocates for feeding people in the
21 city of New York but I'm not just feeding them but
22 making sure that the food is of a good quality not
23 just a decent quality but my only question then is
24 for all of you or any of you is have you ever gotten
25

a good meal in a New York City shelter? Not one, one maybe on the end?

LILLY KNOPF: I, I feel like what's the point if... I mean I... a lot of times I'm asking the people who are in the... [cross-talk]

COUNCIL MEMBER GRODENCHIK: You have to speak into the mic, sorry.

LILLY KNOPF: A lot of times I'm actually asking people in this room like is there something I can... you know if like if I have food that I can't eat I might as well give it to them, they're like well I don't... I don't like the food I keep throwing up so I'm not going to even try it and that's why I left, I'm like well listen I'm thinking the same thing and I just... last night I didn't... I didn't sleep there I was just... I was... I wasn't... I wasn't sleeping, you know so like there are many times I'm like what's the point if you're in a... in a bed and they're, they're getting paid for you to sleep in a bed which I have a medical bed and they won't let me bring a medical bed which is another whole story but you have a bed and, and you know they're supposed to support you in like at least food, the basics and laundry and they're not doing it. A lot of times there's a lot of corruption

in that stuff then what are... what are... what are you doing there like what's the point. I'd rather focus on school let me sleep somewhere else, let me figure out food on my own, you know.

KATRINA CORBELL: Because you are asking if I'd had at least one meal then I can answer that because we had a chef briefly, it's a complicated situation as to what happened to him, he felt so bad at what he was limited to serving us before they started doing the plant based meals that he actually went out of his way to prepare salads for the vegetarians so he actually would... and it made everyone want to, you know pretend to be a vegetarian for a day to get the fresh salad but it was with the chopped up half a bell pepper, it was like magnificent, you were... not think you had gotten it at a city shelter which made again everyone want to pretend to be a vegetarian for a day.

CEE CEE: I would say I've had a few lunches that were edible.

COUNCIL MEMBER GRODENCHIK: Okay.

FROSKA MCGALLISTER: Partly, just the sandwich and when they volunteer from other organizations, when they bring food in sometimes they

will actually bring food to the sidewalk and the people from the shelter will run downstairs to get the food that they bring but that's not food that's being dispensed by the shelter.

CEE CEE: Yeah, I had... before they transferred me from the, the other shelter to this shelter where I'm at now the food was delicious, they served the food on site, they cooked it, I don't... very rarely I eat breakfast but I will eat lunch and dinner if I'm there, very terrific, I wish I was back.

COUNCIL MEMBER GRODENCHIK: Thank you Mr. Chair and thank you to this panel, this is a very disturbing testimony that we've heard here today from you so, I thank you and you can be sure that the Council has... we haven't heard the last of this thing, I'm sure Chair Levin will lead us forward as he always does. Thank you.

CHAIRPERSON LEVIN: Thank you Council Member. Thank you so much to this panel, thank you for coming and taking your time to come into the City Hall and testify at this hearing and...

[applause]

KATRINA CORBELL: Thank you for having us.

CHAIRPERSON LEVIN: And, and thank you for being advocates on behalf of, of everybody else and, and let's, let's keep working on it so thank you. We have two more panels Barbara Hughes, Project Renewal; Giselle Routhier, Coalition for the Homeless and Jacquelyn Simone, Coalition for the Homeless. We, we are going to... yeah, I got to run to the restroom so... okay, thank you very much. So, I will... I'm going to call up some additional folks and see if, if folks are still here Deborah Berkman, okay. And then we'll have one more panel after this. Okay, whoever wants to begin.

GISELLE ROUTHIER: Thank you for having me, my name is Giselle Routhier, I'm the Policy Director at the Coalition for the Homeless. We've submitted joint testimony with Legal Aid, and I'll summarize it here today. I want to thank Chair Levin for his leadership and advocacy on behalf of homeless New Yorkers and I especially want to thank all of the individuals who testified before us providing incredibly important personal experiences related to today's hearing. More than 62,000 adults and children

1 sleep in shelters each night. As of September 2019,
2 single adults spend an average of 425 days in the
3 shelter system; families with children spend an
4 average of 428 days in the shelter system and adult
5 families spent an average of 613 days in the
6 shelters. The length of time that individuals and
7 families spend living in the shelter system
8 underscores the need to provide appropriate healthy
9 and appetizing meals to the most vulnerable New
10 Yorkers. Food is a basic human necessity and the
11 quality of food in shelters does not appropriately
12 meet the needs of the 62,000 New Yorkers who often
13 have no other options for sustenance. Our first ten
14 observations and the information we collect from
15 homeless New Yorkers highlight the inadequate
16 oversight of food provision in shelters. Multiple
17 state and city agencies with inspection authority
18 have failed to ensure the food served in shelters is
19 safe to consume and meets the needs of shelter
20 residents. And one other quick thing I wanted to
21 point out is... that was alluded to in a lot of the
22 questions today was that good food it shouldn't just
23 be about minimum standards, good food equals dignity,
24 it equals comfort, it equals care and that's
25

something that is so lacking in the shelter system overall. So, the Coalition for the Homeless we operate 11 direct service programs serving homeless families, adults and children, we serve as the court appointed monitor of the single adult shelter system and the city appointed monitor of the family shelter system and we maintain a regular presence in all shelters at all hours of the day and night. We also facilitate a weekly meeting over our client advisory group which includes individuals who have lived experience of homelessness. Through these multiple roles we receive frequent and widespread complaints about food in shelters including issues such as quality, preparation, handling, storage, accommodations and nutritional content. I'm going to read a few examples of reports that we, we have sent to the Department of Homeless Services regarding food issues we've observed and complaints we've received from shelter residents, poor food conditions span all shelters but are particularly bad at single adult shelters which more often than other types of shelters that provide meals to residents through contracted vendors. So, a few examples; a May 2019 visit to Casa De Carino, a women's shelter resulted

