

ANNUAL PLAN SUMMARY 2009-2010

BROOKLYN PUBLIC HEARING

DEPARTMENT FOR THE AGING

209 Joralemon Street
Brooklyn, New York
October 24, 2008
10:18 A.M.

P A N E L:

EDWIN MÉNDEZ-SANTIAGO, Commissioner, DFTA

JORGE ROMERO, Assistant Commissioner, DFTA

CARYN B. RESNICK, Deputy Commissioner, DFTA

JOYCE MATTHEWS-PAUL, DFTA Advisory

2 ASST. COMMISSIONER ROMERO:

3 Good morning and welcome. I will be

4 chairing this public hearing in the

5 Borough of Brooklyn. This is one in a

6 series of annual public hearings

7 conducted in each of the City's five

8 boroughs. The purpose of this annual

9 hearing is to provide an overview of

10 the Department's service activities and

11 to provide the public the opportunity

12 to share their experiences and

13 recommendations through oral and

14 written testimony.

15 Public testimony will be

16 transcribed and forwarded to the

17 Department's Leadership Team and

18 advisors for their consideration.

19 Are there any members of the

20 audience who need the help of a translator?

21 Now, I would like to introduce

22 the Commissioner of the New York City

23 Department For The Aging, Mr. Edwin

24 Méndez-Santiago.

2 COMMISSIONER MÉNDEZ-SANTIAGO:

3 Thank you. I have a very brief opening
4 statement, but as I begin, I would just
5 want to acknowledge that the Borough
6 President is here and will be
7 testifying, and Mr. Borough President,
8 thank you as always for hosting us, and
9 your staff has been very supportive in
10 helping us put this together, and it's
11 really an honor to be in Brooklyn
12 Borough Hall, which is so beautifully
13 renovated. Thank you, sir.

14 Good morning. My name is Edwin
15 Méndez-Santiago, and I am the
16 Commissioner of the New York City
17 Department For The Aging. I am pleased
18 to welcome you to the Brooklyn public
19 hearing regarding our 2010-2011 Annual Plan.
20 Let me just take a moment to
21 introduce the members of my staff and
22 Advisory Council who are joining me
23 here on the dais. Beginning way to my
24 left is Maureen Murphy, our corporate

2 counsel. Next to her is Deputy
3 Commissioner Caryn Resnick. You've
4 already heard from Assistant
5 Commissioner Jorge Romero, and I am
6 very pleased to introduce members of
7 our Advisory Council, and the members
8 sitting with us are representative of
9 the Borough of Brooklyn; Jerry
10 Chiapetta and Ms. Joyce Matthews-Paul,
11 and we will be joined in hopefully just
12 a few minutes by Rabbi Wiener.
13 I want to thank the members of
14 the Advisory Council for all that they
15 do to continue a dialogue with the
16 Department and help us stay current on
17 all the issues that affect them and
18 their community.
19 Let me remind you that the
20 Department will be responding to every
21 single testimony that we receive, as
22 well as developing an Executive Summary
23 to respond to your concerns. We would
24 urge you to make sure we get a written
25 copy of your testimony, and if you fill

2 a card out outside, with your
3 permission, we will add your testimony
4 as written to our public record, and it
5 will all be available on our website
6 for the entire public to review at
7 www.nyc.gov/aging. If you don't have
8 your public testimony today, you can
9 feel free to email it to us and we
10 would love to add that to our record.
11 Today is your chance to comment
12 on the Department's planned direction
13 for the next State fiscal year, and I
14 particularly look forward to hearing
15 your views on key questions on how DFTA
16 can best support senior centers as
17 health and wellness centers, as models
18 of cultural and linguistic competency,
19 and as key service providers in
20 age-friendly communities.
21 Before we turn this forum over to
22 you, I'd like to just briefly highlight
23 some achievements that are detailed in
24 our Annual Plan.
25 Let me start with the issue of

2 modernization. DFTA's key initiative
3 to better help older New Yorkers
4 maximize their health and well being,
5 and to ensure supports are available as
6 older adults' needs change over time.
7 More than two years ago, the Department
8 began consulting with providers,
9 advocates, elected officials and
10 seniors themselves on the changes
11 needed in aging services, in light of
12 the anticipated increase in service
13 demand as the number of persons over
14 age 60 grows and increasing diversity
15 of this population on every dimension
16 from language and ethnicity to activity
17 level and status of health and sexual
18 preference.
19 We sought input on DFTA's three
20 key services of case management, home
21 delivered meals and senior centers, and
22 instituted a process that involved
23 hearings, broad stakeholder community
24 discussions, the Department issued
25 concept papers outlining proposed

2 changes, changes to our proposed design
3 in response to feedback, and finally,
4 issuance of citywide requests for
5 proposals to provide the redesigned
6 services with contracts awarded based
7 on the best proposal.

8 Let me just quickly review where
9 we are now. The modernization of our
10 case management network is fully
11 underway, following a period where we
12 worked very carefully with providers to
13 ensure a smooth and successful
14 transition. We began our modernization
15 efforts with case management because it
16 is the foundation for in-home services,
17 linking seniors to all other benefits
18 and entitlements. And it's important
19 to note that even in this very
20 difficult fiscal climate, DFTA invested
21 an additional 5.6 million dollars into
22 the case management system -- an
23 unprecedented 36 percent increase from
24 16.7 million in '08, to 22.7 million in
25 '09 -- so that more older adults can

2 continue to receive these services and
3 be supported in living in their home
4 and in their communities, which is what
5 older adults want. We now have close
6 to 22,000 older persons receiving this
7 kind of comprehensive in-home
8 evaluation, services and monitoring.
9 As for home delivered meals,
10 after issuing an RFP, we are now in the
11 process of negotiating contracts to
12 provide that service. The re-design of
13 the home delivered meals systems
14 strengthens the service infrastructure,
15 so that as more older adults require
16 home delivered meals, the system will
17 have the critical capacity to grow.
18 Other key restructuring elements, as
19 you know, include the provision of
20 client choice so that seniors who

21 choose, may choose between a frozen or
22 hot meal and meals that suit both their
23 religious dietary needs or health
24 needs, particularly for those who are

25 diabetic.

2 Turning now to senior centers, we
3 expect to issue the Request for
4 Proposals to provide senior center
5 services shortly. Here, too, our
6 intention is to strengthen the center
7 network and expand individual center's
8 capacities to foster health and
9 wellness. Many centers have already
10 started or enhanced their approach to
11 wellness. Many of you are here in the
12 audience. These forward-looking
13 centers offer cultural and creative
14 arts programs, health promotion
15 activities that range from games that
16 keep our brains active, like using the
17 Wii or Soduko, to walking clubs and
18 exercise classes to name just a few of
19 the options that seniors are being
20 offered. These current initiatives
21 speak to the potential of senior
22 centers to be on the cutting edge of
23 community efforts to promote the
24 physical, mental and creative health

25 for today's older adults. Our goal is
2 to have every senior center function as
3 a health and wellness center for
4 seniors in their community.
5 At this point, I just want to
6 briefly highlight the Mayor's
7 initiative, Mayor Bloomberg's
8 initiative for the City of All Ages.
9 DFTA, in our modernization, is just one
10 part of this initiative. The vision
11 behind the All Ages is to support and
12 promote positive living for people of
13 all ages and abilities throughout our
14 city -- a truly livable City.
15 We are working towards this
16 vision through modernization, but also
17 in other ways as well. We continue to
18 work with our sister City agencies and
19 other organizations to ensure that they
20 are involved in developing programs to
21 foster positive aging. To mention just
22 a quick few examples, we are partnering
23 with many Health and Hospitals
24 Corporation facilities with our senior

25 centers to promote wellness, targeting
2 diabetic patients. Participating HHC
3 hospitals will refer seniors to health
4 promotion programs at a senior center
5 and monitor the impact of their
6 participation. We are also continuing
7 collaborations with the Department of
8 Mental Health and Mental Hygiene and
9 the Mental Health Association of New
10 York City to reach senior centers and
11 help them identify seniors in their
12 program that may show symptoms of
13 depression. Educating people about
14 depression, screening them and
15 assisting them in getting them into
16 treatment early is crucial.
17 DFTA has also been working with a
18 team of New York City leaders on a task
19 force to address diabetes-related
20 health disparities affecting Hispanic
21 older adults, and we are active
22 partners in the Harlem Healthy Eating
23 and Living or HEAL Initiative.
24 As you know, the Department

25 sponsors every year our very successful
2 Age in Action event in Flushing Meadows
3 Corona Park in Queens. I recognize
4 that many of the senior centers that
5 participate. Over 10,000 seniors
6 attend this event which, again, has a
7 focus on promoting health and wellness.
8 Our Senior Stroll, where every
9 year we bring all of our walking clubs
10 together to celebrate their
11 achievements, was held just a few weeks
12 ago in Staten Island, and we had over
13 2,300 seniors from across the five
14 boroughs join us to really demonstrate
15 the evidence that seniors are embracing
16 healthy lifestyles and are eager for
17 opportunities that will help them
18 practice healthy habits and promote
19 positive aging.
20 Now let me just end by sharing
21 with you some award-winning initiatives
22 that we're very proud of at the
23 Department For The Aging. Our
24 Grandparents Resource Center won an

25 achievement award from the National
2 Association of Area Agencies for a
3 project that educates staff of
4 government agencies here in the City,
5 about the special needs of grandparents
6 as caregivers, so that the grandparents
7 can better navigate these complex
8 systems.

9 Our Foster Grandparent Program
10 also won an award from the n4a and
11 Metlife for its leadership in
12 developing volunteer program best
13 practices. And our Alzheimer's and
14 Caregivers Resource Center won an
15 achievement award for its collaboration
16 with the New York City Police
17 Department Missing Persons Bureau, on a
18 project to inform family caregivers
19 reporting missing relatives about
20 services available for Alzheimer's
21 patients and their caregivers.

22 This a good time to remind you
23 that on Halloween, on October 31, we
24 will be holding our 24th Annual Mayoral

25 Conference on Alzheimer's right here in
2 Brooklyn at the Brooklyn Marriott. I
3 urge you to join us. There's material
4 about our Alzheimer's Conference on the
5 table outside.
6 And let me close just by
7 reminding you that we are facing an
8 unprecedented fiscal crisis, and as
9 we've seen in the news, many older
10 adults living on fixed incomes have
11 been severely affected by this economic
12 downturn. We have multiple sources of
13 assistance available not only at the
14 Department For The Aging, but in other
15 City agencies, to help older adults of
16 low or middle income, particularly in
17 this time of crisis. And I urge you to
18 reach out to our agency and spread the
19 word among your communities, programs
20 like SCRIE, the Senior Citizens Rent
21 Increase Exemption Program, that helps
22 older adults avoid increases in their
23 rent. The eligibility for SCRIE
24 increased from 27,000 to 28,000, so

25 that more people, more households will
2 be eligible. We want to make sure that
3 seniors know about these programs.
4 With winter just around the
5 corner, we, again, want to remind
6 people about the very important HEAP
7 program, the Heat Energy Assistance
8 Program that, again, helps older adults
9 with paying for their either oil or
10 electrical, if that's involved with
11 heating. Again, let's spread the word.
12 No one should suffer when these
13 programs are available.
14 And just recently we've read in
15 the New York Times, a very
16 disheartening story about older adults
17 who are having to choose between buying
18 their medication because they just
19 can't afford it, given the increases in
20 prices. We have at the Department,
21 assistance available in every borough
22 through 18 sites to help older adults
23 learn about Medicare and Medicare Part
24 D, but also, to remind everyone that

25 the enrollment period for Medicare is
2 beginning this November 15 and ends
3 December 31. So anyone who is
4 currently on Medicare D and wants to
5 switch plans, this is the time to
6 consider doing so. And, again, we have
7 help available directly in our offices,
8 but also, at 18 sites across the five
9 boroughs.

10 So let me just close, again, by
11 sharing with you that our vision is to
12 continue to support an agency and our
13 not-for-profit community, without whom
14 we could not provide any of our
15 services, that's efficient and
16 sensitive to the increasing population
17 and is able to adapt to the fiscal
18 situation that we're facing.

19 But I am confident, given my
20 experience with our partners in the
21 not-for-profit community, that working
22 together, we can overcome these
23 difficult times.

24 Let me thank you, and I look

25 forward to hearing your testimony. I
2 turn this back over to Assistant
3 Commissioner George Romero.
4 ASST. COMMISSIONER ROMERO:
5 Thank you, Commissioner. The panel is
6 consistent of the Department's
7 Executive staff, are hear to listen to
8 the comments made by the speakers.
9 This is not a question-and-answer
10 forum. I would like to remind today's
11 speakers that to provide all the
12 individuals with an equal opportunity
13 to speak, each registered speaker is
14 allotted five minutes to present their
15 oral testimony. The electronic timer
16 will turn red, signaling that your
17 speaking time has expired.
18 If anyone here would like to
19 testify and has not registered, the
20 onsite registration will close at about
21 10:50. Also, please leave a copy of
22 your testimony at the front table with
23 the panelists. If you do not have a
24 copy to leave today, please pick up a

25 DFTA self-addressed envelope and mail
2 us a copy of your testimony.

3 Our first speaker today is the

4 Brooklyn Borough President, Mr. Marty

5 Markowitz.

6 BOROUGH PRESIDENT MARKOWITZ:

7 Thank you very much for being here

8 Commissioner, Assistant Commissioners,

9 for being here at Brooklyn Borough

10 Hall. Commissioner Méndez-Santiago is

11 a proud Brooklynite, so it's always a

12 pleasure to welcome you back home.