in this report to DHS, quote "several clients expressed issues with the quality of the food, several clients have reported having increased health issues since entering Casa De Carino. One client reported that her diabetes medication had been tripled by her doctor since moving to Casa De Carino in order to deal with the poor quality of the food that is served there. It was reported by more than one client about on several occasions' meals were served by maintenance workers who do not have food handler's licenses", end quote. An April 2019 visit to Auburn Family Residence, an adult family shelter where several clients became ill in October when they were served spoiled chicken salad resulted in this report to DHS. Quote, "we received many complaints from clients about the quality of the food served in the cafeteria, common complaints related to burned or undercooked food and moldy bread and spoilage", end quote. I have a couple more things to wrap up. A March 2019 visit to Broadway House women's shelter resulted in this report to DHS. Quote, "the shelter has no vending machines and diabetic snacks are not available, clients state that there's no alternative meal for those clients with allergies and other

1 dietary restrictions. A client who's name we redacted
2 was in a diabetic coma for two weeks during 2018
3 because she could not access appropriate food, she
4 spent a total of six weeks in the hospital", end
5 quote. We have more but I'll, I'll lead you to read
6 those. In addition to these reports we've interviewed
7 the shelter residents regarding issues of food
8 accommodations, portions and quality. We've compiled
9 a sample of their quotations in the attached document
10 to our testimony along with photographs of meals that
11 they've been served in the shelter system, I would
12 encourage you to take a look at those. We also have
13 more that we're happy to share with you. These
14 photographs show meals that are unappetizing,
15 spoiled, under, over cooked and lacking... and appear
16 to be lacking in appropriate nutritional content. In
17 sum we recommend DHS implement a complete overhaul of
18 food provision including assessing the quality of
19 it's contracted food vendors, conducting routine
20 inspections, providing appropriate accommodations to
21 individuals who have dietary restrictions due to
22 medical conditions, religious observance or other
23 special needs and we also recommend that the city and
24 state agencies with oversight authority immediately
25

1
2 implement routine inspections of food provision at
3 shelters, these agencies include DHS, Department of
4 Mental... Health and Mental Hygiene and the state's
5 Department of Health and OTDA. Thank you so much for
6 the opportunity to testify.

7 CHAIRPERSON LEVIN: Thank you Giselle,
8 thank you.

9 JACQUELYN SIMONE: Hi, my name is Jackie
10 Simone, I'm a Policy Analyst at Coalition for the
11 Homeless. I'm going to be reading testimony on behalf
12 of Dustin Jones, a client with our client advisory
13 group who felt very strongly about testifying but is
14 at work today and is unable to attend in person. My
15 name is Dustin Jones, I'm a disability rights
16 activist aged 31. In September 2017 I had the
17 unfortunate pleasure of serving... of living in the
18 shelter system for 20 months. Now although there's a
19 long list of problems with accessible and improper
20 training of staff and especially DHS police I will
21 keep my comments to food issues. With my time in
22 shelter most of it was spent at Clarke Thomas Men's
23 Shelter on Wards Island. To my knowledge it's a no
24 cook shelter and I believed the food was from vendors
25 of some sort. The food was terrible and insufficient

for children yet alone grown men. We had the same thing on various days for breakfast, lunch and dinner with almost no changes. For example, for at least Mondays, Tuesdays and Wednesdays for breakfast we had one pack of coffee, a banana, one, one milk and if we were lucky some type of juice. You could not have seconds. I would skip breakfast most of the time because it wasn't worth waking up for. I used to spend my money a lot and buy food throughout the day but that becomes very expensive especially if you're supposed to be a place providing you decent meals. Lunch would somehow get worse. I used to make a joke that Clarke Thomas had an aquarium in the back yard because it seemed like every day, they would have fish for lunch and very undercooked from what I noticed. On two occasions when I actually ate the fish because it looked the most cooked, I got food poisoning severely and was rushed to the emergency room via ambulance. Although I am allergic to shellfish at one point I had to lie and tell them I'm allergic to all fish just so they would give me something else and return for the fish on the days they had it. sometimes they had it for lunch and dinner. Lunch on Sundays was very unappetizing, cold

sandwiches, tuna wrapped up or turkey and cheese, mayonnaise packs and mustard packs, one fruit, coleslaw and... or potato salad, milk and that's it. I will admit dinner was better most of the time but when they did have something decent it felt like if you weren't in the first 30 to 40 people to eat you were left with leftovers from god knows when. Some things were obviously expired and smelled horrible but when you brought it up to the attention of staff, they would think the problem was us or if... the really undeniably smelly stuff they threw it away quickly before anyone made a scene. In a nutshell the only time I ate decently in shelter that wasn't afforded with my own money is when the nuns came on Tuesday nights and fed us if I got to them in time and the two thanksgivings, two Christmases and one of the two New Years in 2017, 2018 that I spent there. One other problem particularly at Clarke Thomas is those of us who had money or were lucky enough to work and buy our own food were strictly prohibited from bringing outside food into the building via DHS officers and it wasn't fair because we were forced to eat the nothing they had there or go hungry altogether. They would make us toss it out and for those who refused

1 they would arrest them on trumped up charges of
2 disorderly conduct and even send some guys to the
3 hospital and charge them as an emotionally disturbed
4 person. In conclusion, I would like to see changes to
5 the food service in the shelter system. Although I am
6 not there anymore based on the time, I did spend
7 there I sympathized so much and cared for the people
8 who I have left behind. It is not fair to kick a man
9 or a person when they are down on their luck, to make
10 them throw away their food and settle for nothing and
11 the food that is provided isn't even enough to give
12 the average five-year-old child. Being in the shelter
13 system for me was mentally abusing on so many levels.
14 I felt like I was in jail for 20 months and I never
15 want to go back but with the housing system in this
16 city being so poor god knows but even if I never
17 return let's think about those people who are in
18 there suffering from diabetes and other health
19 complications who need a balanced diet to make their...
20 take their medication or even just to survive. Thank
21 you.

22
23 CHAIRPERSON LEVIN: Thank you very much.

24 DEBORAH BERKMAN: Chair Levin, council
25 Members and staff good afternoon and thank you for

the opportunity to speak. My name is Deborah Berkman and I'm a Senior Staff Attorney in the Public Benefits Unit and Shelter Advocacy Initiative at the New York Legal Assistance Group or NYLAG. The Shelter Advocacy Initiative at NYLAG provides legal services and advocacy to low income people in the shelter system. Based on our experience working with the individual adults and homeless families in the system we appreciate the opportunity to offer the following comments on food access and quality. Our first concern is the sufficiency of the food available to shelter residents and here I just want to respond to something that Dr. Laraque said and it wasn't part of my, my scripted testimony but she had spoken about how SNAP is supposed to be used to make up for some of the deficiencies in the food that's being offered but that's really... that's not a viable plan because there are many people in the shelter system that aren't eligible for SNAP and even if they are eligible for SNAP because SNAP is calculated using housing costs people who are in shelter typically have low SNAP allowance so that don't really work. Food insecurity has significant health, health and economic consequences and our clients frequently

report that they experience food insecurity even when they're at shelters that offer meals and this is because the meals they're served are too small, they say they're only allowed to have one serving of each item per meal and that the serving sizes themselves are very small and many of our clients report being perpetually hungry. Additionally, clients who are employed or have work assignments that they have to report to have difficulty accessing the food served by their shelters. This is due to the fact that shelter meals are served at specific times and if the residents aren't present at those times, they cannot get a meal. Additionally, they cannot get a meal when they return to shelter after mealtimes and they're not allowed to take their meals early. This is further complicated by the fact that recipients of cash public assistance are not awarded the restaurant allowance supplement if they reside in a shelter that actually does serve meals and as such job hours preclude residents from accessing food at their shelter but their public assistance also leaves them without a means to purchase food. Working shelter residents should not be punished with hunger for being employed. The problem a DHS resident shelter

hugger is further amplified by shelter policies that prevent people from bringing in outside food to shelters. When residents miss meals and are prevented from bringing in and or storing outside food, they're left with no meal options and this is particularly harmful for residents with health issues or disabilities that need to eat between meals for their wellbeing or to safely take medication. While residents can be granted a reasonable accommodation to allow them to eat between meals or at off times, that process can take months and requires the active cooperation of the resident's health care provider. And despite what Dr. Laraque said earlier I've never had a client who has had a staff member of the shelter help them procure a, a reasonable accommodation especially if they don't have a regular doctor and many people just don't have access to medical care who are in the shelter, not everybody is eligible for Medicaid and not everybody has health insurance. Another major concern for NYLAG clients who are shelter residents is the poor quality of the food provided in shelter, the meals are very high in sodium and they're most often prepackaged, and they rarely encounter fresh fruits or vegetables. Also,

client's medical conditions and disabilities the most common of which is diabetes are not accommodated and DHS takes the position that they're accommodated but in reality, almost no client has reported being accommodated. In conclusion, they report... residents report the food is both of poor nutritional quality and inadequate and if the goal of DHS is to protect and care for homeless New Yorkers as they seek permanent housing then DHS must provide food service that matches these goals. Shelter residents deserve proper nourishment. We, we want to thank the Committee on General Welfare for the work it's done to facilitate shelter for vulnerable New Yorkers and for taking this opportunity to continue to improve the condition for shelter residents.

CHAIRPERSON LEVIN: Thank you and I just want to acknowledge the work that NYLAG does around individuals with medical conditions, chronic medical conditions in the shelter system and the kind of endless revolving door between the shelter system and our, our hospitals and we just heard that on the previous panel that one of the individuals has, has had to go into the ER numerous times and, and, and you mentioned before about the individual in the

diabetic coma, you know it is very, very concerning the, the health impact and the... and the... and the impact on... as a public health issue that nutrition... that linkage between nutrition and public health in this instance so thank you.

DEBORAH BERKMAN: Thank you.

BARBARA HUGHES: Good afternoon Chair Levin and fellow Council Members. Thank you for giving me the opportunity to testify today. My name is Barbara Hughes and I am the Executive Director of City Beet Kitchens at Project Renewal, a New York City homeless services nonprofit agency. For more than 52 years Project Renewal has empowered individuals and families who are homeless and at risk to renew their lives through comprehensive health, homes and jobs. Project Renewal's hallmark workforce development program is our culinary arts training program which receives critical funding from the City Council, and we are great... very, very grateful for that. Since 1995 the program has trained over 1,700 unemployed, homeless and at-risk New Yorkers for careers in restaurants, corporate dining and institutional catering. Our 85 percent job placement rate is above the national average for similar