13 That's for sure. Rabbi Weiner, always

14 good to see you, and Jerry, always good

15 to see you.

16 First off, your opening comments,

17 there would be many in our community

18 that would disagree with your

19 assertions, I have to tell you. Not

20 everyone here are happy campers with

21 your policies and the actions of DFTA

22 over the last year.

23 I must tell you that there are

24 many voices, those of us that serve

25 senior citizens that feel quite to the
2 contrary. Some of the work that the
3 Department has done we salute, but
4 there is other work that we feel you've
5 come up significantly short on.
6 Especially that espoused by policy know
7 it all Linda Gibbs, Deputy Mayor, who I
8 believe is someone that all of us must
9 watch very, very carefully, and I'm
10 sorry to have to share that with you,
11 but she really frankly is tone deaf
12 when it comes to the voices outside of
13 her own policy beliefs.
14 Anyway, let me take this
15 opportunity to address a problem that I
16 feel we have, and that is the Borough
17 President's right to decide where
18 discretionary funding goes. I must
19 tell you that Borough Presidents, as
20 members of the Board of Estimates --
21 that's before me, Commissioner, and
22 before you -- used to have a right to
23 appropriate funding to nonprofits that
24 they felt best addressed the aging

25 concerns in their boroughs.
2 In the late 1980s, most Borough
3 Presidents decided to streamline the
4 process by moving this pool of funding
5 to the Department For Aging, your
6 Department, with the understanding that
7 DFTA will appropriate funding to
8 organizations according to a Borough
9 President's choosing. This was common
10 sense, because who knows the needs of a
11 borough better than the Borough
12 President, and if the Borough President
13 doesn't know the needs better, then he
14 or she shouldn't be Borough President.
15 Even after the Board of Estimates
16 was abolished in the 1990s, this
17 agreement continued, until this year,
18 when DFTA and the Deputy Mayor of
19 Policy know it all Linda Gibbs decided
20 that Borough Presidents are not
21 entitled to decide which senior
22 organizations get funding.
23 And I have to tell you,
24 Commissioner, as much as I like you,

25 and I do, this is an outrage. It's an
2 outrage, and we're not going to take it
3 quietly. Not any Borough President.
4 Borough Presidents knows the ins
5 and outs of each organization that
6 receive funding and understand how
7 these organizations provide and impact
8 the communities they serve. These
9 organizations are the bedrocks of our
10 community, and the smallest change in
11 funding makes a huge difference.
12 Funding for senior organizations has
13 been dwindling for years, even as the
14 need for these same services has
15 increased.
16 Now when it comes to seniors,
17 every borough has different needs.
18 There is no way you can tell me that
19 senior services in Brooklyn are the
20 same as in every other borough, because
21 programs are designed to take into
22 account different social and cultural
23 needs. Therefore, discretionary
24 funding rights should remain with the

25 Borough President's office. We're
2 going to fight this with every ounce
3 that we have, I'm just letting you
4 know, and frankly, I don't care if you
5 feel my choices are right or wrong. I
6 have a right, independent of you and
7 independent of Policy Czar Linda Gibbs.
8 I have an absolute right to fund senior
9 programs, just like the state
10 legislators, whose money you cannot
11 touch, have a right to select what
12 senior programs they want to support,
13 and you can't touch the City Council
14 allocations. The only one that you're
15 trying to grab is the money of the
16 Borough Presidents, and we're not going
17 to let Linda Gibbs get away with it.
18 We're going to fight her tooth and
19 nail.
20 How dare she encroach upon our
21 rights as an independent elected
22 official in this borough to allocate to
23 our senior groups who we believe should
24 get funding, regardless of what your

25 belief is.

2 Now I'm also grateful to have the
3 opportunity to speak to you about other
4 critical needs facing older
5 Brooklynites during DFTA's senior
6 service modernization efforts.

7 Brooklyn has the highest concentration
8 of seniors in New York City, and
9 according to the New York Academy for
10 Medicine's Age Friendly Finding Report,
11 this population will grow significantly
12 in the next decade.

13 All of our guests should know
14 here that the fastest growing
15 population today is the 55 to 63 year
16 old. So guess what, the senior years
17 are coming around real fast. Overall,
18 the number of people over 60 in New
19 York City increased 1.25 million in
20 2000, to 1.35 million in 2006. That
21 population, get this, is projected to
22 grow at 1.84 million by 2030, a 47
23 percent increase from the 2000 figure.

24 As our residents grow older, many

25 of them are choosing to stay in
2 Brooklyn, because as you know, there's
3 no better place to spend one's sunset
4 years. That's for sure. But there are
5 many challenging issues that we need to
6 address, so that our older residents
7 can live with dignity in their twilight
8 years.

9 Seniors are deeply affected by
10 current modifications to senior
11 programs. Some are on waiting lists
12 for the Meals-On-Wheels Program at
13 centers that never had a wait list
14 before. This is unacceptable. Frail
15 and disabled seniors are dependent on
16 those meals. Some don't have a
17 caregiver to cook for them. Knowing
18 that they can depend on meals being
19 delivered to them gives them the peace
20 of mind that they deserve. It's a
21 shame that any of them have to worry
22 about receiving the meals that they
23 need.

24 Other seniors are deeply affected

25 by the consolidation of case management
2 contracts. In last year's testimony, I
3 addressed my concern over Deputy Mayor
4 know it all Gibbs' policy of collapsing
5 the 12 Brooklyn contracts into seven
6 because the service areas are too big
7 and some seniors may fall through the
8 cracks, and that, Mr. Commissioner, is
9 exactly what has happened.
10 Recently 3,500 homebound seniors
11 citywide were undercounted according to
12 the providers that gave me that
13 information. Since the consolidation
14 of contracts, case management agencies
15 are seeing ratios like 130 senior cases
16 for one case worker. A normal case
17 load before this consolidation was 65
18 seniors to one case worker. Under
19 current conditions, case workers cannot
20 possibly give seniors the individual
21 attention and care they need. It's
22 that simple.
23 In my testimony last year, I
24 asked DFTA to do a rigorous evaluation

25 of the new case management system.

2 Specifically I asked that evaluators to
3 track the clients that are currently
4 being served to see how many have
5 disruptions in service, with special
6 attention being paid to seniors in
7 poverty, members of minority groups,
8 and immigrants. I would like to know
9 if DFTA has done this. And if so, we'd
10 like to see that report.

11 We know that the number of
12 seniors in Brooklyn is increasing, so
13 how will these same case management
14 agencies, which are already
15 overwhelmed, be able to keep up?
16 DFTA also promised these case
17 management agencies additional funds to
18 hire more case workers to address the
19 problem, but we are being told there is
20 no money. I just heard you say 5 point
21 something million dollars has been
22 allocated. Funny thing is,
23 Commissioner, those that are expecting
24 that money coming, not a penny yet.