programs and these are jobs with career ladders and starting wages above minimum wage. In 1997 we started City Beet Kitchens, a catering business to create even more jobs for our graduates and to feed New Yorkers in need. City Beet Kitchens serves over three million meals each year at DHS shelters, supportive housing and senior centers across the city. The people we feed through City Beet Kitchens are also the people we serve through our shelter, housing, jobs and health programs and because we are committed to the overall welfare of New York City's sustainability and reducing food waste our priorities in addition to providing nutritious and delicious meals to everyone. By employing formerly homeless and criminal justice involved individuals we are helping to reduce shelter, jail, Medicaid and public assistance. We estimate that City Beet Kitchens saves the city 1.2 million dollars annually through those reductions. City Beet Kitchens has been a proven path out of poverty for thousands of homeless New Yorkers that is our public purpose. As a result of our emphasis on sustainable employment and working with a vulnerable population, City Beet Kitchens is being priced out of the market by private vendors and today

our mission and work is at risk. In recent months we have lost two of our biggest customers both are homeless services organizations to competitors who are undercutting our pricing. Now dozens of jobs are at risk. The stability individuals have created for themselves is a result of a steady good job is at risk and the quality of food our city provides to homeless New Yorkers, an issue that has been in the headlines lately, is at risk. We are here to request the Council's support and assistance to preserve City Beet Kitchens. Thanks for allowing me to testify today.

CHAIRPERSON LEVIN: Thank you very much and the, the culinary program at Project Renewal is something that the Council has supported and will continue to support for I imagine like many years and so we see the great value in the work that you have been doing and, and can only imagine that the understanding of your staff for what others are going through, were... what the recipients of the food are going through is evident in, in the way that they prepare the food and, and, and the quality of food that they're providing so...

BARBARA HUGHES: Because they have gone through it themselves, yeah and the training program is our mission, the... so for purpose enterprise the catering company drives the mission.

CHAIRPERSON LEVIN: And, and how many... how many former residents of shelter have, have come through both Project Renewals overall culinary program and, and City Beet Kitchen?

BARBARA HUGHES: 1,700 have graduated to date, the, the social purpose of enterprise City Beet Kitchens employs about 60 people and two thirds of those are former... are students and graduates of the program and many are, are explained here had, had been formerly homeless, have been in the shelter system, may still live in the shelter system.

CHAIRPERSON LEVIN: And they're salaried or paid hourly and have health benefits and... [cross-talk]

BARBARA HUGHES: Yeah, full benefits, yes.

CHAIRPERSON LEVIN: Full benefits.

BARBARA HUGHES: Full time employees.

CHAIRPERSON LEVIN: Full time employees, retirement benefits?

BARBARA HUGHES: Yes, we have them, they're not the best they could be, but we have them, yes.

CHAIRPERSON LEVIN: Okay. So, we'll look forward to continuing to speak and, and, and engaging on, on how we reorient this, this entire system to be more holistic so we appreciate you being here.

BARBARA HUGHES: Thank you.

CHAIRPERSON LEVIN: Thank you. Thank you to everybody for your testimony and there's a lot of work to do here so let's, let's keep on working. The next panel Roxanna Henry, Urban Justice Center; Felix, Felix Guzman I believe, Coalition and Elohim Ray from People Rights.

ROXANNA HENRY: Thank you Chair Levin and members of the General Welfare Committee for the opportunity to testify before you. my name is Roxanna Henry and I'm a Social Worker and an Advocate for the Urban Justice Center, Safety Net Project. We are extremely appreciative of the General Welfare Committee that the General Welfare Committee is holding a hearing on the longstanding issues faced with shelter residents in relation to the food shelters. For years clients have discussed with us

the problem they experience with food and in the shelters and we've heard their frustration and their complaint to homeless services staff more often go unattended to. We submit a longer written testimony that discuss our concern in detail but for the purpose of speaking with you today I will focus on highlights and recommendations. It's important to note that this hearing is happening following reports of food poisoning from food served in Auburn shelter in Brooklyn. Auburn is well known by service providers and many homeless folks as a punishing place with a long history of institutional violence which has included utterly harmful building conditions and transgressive and abusive behavior by some staff members. The most recent issue with the food is part of a much longer history of serious problems at the shelter that have continued. This includes years of complaints about spoiled and rotten food served to the residents as we've heard previously. In our written... in our written testimony, let me clear my throat [clears throat] excuse me, we provide many examples of people's personal experience with food that makes them ill and is generally unhealthy. For example, there are some individuals

who we work with while other examples are from the state fair hearings where shelter residents have thought to obtain a resident... a restaurant allowance or recovery of SNAP benefits due to... due to spoiled food as a result of preventative issues on the shelter level. One example from the state fair hearing shows the kind of difficulty faced by shelter residents who have refrigerator access to store food. I'll read the state decisions, decision. At the hearing the appellate testified that the refrigerator stopped working and on about July 18th she reported this problem to the shelter administration. On July 20th she was provided with another refrigerator, she testified the replacement refrigerator did not work plus it was infected with roaches. She stated that with the assistance of one of the shelter maintenance staff she eventually about two weeks later was provided with a working refrigerator. The appellate testimony is credible in that it was persuasive, consistent and detailed. She also showed a video of her cell phone of the refrigerator with at least six roaches walking inside of it. Our experience with this kind of example happens across the shelter system and they are preventable. I'll say that again,

they are preventable. We also know that City Council and municipal agencies have invested significant resources in improving healthy food access for school aged children. Unfortunately, we have not seen the efforts on remotely the same level to address food insecurity among New Yorkers living in shelter. We recommend the city give the same attention to the provision of nutritious, nutritious meals in the shelter. Our recommendations are as follows; increase the frequency of food inspection and ensure that all inspections are unannounced as previously stated, have an outside agency conduct and review biannually food... client food satisfaction surveys, publicly post the results of food inspections from DHS, DOM... DO... DOHMH and OTDA listed by shelter, we need food transparency, create a hotline and online forum which residents can be part of the compliant, can anomalously complain regarding food shelter in addition to tracking all food complaints and ensure a streamlined process for individuals and families and public assistance residing in shelter that do not serve meals and do not provide working kitchens or for those who cannot eat shelter meals due to medical, religious and other dietary reasons to be