25 They haven't seen a penny. So there's
2 something going on here. You can
3 announce it, but they're saying they
4 haven't gotten it. Something is wrong
5 here.

6 I urge the Commissioner to find a
7 way to help these case management
8 agencies. Seniors deserve to get the
9 services they need in a timely manner.

10 We all agree on that.

11 Senior citizen directors -- and I
12 know many of them well -- are feeling
13 the pressure of 2.5 percent cut to
14 their budgets, but at the same time,
15 they're also paying, as you know,
16 higher rents. As a result, more of
17 their income must go towards rents and
18 less towards services, and that will
19 hurt services for sure.

20 Seniors with no extended family
21 are at risk for depression because they
22 become socially isolated, and that's
23 why senior centers are so very, very
24 important. We must make sure that all

25 senior centers remain open. I urge
2 Deputy Mayor Gibbs and DFTA to slow
3 down the process and not ask the 329
4 senior centers to reapply for their
5 contract at the same time. This is not
6 the time to do it. We've urged it
7 before on other issues. Again, tone
8 deaf. We're asking again. This is not
9 the time.

10 I want to thank DFTA for delaying
11 the release of the senior citizen RFP
12 and urge you not to release it until
13 DFTA has figured out the quirks in your
14 change over in case management and in
15 the Meals-On-Wheels Program. It's only
16 right, administratively, that before
17 you move on to that, get this working
18 right. It would be a mistake to rush
19 through the senior center RFP process
20 on a large scale in the middle of
21 budget cuts. It's not the time to do
22 it.

23 I also urge the Mayor and City
24 Council and DFTA to find a way to keep

25 NYCHA senior centers open. That's very
2 important. Another critical issue for
3 all Brooklyn, especially our seniors,
4 is affordable housing. Now I'm almost
5 a senior myself. It depends what age
6 we say seniors. If you're 62 and
7 older, I'm a senior. If you're 65, I'm
8 two and a half years away. Whichever
9 way you look at it, I'm almost there.
10 For sure, I'm almost a baby-boomer as
11 well. But the need for affordable
12 housing for seniors is becoming, as we
13 know, day by day, more pronounced.
14 We need to be as creative as
15 possible in order to produce more
16 affordable housing for our seniors. We
17 need to create more public-private
18 partnerships that earmark a certain
19 number of units on lower floors, and I
20 must tell you, in my advisory capacity
21 here, any major development that comes
22 through this door where we fight for 20
23 percent affordable housing, I tell each
24 developer to set aside some units for

25 the senior population, especially on
2 the ground or on the second floor, and
3 some of them have done it, but we need
4 a lot, lot more.
5 As for seniors that want to stay
6 in their current home, we need to make
7 sure they know about existing programs
8 that help them lower their utility
9 bills, and I would suggest, if
10 possible, that maybe there's a mailing
11 that can be done from the Department
12 with the help of the Mayor's office,
13 some sort of mailing to the senior
14 population, big print, just to let them
15 know if they have a problem with the
16 fuel oil and electricity this winter,
17 here's where you can go, because not
18 every -- a lot of seniors don't come to
19 centers. They're not able or they come
20 irregularly. So it's important that we
21 reach the senior population directly,
22 and guess where that is? At home.
23 That's for sure.
24 There are programs out there that

25 provide affordable heating oil for
2 seniors on a fixed income, perform
3 weatherization services and replace
4 appliances with energy efficient, as
5 you know.

6 After these assessment are done,
7 senior homeowners should have a
8 significant savings, and therefore, we
9 have to do everything we can to bring
10 it to their attention. We must make
11 sure that seniors are aware of these
12 programs as fast as we can, and that's
13 why I'm urging DFTA to work with
14 community housing organizations to get
15 the word out, especially to all of the
16 senior homeowners. Perhaps DFTA could
17 work with utility companies. Guess
18 what, they all send out their bills,
19 and that's a great place to have that
20 printed material with a special note on
21 the envelope, "attention seniors" so
22 they know there's a special mailing in
23 their for them.

24 Now, unfortunately, some seniors

25 are facing home foreclosures due to
2 predatory lending practice. Now
3 Brooklyn is not immune to that. Others
4 have a monthly mortgage payment higher
5 than their fixed income. These folks
6 need to know that there are
7 organizations out there that can work
8 on their behalf to negotiate with banks
9 to lower their mortgages or to work
10 with them to make monthly mortgage
11 payments at a level that they can
12 afford so they can keep their homes.
13 Transportation -- I'll end it on
14 this -- I want to applaud the MTA for
15 increasing the number of accessible
16 subway stations from 14 to 53 out of
17 more than 150 subway stations, but I
18 urge DFTA to work with the MTA to
19 approve Access-A-Ride. It's still not
20 performing as well as it should. And I
21 think you would agree with us on that.
22 This is an ongoing problem.
23 Para-transit vehicles are still late
24 for their scheduled pick up times. The

25 impact to seniors, more than 400
2 seniors in New York are disabled, as
3 well as individuals with disabilities
4 tremendously. They rely, as you know
5 and I know, on Access-A-Ride to get to
6 doctors' appointments. Very important
7 that we should reduce the time that
8 they wait to certainly less than 15
9 minutes.

10 In my testimony last year, I
11 asked DFTA how it planned to prepare
12 baby-boomers for retirement in the very
13 near future, and let me thank you,
14 Commissioner -- see, I can thank you
15 too -- thank you for helping us
16 coordinate a Baby-Boomer Retirement
17 Fair that we'll be holding in Borough
18 Hall next week, and I hope that will be
19 the start of annual events like this to
20 reach more and more baby-boomers.
21 As some may know, probably you
22 would all agree that maturer residents
23 of New York have earned the right to
24 get the attention from government that

25 they deserve. And we have to be
2 creative, and the Commissioner just
3 mentioned that we're in tough times.
4 We are in tough times. But the onus,
5 the onus of the reductions of services
6 that, unfortunately, I have a hunch are
7 going to serious, should not be ending
8 on the backs of those that gave so much
9 and who are least able to handle those
10 cuts, those service reductions, and
11 that's our senior population. We owe
12 everything to them. They made this
13 City great and they've allowed us to
14 make our contributions to make this
15 City great.
16 I thank you very, very much,
17 Commissioner. Ingrid Alexander, I
18 thank you. You've served us well here
19 at Borough Hall, and I have to say
20 bye-bye. She's decided to leave the
21 Republic of Brooklyn and will be a new
22 resident of Florida and a job there,
23 and I wish you well. Why you would
24 leave Brooklyn I haven't got a clue,