1 budgeted for restaurant allowance grant. And I want
2 to add one more thing as we've mentioned CUNY earlier
3 with one of our clients from the Urban Justice Center
4 was that the idea of EBT in the cafeteria was a very
5 good idea and we should try to really bring that to
6 the CUNY schools as well as the need assessment that
7 CUNYs been doing for the last two years it's time
8 that they complete it and actually show us what they
9 found and again I do want to say full transparency is
10 needed and we want to have folks with firsthand
11 experience at the table making sure that the policies
12 are being implemented correctly. Thank you.

14 CHAIRPERSON LEVIN: Thank you so much,
15 thank you.

16 FELIX GUZMAN: Hello. Hi everyone, I want
17 to say thank you to the Committee and thank you to
18 all in attendance who are doing the work to actually
19 build better, better healthier communities. With that
20 said I'm going to talk about something, I am formerly
21 incarcerated, formally... [cross-talk]

22 CHAIRPERSON LEVIN: If you could you
23 identify yourself for the record... [cross-talk]

24 FELIX GUZMAN: Oh, sorry. Felix Guzman,
25 I'm with Coalition for the Homeless. I identify as

formerly homeless and formerly incarcerated for a reason. There's a reason why, I'm a former regular resident of a cluster site and I be... then I became homeless as a result of that. Now I bring up incarceration because the food at least there although inedible is high in calorie, calories and you can actually at least gain weight. Now the issue with people in shelter is that obviously there's not enough food and the food that's given isn't, isn't to the standard of actually being able to be healthy enough to transition out of shelter. Again there's a reason why some people are in shelter and food might be a, a root cause of that if you cannot actually be healthy enough to move forward in doing what you have to do whether it be employment, taking care of being in a program and whatnot. Now I wanted to actually touch on a couple of things. Obviously, the access to quality food again caloric intake is... it, it, it sets the basis of human life like you know the basic needs are food, shelter and... food, shelter and safety. Now if we are not able to actually have a healthy meal then how are we supposed to actually navigate the trauma of homelessness. The shelter industrial complex is, is... people are making hundreds of

millions, billions of dollars to provide substandard care, substandard food, substandard housing, substandard everything now at the very least we could be provided a meal that actually can compensate us for the trauma that we're enduring. Now I want to actually talk about... again let me touch on that point, I, I wrote something here for that. There's a reason why Coalition for the Homeless actually inspects the food, food, food and the food placement and where they're... where the food is actually being held. The... that, that is sad that the city has to actually have an outside watchdog do this. The fact that Auburn is a city shelter and that the city itself is responsible for poisoning its own residents is insane, that's insane. Now making... and this goes to talk about the vendors that are actually making money off of the city providing these meals. Making money off of providing less than basic necessities to a shelter resident who the city is paying itself duplex apartment prices in some cases is self-cannibalization. Why are we incentivizing providing contracts to vendors who provide substandard meals, that is... that, that just doesn't make sense to me like I just have an associate's degree but like it's

just common sense, you know and New York City being at the forefront of that shelter industrial complex be, because we have a right to shelter mandate we at the very least should be offering some dignity to those that are disadvantaged, that are in shelter, we have children, we have the elderly, we have the disabled, we also have victims of domestic violence who are further being victimized by not having actually the sufficient enough meals to actually power through what they're going through to actually heal. Now again like I might have gone all over the world with this but it's just common sense that we take, take, take care to take care of the disadvantaged. Again, like there's a reason why people don't transition out of shelter, there's a reason for that, that some people spend years and whatnot and it's the failure to the system itself. At the very root of its food, food, food. Food and a safe place to actually sleep. Like it's, it's crazy that for me I have to actually find a program that actually has meals on site because the food in the shelters are not that good. Why am I going to a nonprofit to take... to take... to take care of my basic needs? again and how do I qualify for that, being

formerly incarcerated so at the very least make things accessible, make things healthy and just, you know like hold the shelter system and these vendors accountable for providing less than... less than substandard not substandard but less than substandard. The greater food in shelter at some places is actually one grade above the prison food and two, two grades above street homeless food which is eating out of the garbage. Thank you.

CHAIRPERSON LEVIN: So, I just want to thank you and I appreciate you going around the world with it because... [cross-talk]

FELIX GUZMAN: Yeah... [cross-talk]

CHAIRPERSON LEVIN: ...the reality and I think... I think you get to this in your testimony is that it seems as if we would rather as a city or at least that's the policy spend a little less money or try to save a few pennies than provide a decent level of service... [cross-talk]

FELIX GUZMAN: Uh-huh... [cross-talk]

CHAIRPERSON LEVIN: ...and so every time
you look at why things are not working properly
within the shelter system... [cross-talk]

FELIX GUZMAN: Uh-huh... [cross-talk]

CHAIRPERSON LEVIN: ...or within the DHS system you can always point back to well they don't want to spend the money to make it work properly... [cross-talk]

FELIX GUZMAN: Uh-huh... [cross-talk]

CHAIRPERSON LEVIN: ...and it always comes back to that, that there's always this desire to save a couple of bucks and therefore we can't provide decent food therefore we can't provide adequate vouchers therefore we can't provide enough affordable housing therefore it's always about well, we don't want to spend the money and that's... and, and, and so I think you get to the root of it which is that we know and we can... [cross-talk]

FELIX GUZMAN: Uh-huh... [cross-talk]

CHAIRPERSON LEVIN: ...provide better than substandard housing, better than substandard nutrition, better than substandard services... [cross-talk]

FELIX GUZMAN: Uh-huh... [cross-talk]

CHAIRPERSON LEVIN: ...we just know that it, it's within our grasp we just have to prioritize it as a city, and I think that... I think New Yorkers would... are... would get behind that.