25 but she tells me that she likes a
2 warmer climate year round, and I guess
3 I have to understand that. But I wish
4 you good luck. You've been tremendous.
5 And Mary Powell Thomas, my person in
6 charge of human services, she might be
7 here somewhere, but I want to thank her
8 as well.
9 Commissioner, thank you and your
10 colleagues. I appreciate it. I didn't
11 mean to be too harsh, but if you were
12 in my shoes, you'd understand how
13 annoyed and angry I am at this type of
14 what I think is erroneous policy
15 decisions, whittling away the role of a
16 Borough President in our borough. It
17 just feeds in, Commissioner, with those
18 that say that Borough Presidents are
19 meaningless. The more and more you
20 take away that which we can do, the
21 more and more it fits the profile of
22 exactly that there are some who would
23 like to obliterate this position.
24 Only we know how -- the City

25 Council members only see their own
2 districts. They don't care from two
3 blocks away, and that's the way it
4 should be, because they care about
5 their districts. A Mayor sits over
6 there at City Hall and at times, there
7 have been mayors that didn't pay
8 Brooklyn the attention that we
9 deserved. Mayor Bloomberg has not been
10 in that category, thank God, but the
11 Borough President's job is to focus in
12 like a laser on the entire borough and
13 look at areas of Brooklyn that may be
14 under served, that even your Department
15 has overlooked. It's very possible.
16 That's our job. That's why we're
17 elected here. And I resent any effort
18 by Ms. Gibbs or anyone else to make a
19 decision that what they think is best
20 for my borough when I have the right
21 because I've been elected and she has
22 not been elected. She has no right to
23 make that decision. If she wants to,
24 let her run for office.

25 Thank you very, very much.

2 Sorry, Commissioner.

3 COMMISSIONER MÉNDEZ-SANTIAGO:

4 I just, again, want to thank you,

5 Mr. Borough President. You've been a

6 career long advocate for older adults.

7 I thank you for your comments. We take

8 them to heart, and we share your

9 comments in losing Ingrid and the time

10 she's been here. She's been very

11 effective, and you've already made note

12 of it. I just wanted to announce that

13 we've been joined by another member of

14 our Advisory Committee, Rabbi Weiner.

15 Thank you, sir.

16 BOROUGH PRESIDENT MARKOWITZ:

17 Thank you, Commissioner.

18 ASST. COMMISSIONER ROMERO: Our

19 next speaker is Alonzo Jordan, Office

20 of State Senator Malcolm A. Smith.

21 MR. JORDAN: I say good

22 morning. My name is Al Jordan. I'm a

23 volunteer liaison for State Senator

24 Malcolm A. Smith in Queens. First, I

25 want to just thank the panel for having
2 me -- for allowing me to come in and
3 speak this morning, and I see our
4 Borough President -- well, Brooklyn
5 Borough President has run out. I
6 wanted to commend him for the last time
7 I was here for a hearing, I did notice
8 the pitch for former Congressman
9 Shirley Chisholm being outside. I was
10 kind of overwhelmed when I saw that,
11 but knowing the way Councilman Charles
12 Barrons speaks about pitches in City
13 Hall, so I really commend our Borough
14 President for having this astounding
15 woman, to say the least, here in these
16 great halls of Borough Hall.
17 I come here this morning with
18 somewhat heavy heart. I didn't prepare
19 any actual written testimony. Just
20 more of a follow up. As you have a
21 copy of Councilman de Blasio's
22 statement in the article of the
23 Brooklyn I believe it's The Eagle
24 several weeks ago concerning the

25 shutting down of some of the senior
2 centers. Over in Senator Smith's
3 district in Queens, we've been doing a
4 lot for our seniors over there from a
5 state perspective, and every year the
6 Senator has a program that he does
7 outreach for the seniors where we
8 invite them in and give them we call it
9 Senior Appreciation Week, and we show
10 appreciation by inviting them to
11 several functions with some of the
12 local councilmen and other elected
13 officials of the neighborhood. We
14 provide lunch and various other
15 services to the seniors.

16 But one of the first things that
17 is first and foremost -- just to
18 piggyback from the Borough President --
19 that was heavy on the Senator's heart
20 some years ago was the Access-A-Ride,
21 and he was very irate about the
22 services that the seniors were getting
23 over there because we got a lot of
24 complaints into the office. The person

25 who chairs that or directs that
2 particular department now, her name is
3 Tye White. It's 718-528-4290. She's
4 in charge of the senior programs
5 underneath that office now.
6 And also, I wear a couple hats.
7 As a minister, going out doing various
8 works through the various churches that
9 we have, some of the complaints from
10 some of the seniors was also the
11 Access-A-Ride. Now they've improved
12 since Senator Smith was a little bit
13 upset about that, but there's still
14 some complaints.
15 One time we had a senior over
16 here in Brooklyn on Utica Avenue, one
17 of the functions. The two seniors
18 there had to wait almost an hour just
19 for the senior Access-A-Ride. So I
20 stayed, being a young man, to sort of
21 offer some sort of protection for them.
22 And there was also in the Bronx, an
23 area over there where the seniors were
24 having a problem.

25 Also, the Meal-On-Wheels. We
2 have a couple of deacons that are doing
3 some of those services over there in
4 the Bronx area from that perspective.
5 And some of the seniors are not getting
6 their meals, and I think I've seen,
7 Commissioner Santiago, when you were
8 over by Community Board 12 some years
9 ago, and you were there, Councilman
10 Robin Jackson was there and I was
11 there, and you spoke about the
12 Meals-On-Wheels years ago. So I know
13 those meals are vital. So anything
14 that your Department and your
15 jurisdiction under your purview can
16 offer to the seniors. Keeping that
17 open to them is very vital.
18 And also, the senior -- as I said
19 with the Access-A-Ride, anything that
20 can be improved on the timing of that.
21 And some of them -- I guess it's I
22 don't know how you would put it.
23 Everybody has -- they have bad apples,
24 but some of them with their parking.

25 There's one individual lady, she's a
2 wheelchair, and being a senior, some
3 things really stand out. I remember in
4 the Louisiana incident there was a
5 senior that was pulled to the side and
6 left to throw a blanket over and just
7 left to die, but one of the things that
8 disturbed me as I was waiting from my
9 family to come out, is that one of the
10 seniors was there in a wheelchair, and
11 with the Access-A-Ride -- I mean this
12 was during like the month of February,
13 January, it was bitterly cold outside,
14 and it took this person at least 15 to
15 20 minutes to get this senior into the
16 van, which I thought was, to say the
17 least, shouldn't have happened.

18 Also here, just to follow up with
19 the other side, I had got the proposed
20 consolidated plan for 2009 for
21 Department of City Planning for the
22 City of New York, and I looked in
23 there, and most of the things that
24 concern the senior housing were done by

25 US census which dated back to 2000,
2 which kind of peaked my interest. I
3 said well, it's 2008 now, soon to be
4 2009. But I see with your program,
5 you've done a 2000 to 2030. So I've
6 always thought there was a 10-year
7 plan, 20-year plan, now it seems like
8 there's a 30-year plan, if the seniors
9 can make it that far.