FELIX GUZMAN: Uh-huh... [cross-talk]

CHAIRPERSON LEVIN: I really do.

COUNCIL MEMBER HOLDEN: I just want to jump on this that some of it's not about money though, it's about management... [cross-talk]

FELIX GUZMAN: Uh-huh... [cross-talk]

COUNCIL MEMBER HOLDEN: Right. For instance, somebody's trying to bring in food because they don't get the quality food in the shelter, they try to bring it in and they, they get it taken away... [cross-talk]

FELIX GUZMAN: Yep... [cross-talk]

COUNCIL MEMBER HOLDEN: ...and thrown away, that's not about money, that's about mismanagement, it's about being inhumane and its about an attitude that we're seeing and this is a very distressful hearing because of what we're hearing, what we heard from the administration is totally different than what we're hearing from the advocates and, and, and shelter inhabitants, it is a disgrace and, and I appreciate your testimony every, everyone's here but I want to ask a question and then we're going to hear from you but I want to ask a question is... has it gotten worse complaints about food and, and you know

anybody could jump in but has it... have, have the complaints gotten much worse or are we getting... are we getting a little better?

FELIX GUZMAN: As a formerly homeless person I ate most of my meals elsewhere and as a... as a member of the Coalition for the Homeless client advisory group I hear the frustration and people with restricted diets and also with needs that supersede what caloric intake... caloric... calories are being offered in the meals so at the very root of it like however long these contracts have been in place that's however long it's been work... been bad so again like the food I'm sure hasn't changed much since it... since it was provided as that is just the nature of like how things work with these vendors and I think that it has only gotten better because of agencies like Coalition for the Homeless and inspect the food and also just the media attention that's blitzing because of the, the unfortunate controversy but actual lived truth of those that are... that were unfortunately poisoned that... I'm saying poisoned not... and I'm not saying that the food was inedible I'm saying poisoned because this was actually preventable and it's still not palatable that truth being lived

1 out for me so for me the food is as it was and it's
2 just as it was and as it is, it wasn't edible for me,
3 I'd, I'd go elsewhere. Thank you.
4

5 ROXANNA HENRY: And I'd like to add
6 something, as a person who is... who received public
7 assistance and I was a student within CUNY and worked
8 for a non for profit who far came for Urban Justice
9 Center within CUNY I can say it's gotten worse
10 because there's been such a big increase of
11 homelessness and such a big increase of food
12 insecurity and where we at one point saw maybe a few
13 people coming in with those kind of issues we're
14 seeing loads of people coming in now seeking housing,
15 seeking all kinds of assistance that they're not able
16 to connect to so it's gotten worse I would say. Thank
17 you.

18 COUNCIL MEMBER HOLDEN: Thank you.

19 ELOHIM RAY: Can you hear me, alright?
20 Elohim Ray for the record and I'd like to say rest in
21 peace Elijah Cummings. There's a lot that I need to
22 say but I don't have a lot of time, I don't even know
23 where to begin but I'm going to start here. I've been
24 homeless for five years, I slept on the street, I
25 slept in a... in my friend's van, I slept in a laundry

mat, laundry room. How I got in this place because of management, the officer of the court which is the attorney and the magistrate which is the judge and they was all in cahoots with each other extorting and rocking chairing off of people who don't know law that's why I'm here. Within three years I've been to different shelters. Over the last five years I've been in different shelters and I'm not saying all shelters are bad some are good, but some are micromanaged meaning that you have people that's dependent then you got people that's independent, right. The people that's dependent they depend on the system, they need help, they take medication then you got people that's independent that don't take medication at all so what they do is they put people that's sick, mentally sick and put people who are mentally functioning properly together in a room with people that don't smoke, with nonsmokers they put people with... they put people in a room with smokers who are nonsmokers and that could affect people's health and that's a matter of concern for me because I have bronchitis so in my case you got people that smoke reefer, you got people that smoke K2 and, and in shelter system it's supposed to be... that's

1 supposed to be against the policy, you know there's
2 supposed to be no drugs or no, no smoking in, in,
3 inside the shelter system but yet they go against
4 that and it's hard for me and it's hard for other
5 people that's there. Now I caught a foot fungus being
6 in the shelter, I got that on record, and I explained
7 that to my caseworker and I explained it to whoever
8 is in charge and they didn't do anything about that.
9 People who have feces in the shelter system, there's
10 people that... there's people that's in the shelter
11 that get paid to do nothing, they don't do their job
12 properly, they don't clean the, the showers properly,
13 there's flies in the shower and everything, people
14 taking a dump in the... in, in the shower that's how I
15 caught a foot infection. I lost weight because I'm
16 stressed. I was 180 at one point then I went to 140
17 then I went to 120 now I'm back at 144. I got a
18 letter from the doctor saying that I'm supposed to
19 receive double portion meals, the shelter that I'm in
20 now they're not... they're not giving me double portion
21 meals and they just stopped... they, they stopped
22 giving double portion meals altogether, they stopped
23 giving seconds so now the only people that could
24 actually eat are those who come home from work, right
25

and so the people that's not working who have a mental disability or whatever which is me, I have a disability, I was labeled schizophrenic, bipolar is what they say but I have a learning disability and a lot of people took advantage of me because of that and so I'm, I'm speaking on behalf of other people that's not here who would love to be here to speak. When you have people that come and do investigations in the shelter, yeah go to the, the people that's in authority like the director or supervisor, they're not giving you who they truly are behind closed doors they're a totally different person, they put on this mask in front of you all so that they can keep you all at bay from putting the pressure on them. There's, there's people that have... the shelter has a lot of... a lot of violations, right, you could walk in the shelter and say wow the, the kitchen is in violation, such and such is in violation. If you all have like undercover who come into the shelter system to see how things really operate it'll blow your mind. Some of you all would never experience this experience because you've never been here, you all just come and have a conversation with people but you're never actually living in the shelter system

1 where you see the staff get nasty with people. So
2 when you all come in they want to be all profession
3 that's, that's, that's a violation of interest, you
4 know and, and it's a violation in interest and, and
5 my, my... the longer you stay in the shelter system
6 you're going to... it's going to be inevitable that
7 you're going to have problems, you're going to fight
8 because you're going... you're not going to get along
9 with somebody who you don't know, you don't know
10 these guys, they're strangers, totally strangers to
11 you and they come in with their own issues. You could
12 be walking to get something to eat online and
13 somebody bumps you, you say excuse me sir why bump
14 me, you do I know you? what's up? What you going to
15 do? You're going to get into a fight and when you get
16 into a fight DHS officers are going to lock you up,
17 they don't care about who's right or who's wrong,
18 they don't care about that, how I know it happened to
19 me, I didn't get arrested, they gave me a summons, I
20 was in an altercation with a guy who kept harassing
21 me, I explained it to the, the staff this was, was
22 going on and they totally ignored what I was saying
23 so we got into an altercation. Now as we got into
24 this altercation the DHS officer was trying to break

it up but the guy was sneaking in punches so I wasn't going to let him go so he could keep hitting me so he came out, he used his baton and started hitting me using excessive force, I don't think that's right, you know what I'm saying for a DHS officer to use excessive force when... to break up a fight. It wasn't only one DHS officer, it was another one, it was two, one was using a walkie talkie and I got a witness to that to attest to that, I got everything documented in my phone. So, what I'm saying now is that there has to be a better way of handling things. The, the, the housing specialist, they're not doing their job properly. I have two vouchers; I got a 2010-E and I got a New York City FHEPS voucher. Again I'm in a micro shelter and there's 200 men there and my caseworker is saying she don't have time to, to help me look for a place because she got to manage other cases, the housing specialist did, saying she can't manage me because she, she got other things on her plate. I asked to speak to the Director and I never spoke to the Director at the shelter. They, they like... she's avoiding me and the longer I'm in there the more problem... complicated it becomes. I'm not there because I want to be there, I want to get out

1 but they keep me... they're keeping me there, it's like
2 the longer they keep me the more they're making
3 money, you know and the more they're making money
4 they're not worried about the people's concern
5 they're worried about their own concern but then they
6 treat people foul and, and that's a total injustice
7 because 1982 the first shelter that was born, the,
8 the, the first shelter that was birthed to help the
9 homeless they had a system that was developed, you
10 know what I'm saying now we in the system now where
11 it's broken... [cross-talk]

12 CHAIRPERSON LEVIN: Yeah... [cross-talk]

13 ELOHIM RAY: ...and it's falling and I'm
14 not saying nothing new that nobody else say,
15 everybody been complaining when they've been going to
16 the rallies for 20, 30 years probably still in the
17 same condition... [cross-talk]

18 CHAIRPERSON LEVIN: That... [cross-talk]

19 ELOHIM RAY: ...but we got to still talk
20 about the same thing.

21 CHAIRPERSON LEVIN: I agree with you but
22 the... but the city FHEPS in particular is something
23 that we're focused on a lot because the voucher
24 amounts are nowhere near what it takes to get an
25

apartment and the 2010-E, I mean... you know we're... we need every member of the City Council to be... to say yes to supportive housing developments in their... in their districts and, and we need... you know we need to make sure that those are... that that... that those are getting built because the waiting list is too long but, but particularly with, with city FHEPS, I mean there's something... there's a lot that can be done there if we... if we... if we actually commit to doing it but unfortunately we got to wrap up in a minute but I'll let... [cross-talk]

ELOHIM RAY: This is... [cross-talk]

CHAIRPERSON LEVIN: ...I'll let you wrap up, yeah.

ELOHIM RAY: This is... it's... and I appreciate that, thank you. With this 1020-E they talking about you have to have a birth certificate, I don't have one, I don't own one and I have everything that I need to get out of the shelter but they're still keeping me there, that's, that's a problem for me like why you keeping me here when you know you can do something but you're not doing it. I think for the people that has seniority in the shelter system who've been there for over ten years plus or five

years plus they know they could be doing more but they're not. I think they all need to get fired and hire new people that will cater to the clients or... yeah, cater to the client's needs.

CHAIRPERSON LEVIN: And if you don't mind me asking to feel free to, to not answer this but where are you right now, which, which shelter?

ELOHIM RAY: That's a good question, I'm glad you asked that Mr. Chairman. I'm in Fort Washington Shelter... [cross-talk]

CHAIRPERSON LEVIN: Okay... [cross-talk]

ELOHIM RAY: ...and that's 651 West 168th Street.