10 But I'm not sure how that stands
11 as far as accessing the seniors' needs
12 in the community, you know, going back
13 to 2000. You know, I see your graph
14 here, which is very -- I'm at a loss of
15 words here. I guess it gives a better
16 breakdown. I'm just worried that the
17 seniors, being 2000 and this being
18 2008. But I saw the breakdown there.

19 That was one of my concerns. I think
20 from Rabbi Joseph Garber, when he was
21 testifying for the term limits, had
22 mentioned something that he had read
23 about some of the outdated information
24 that was in there.

25 But I guess it's pertinent. You
2 know, if you go from 2000 to 2030, it's
3 more of a projection thing than -- I
4 mean, I guess that's how it should be.
5 Excuse my ignorance on that part.
6 And pretty much that was it that
7 we had from the Senator's office and as
8 also being a lay person in a church
9 concerning the seniors, and I just
10 thank you very much for your time and
11 thank you very much.

12 COMMISSIONER MÉNDEZ-SANTIAGO:

13 Thank you. Please extend our
14 appreciation to Senator Smith.

15 ASST. COMMISSIONER ROMERO:

16 Thank you. Richard Kuo, Homecrest
17 Community Services, Inc.

18 MR. KUO: Good morning,
19 Commissioner and Panelists. My name is
20 Richard Kuo. I'm the executive director
21 of Homecrest Community Services. We
22 operate two senior centers in southern
23 Brooklyn; Sheepshead Bay and
24 Bensonhurst, serving over 3,000 senior

25 citizens, most of whom are
2 Asian-American. We were established in
3 1997 as a grass-roots effort by local
4 residents, and see many of our members
5 in today's audience.

6 We have testified before this
7 body many times over the past 10 years,
8 urging the City to fund new senior
9 centers in Brooklyn for the rapidly
10 emerging Asian-American elderly
11 population in the borough. On August
12 5, 2008, we sponsored, along with the
13 Brooklyn Borough President Marty
14 Markowitz and the Asian American
15 Federation, the first Asian American
16 Senior Service Legislative Breakfast
17 right here in Borough Hall. I want to
18 thank the Commissioner for his
19 thoughtful remarks concerning that
20 conference and for his recommendations
21 for the future.

22 We discussed, among other things,
23 the dramatic growth of the
24 Asian-American elderly in New York City

25 since the 1990 census, and outlined a
2 lot of the social service needs of this
3 very, very vulnerable group. For
4 example, we noted that Asian elderly
5 have among the highest poverty rates in
6 the entire City of any group at 24
7 percent. That is one out of four Asian
8 elderly are below the poverty line,
9 which is much higher than the national
10 average of 10 percent and much higher
11 than the New York City average of 18
12 percent. So that population is very
13 vulnerable from an economic point of
14 view.

15 The other major issue is that
16 many of the Asian elderly are low in
17 English proficiency. That is, the
18 Asian elderly 65 years or older have an
19 LEP rate, which is Limited English
20 Proficiency rate of 73 percent,
21 compared to 27 percent for all older
22 adults in the city. So that's an
23 extraordinary number. It's like three
24 times the level of worse familiarity

25 with the English language.
2 So what happens with this?
3 Language difficulty and lack of
4 information are key barriers preventing
5 this target group from accessing needed
6 social services and public benefits.
7 Asian elderly need senior center
8 services which are linked culturally
9 and linguistically competent to meet
10 their needs.
11 In spite of our efforts and track
12 record serving the Asian elderly over
13 the past 12 years, we still have not
14 been awarded a DFTA senior center
15 operating contract. There are about
16 300 or so DFTA funded senior centers
17 citywide, but there are no
18 Asian-American sponsored senior centers
19 funded by DFTA in the Borough of
20 Brooklyn. The reasons for this are
21 varied and many which I'm not going to
22 go into today.
23 However, on the other hand, as
24 Marty said, there's a good side to

25 this. I am encouraged by DFTA's
2 efforts over the past year to seek to
3 modernize the City's senior center
4 network, by encouraging the promotion
5 of health and wellness and other new
6 activities.

7 As important, the upcoming RFP,
8 Request for Proposal process for the
9 funding of DFTA senior center operating
10 contracts will, in my opinion, open up
11 the City's procurement process to allow
12 for possible City funding of new and
13 different senior centers, such as ours,
14 which propose to serve a nontraditional
15 and highly vulnerable target group of
16 seniors.

17 We support the City's goal to
18 change its funding patterns to adapt to
19 changing circumstances within the
20 senior community. Thank you.

21 ASST. COMMISSIONER ROMERO: Dean

22 Rasinya, Community Board 10.

23 MR. RASINYA: Good morning. On

24 behalf of Community Board 10 in

25 Brooklyn, I am pleased to present the
2 following testimony which was developed
3 by Community Board 10's Senior Issues
4 Committee and unanimously approved by
5 Community Board 10 at our monthly
6 public meeting on October 20, 2008.
7 The growth of the senior
8 populations in Community Board 10, in
9 which 25 to 35 percent of the
10 population is over 60, the demand for
11 services is constant. At present, our
12 community is served by three senior
13 centers and one satellite center in a
14 senior housing complex.
15 The current proposal to transform
16 senior centers into Healthy Aging
17 Centers is an excellent beginning. In
18 envisioning the redevelopment of senior
19 centers as they evolve to meet the
20 changing needs of the older population,
21 we were struck by the challenges these
22 centers face in meeting the diverse
23 needs of the growing elder population
24 which spans several generations. We

25 defined these groups as follows: Newly
2 retired, 60 plus senior who is active
3 and still working or volunteering; the
4 established and healthy older person,
5 who is fully enjoying retirement and
6 interested in leisure activities; the
7 aging in place frailer elder, who may
8 need care services and supports to
9 remain independent in the community;
10 and finally, the homebound impaired
11 elderly, who needs daily home care and
12 personal care service.

13 Our committee concluded that the
14 senior centers as they function today,
15 have the impossible task of trying to
16 serve these four very distinct groups
17 with one program model. Other
18 generational programs, such as teen
19 centers, latency age or early childhood
20 programs, typically serve 10 year
21 cycles in an individual's life. The
22 traditionally structured senior center
23 is often required to cover more than
24 three decades in a person's life. This

25 may be part of the reason nearly half
2 of the Department's 325 senior centers
3 throughout the five boroughs are under
4 utilized.

5 The senior centers cannot serve
6 these different age groups with their
7 different needs with one size fits all
8 programs. We recommend that more
9 targeted programs be developed for each
10 of the four age groups previously
11 identified.

12 And I'd like to add a little
13 something to the written testimony, and
14 that when I say specific programs, such
15 as just an exercise program, is
16 wonderful. But the same exercise
17 program may not be appropriate for all
18 those four groups. So even when it
19 comes down to diverse programs in the
20 center, that diversity needs to be
21 further broken down by age group, so
22 it's appropriate for the seniors
23 participating.