CHAIRPERSON LEVIN: Okay and who, who runs it, the city or... [cross-talk]

ELOHIM RAY: I'm, I'm not sure.

CHAIRPERSON LEVIN: Okay, well we'll find out, we'll find out and, and, and we'll, we'll be in touch because we, we will make sure that we're... if, if there's any assistance we can provide in, in finding permanent housing we're... we'd be glad to do that.

ELOHIM RAY: I appreciate that, thank you very much, that's all I ask and not just me but, but...

[cross-talk]

CHAIRPERSON LEVIN: For everybody...

[cross-talk]

ELOHIM RAY: ...for people that need it, right.

CHAIRPERSON LEVIN: Absolutely, absolutely.

ELOHIM RAY: Now, now for those who can't help themselves they need extra help and they could get the extra help that they need.

CHAIRPERSON LEVIN: And thank you for, for being here to advocate on behalf of everybody and we really appreciate your testimony, it was very, very insightful and very helpful so I want to... we want to tell you I appreciate it.

ELOHIM RAY: Thank you.

CHAIRPERSON LEVIN: Thank you. Okay, yes, I'm sorry.

ROXANNA HENRY: So, I just have one question for the members of the Committee is what happens next, right, you know as advocates, as clients where... what, what's the next step that we are

going to make to make this a solution that's real and concrete and that we leave here knowing that we're moving forward?

CHAIRPERSON LEVIN: So, in, in my experience I've been on the Committee for ten years been chairing it for six that the, the way to make change is to organize and focus on what we want to see happen and then... and then call attention to it and be there to do the, the, the rallies and the... just to... just to create a movement around, around issues I think that, that in my experience that's been the most successful out of... and it's not 100 percent guarantee but calling attention to an issue impacts how it's discussed at the budget level and it's... it, it gets out there in the press and it gets out there so that the Mayor hears it and the Commissioner hears it and I think that that is... you know if... when it's coming from the right place and I... and this, this is coming from the right place like it can be really, really impactful, it might take some time, it can be kind of annoying but it is... it's, it's the thing that I've seen work in the... in the time that I've been here.

ROXANNA HENRY: Thank you.

CHAIRPERSON LEVIN: Okay. And, and just one, one other comment by Council Member Grodenchik.

COUNCIL MEMBER GRODENCHIK: I want to thank you all for being here today and I want to thank you for your question and I think the Chairman is absolutely right it does take a lot of people rowing so to speak in the same direction to make change. I have been frankly appalled by much of what I've heard today. I want to associate myself also with Councilman Holden's remarks and it's, it's not always about the amount of money that we're spending but where we're spending it and how it's being spent and accountability and the city is spending a great deal of money on providing for people who are without homes but I'm not so sure that based upon the testimony today I continue not to be sure that we're getting our money's worth and you're certainly not getting your money's worth and when it comes to what we've heard today especially about food and the issue surrounding food it is painfully obvious from the testimony that we've heard today that we need a substantial upgrade in the quality of the food, you know there's an old saying we are what we eat and I do understand about food intolerances, my son

suffered from them to a great deal, he's better now fortunately but we are not getting our money's worth when it comes to food and I, I've also shared with the Chairman privately and I'll say this and I've said it publicly today, we're spending less than two and a half percent of the homeless service budget according to the testimony we're hearing today on food. I would dare say that there, there is almost no New Yorker who can survive on a two and a half percent budget for food. People of means maybe because they have so much money, you can only eat so much but the average New Yorker is spending far more than two and a half percent of their budget on food. So, thank you all for being here today and thank you Mr. Chairman and I... and I really believe and I'll, I'll express publicly what I've said to you privately that this Committee and this Council is going to have to take a much deeper dive especially during the upcoming budget process when we hear from the Commissioner of, of Social Services Mr. Banks and the DHS Commissioner about how we're going to improve this situation. Thank you.

CHAIRPERSON LEVIN: Thank you and one other thing I just want to add to... in answering... in

answer to your question so one example I can site of, of getting something done Council Member Grodenchik came to the Council, what year Barry?

COUNCIL MEMBER GRODENCHIK: Four years ago.

CHAIRPERSON LEVIN: Four years ago and immediately honed in on, on the EFAP budget which is the emergency food budget out of HRA and you know he didn't really talk about anything else for the next couple of years, every time I'd see him he would talk about it, every... it became... he became like the EFAP guy and whoever he was talking to if it was anyone on our side, anyone on the Mayor's side, it was just... that was like his, his thing and, and it got a lot of attention on the issue and it just takes... it was just that doggedness and that kind of sing... you know kind of really... real focus and passion that, that can get stuff done and so that's a good example of, of... got to be... got to be dogged on it, yeah.

ROXANNA HENRY: Alright.

CHAIRPERSON LEVIN: So, I want to thank you again and thank you for taking the time to be here and, and again the, the, the kind of clarity of, of purpose and passion and insight that you provided

with your testimony is... has, has been greatly appreciated by this Committee and it's all on the record and will be informing our policy for sure... [cross-talk]

FELIX GUZMAN: Thank you... [cross-talk]

CHAIRPERSON LEVIN: ...but look forward to continuing to work with you and make sure on... that we... we're, we're in contact on, on, on everything so... [cross-talk]

FELIX GUZMAN: Okay.

CHAIRPERSON LEVIN: Thank you so much everybody, thank you.

ELOHIM RAY: Yeah, thank you.

CHAIRPERSON LEVIN: Anyone... does anyone else wish to testify? Okay, here at 1:34 p.m. this hearing is adjourned.

[gavel]

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

December 5, 2019