24 For the newly retired senior,

25 ambience and activity will attract them
2 to a center. They don't want to be
3 labeled old just yet, and they still
4 feel and want to be productive. The
5 center would need to provide continuing
6 education, physical activities and
7 possible outlets and sources for
8 part-time work or meaningful volunteer
9 experiences.

10 The center could be a way to meet
11 people and make new friends and have
12 meaningful interactions. These seniors
13 want to catch up on all the things they
14 never had the time to do and learn. It
15 is a very exiting and energized time,
16 and the center must be a vibrant place
17 to keep their attention.

18 For the established retiree, the
19 center has a different meaning. These
20 seniors have done it all. They
21 traveled. They took their courses.
22 They explored the City, and now it is
23 time to relax. These seniors are fully
24 transitioned into retirement. They

25 want to be in a comfortable place, be
2 with friends they know, and fully
3 accepted by them. They like the
4 routine of their center, which is
5 comfortable and predictable. They get
6 their main meal there, so they no
7 longer have to really cook. It gives
8 their day structure. It is their
9 safety net, their community and their
10 fun. They would probably be most
11 comfortable with the traditional
12 center.

13 The next group is the aging in
14 place, frailer senior members. This
15 group may have sensory disabilities,
16 including sight or hearing, physical
17 disabilities that affect walking,
18 reaching, carrying or climbing stairs,
19 or may have a decline in memory
20 function. They are still very attached
21 to their center, but it may be harder
22 to get to the center and to fully
23 participate. They may wish the center
24 was smaller, quieter, more intimate,

25 and could move at a slower pace.

2 Although they look forward to the
3 social and nutritional aspects of the
4 center, they may find it exhausting and
5 stressful, because sometimes they can't
6 fully fit in. They sense the
7 impatience of the more energetic
8 members, and wonder if they should
9 continue attending the programs.

10 But being isolated at home is
11 even less desirable than the strain of
12 attending. So they cope in the center
13 they have been attending since their
14 younger years. These seniors need
15 programs which move at a slower pace
16 than the previous two groups.

17 The final group is the truly
18 frail and elderly. This group is, for
19 the most part, no longer attending
20 their neighborhood senior center.

21 Attendance involves more energy than
22 they have. This energy is needed to
23 maintain themselves and get through the
24 standard daily activities. This group

25 needs care and the center must bring
2 these services to them. Creative
3 programs need to be developed to
4 provide intellectual and emotional
5 stimulation for this basically
6 homebound group of community elders.
7 These seniors may need household chores
8 completed for them, handyman services,
9 bill paying services and personal care.
10 Home visits and support services are
11 urgently needed.
12 It is our position that seniors
13 in our community are not a monolithic
14 group. The young active senior needs
15 innovative programs, and the centers
16 and the seniors in the middle need to
17 be comfortable in their center.
18 Finally, the old need hands-on care and
19 support. These are diverse needs for a
20 truly diverse population.
21 Community Board 10 believes that
22 our growing group of younger senior
23 citizens provides a tremendous resource
24 for mentoring programs and for programs

25 to provide home visitation to the
2 socially isolated. Community Board 10
3 welcomes the opportunity to discuss the
4 future of senior centers and to develop
5 mini models to truly serve the diverse
6 needs of the seniors that live in our
7 Community Board.

8 And I'd just like to reemphasize
9 what I just previously stated. We have
10 a tremendously growing younger senior
11 citizen today, and the ones I'm
12 familiar with, even the ones that are
13 fully retired, they want to do
14 meaningful things, and I know
15 throughout the City there are programs
16 where people can volunteer, but many
17 people do not participate in those
18 programs for whatever the reason.

19 To be able to tap into that
20 resource at the local senior center, I
21 think is an untapped resource of
22 tremendously skilled people that may
23 not want to leave their immediate
24 surroundings or their immediate

25 community, but they would most
2 definitely be interested in supporting
3 people, their neighbors who live in the
4 community that they live in. And I
5 think that applies to every community.
6 So I hope that we can really tap
7 into this group. Thank you very much
8 for having us here. For listening to
9 us, and being proactive, even if on
10 some of the things we don't agree with.
11 Thank you.

12 ASST. COMMISSIONER ROMERO:

13 Mark Bones, VISIONS.

14 MR. BONES: First, Commissioner
15 and Assistant Commissioners, I'd like
16 to thank you for the opportunity to
17 testify. My name is Mark Bones, and I
18 am the Brooklyn Outreach Coordinator
19 for VISIONS. VISIONS is an
20 organization that's a not-for-profit
21 that serves the blind and visually
22 impaired. And what we do is we promote
23 the independence of those people, and
24 we've served over 3,000 people in the

25 last fiscal year.

2 For our agency, about 70 percent
3 of the people who we serve are over the
4 age of 60, and they're extremely
5 vulnerable. They are people who are on
6 low and fixed incomes. They're people
7 who do not speak English, particularly
8 in the Borough of Brooklyn. They're
9 people who speak primarily Spanish,
10 Cantonese, Chinese and Russian. They
11 are people who have multiple
12 disabilities and are at a high risk for
13 vision incidents due to age-related eye
14 diseases. Particularly African
15 Americans and Hispanics, who have a
16 higher incidence of diabetes and
17 glaucoma.

18 While VISIONS commends the
19 Department For The Aging in their
20 commitment to reaching out to a diverse
21 elderly population in New York City, we
22 also find within the plan some
23 problems. But, overall, we actually do
24 acknowledge that it recognizes the

25 special needs of a growing elderly
2 population with sensory impairments,
3 and for that we do thank you.
4 In New York City, there are an
5 estimated 34,000 seniors that are blind
6 and over the age of 65, and 217,000 who
7 are visually impaired. So that's about
8 a quarter of a million people, and that
9 number is expected, by 2030, to double
10 to about half a million people, and
11 that's a significant population where
12 the incidents of vision loss will
13 primarily affect them.
14 In addressing the plan, we
15 actually went point by point to deal
16 with some of the questions, and dealing
17 with the first one, how can senior
18 centers become a fundamental component
19 in the development of age friendly
20 communities within their own
21 neighborhoods, we think that DFTA
22 should make a long-term commitment as
23 far as vision loss to the New York City
24 Coalition on Aging and Vision Project

25 and to fund an ongoing resource center
2 on aging and vision.
3 Additionally, you know, with the
4 senior centers, I think that or we
5 think that many of the answers to the
6 questions actually lie within the
7 organization itself. There are a lot
8 of things that senior centers are doing
9 that are excellent and that are really
10 good, but they're uneven. Some senior
11 centers who find they'll be vibrant,
12 they'll be multigenerational, they'll
13 be places that people really can be,
14 you know, they're attractive hubs for
15 information and activities, and others
16 are places where that is less the case.
17 So, you know, ensuring the access
18 to benefits we think is extremely
19 important. By that we mean SSI, food
20 stamps, Medicaid for seniors with
21 vision loss. And with that, making,
22 you know, health a priority in the
23 senior centers. It has to be a place
24 where seniors say, "I have to go

25 there." "If I have any problems, I've
2 got to go there for health, for -- if
3 there's something with my fixed
4 income." They have to be more almost
5 community centers as opposed to just
6 stand-alone centers for seniors that
7 may offer varying levels of service.
8 And with that, creating a diverse
9 roster of speakers from health,
10 educational and arts organizations to
11 provide services to the aging network
12 at no cost, to ensure the coordination
13 with the surrounding community and
14 increasingly draw in a multicultural
15 and multigenerational population into
16 the senior programs.
17 One of the things that -- in a
18 world of more finite resources, one of
19 the things that we are asking for DFTA
20 to push back on, is to not shift to
21 not-for-profits the burden of doing
22 more or even the same with less
23 revenue. These centers can actually go
24 out and they have to do outreach and

25 that will bring the seniors there, but
2 you can't do that if you're losing
3 bodies because you're losing funding.
4 In terms of supporting the aging
5 network, essentially, we can talk a
6 little bit about our organization,
7 VISIONS has lost over \$32,000, plus
8 we're receiving the cuts to DFTA
9 funding. And for us, we ask ourselves
10 how can we expand that outreach that's
11 badly needed? How can we serve more
12 seniors that need this service with
13 fewer dollars? The Good Practices
14 Intergenerational publication should be
15 highlighted, because it's a tool to
16 promote healthy aging, and DFTA should
17 do what it can to focus and partner
18 with other City agencies. For
19 instance, the New York City Department
20 of Transportation can work with DFTA in
21 terms of installing audible pedestrian
22 signals. So going across agencies and
23 doing things that can affect and can
24 really improve the quality of life for

25 seniors and seniors who are losing
2 their vision.

3 And with that, senior employment
4 is also a critical area. The question
5 of where's the financial investment on
6 the City's behalf to inform seniors and
7 providers of the solutions and the
8 equipment, that has proven successful.
9 VISIONS has a workforce job and
10 development placement service that
11 actually has enabled blind seniors to
12 find jobs throughout the community, and
13 that's something that really needs to
14 be supported and that needs to be
15 supported with dollars.

16 As to the final question of how
17 do we use the program to address a
18 diverse population? For us, encourage
19 the hiring and maintenance of staff
20 that reflect the diverse population.
21 Encourage the creation and expand on
22 the creation of partnerships with
23 ethnic based organizations and
24 businesses.

25 You know, for us, the final
2 question is where's DFTA's commitment
3 to community outreach. It's something
4 that really has to happen, and with
5 that, the Borough Presidents have been
6 very supportive of us. So we would ask
7 you to please really look at restoring
8 all the funding distributed by the
9 Borough Presidents.

10 And, in closing, I would ask the
11 Commissioner in this budget crisis and
12 in this time going forward of more
13 limited resources, that you allow
14 VISIONS to become your full community
15 partner and to develop a full
16 partnership with you and your staff to
17 navigate this crisis, and ensure that
18 in a time of more stringent and smaller
19 resources, that our most vulnerable
20 populations are not just cut off and
21 left to deal with the situation on
22 their own.

23 So, again, thank you,
24 Commissioner and Assistant

25 Commissioners, for your time.

2 ASST. COMMISSIONER ROMERO:

3 Paul Curiale, Millenium Development
4 Corporation.

5 MR. CURIALE: Good morning,
6 everyone. Good morning, Commissioner,
7 Deputy Commissioner, Assistant
8 Commissioner, the others on the podium,
9 fellow workers and lay people that
10 represent organizations as Rabbi
11 Weiner, Interagency Council and VISIONS
12 and Homecrest and many others that
13 might be in the audience. You have a
14 quick finger. I thank you for allowing
15 me to testify today.

16 My name is Paul Curiale. I'm
17 Executive Director of Millennium
18 Development. The sponsoring
19 organization of Abe Stark, Midwood and
20 Vandalia Senior Centers. Our agency
21 also provides services to over 30
22 friendship groups in both Brooklyn and
23 Queens. These friendship groups meet
24 in public libraries, meeting rooms of

25 churches and temples, and in outdoor
2 areas such as public parks. We are
3 proud to be a community partner with
4 the Department in our effort to
5 complete the mission of empowerment,
6 independence, dignity and the quality
7 of life of all New York seniors, active
8 adults or older adults.
9 In our support also of families,
10 there are information services,
11 advocacy, education, coordination, and
12 delivery of services. As a service
13 provider in this great City, I share
14 the concern of my colleagues and fellow
15 community-based organizations in our
16 city, state and government, that we
17 must take action for the growing need
18 of additional financial resources.
19 The population that we represent
20 today is growing in measures that we
21 have never seen ever before. People
22 are living longer. And the system that
23 we are representing is being stretched
24 well beyond the financial resources

25 that are in place. We believe that the
2 Annual Plan Summary that DFTA has
3 released should reflect a much greater
4 resource base. During these hard
5 economic times, we do understand the
6 adults in New York City will be the
7 first to suffer the economic crunch
8 that we now are beginning to feel.
9 Many questions may be asked and
10 fingers might be pointed, but as a
11 service provider, our agency will work
12 with the others I've mentioned and we
13 need still to get the work done. Yes,
14 we do need more shared resources,
15 government dollars and the private
16 sector involvement, to meet the growing
17 demands that our borough and City will
18 face, but providers must be more
19 proactive, working collaboratively with
20 government and other community-based
21 organizations.
22 Each neighborhood in Brooklyn has
23 different needs, as the Borough
24 President mentioned. The communities

25 we service vary in many ways. One
2 belief is that we can all agree on, is
3 that we need to be an effective and
4 productive reflection on how we serve
5 and how we provide those services that
6 can be directed to our elderly clients.
7 Allow me to share with you a
8 recent event that took place last month
9 on September 22 through September 26.
10 Our group coordinated with New York
11 City agencies, such as the Department
12 For The Aging, Department of Health,
13 Department of Transportation,
14 Department of Parks and Recreation,
15 Brooklyn Public Library and the New
16 York City Housing Authority. Our
17 private supporters included City Parks
18 Foundation, local businesses, civic and
19 tenant associations, the community
20 board.
21 During this week we successfully
22 provided a myriad of free activities
23 for all adults 58 years and older.
24 These activities were based upon the

25 six dimensions of wellness. Social,
2 physical, emotional, spiritual,
3 intellectual and occupational. All so
4 important. The activities were well
5 attended and we found many participants
6 were attracted to these activities for
7 a number of reasons. One reason was
8 the type of activity which was hosted.
9 Surveys taken at the activities
10 indicated that participants like the
11 light exercise. They love the
12 activities. They love the fun. In
13 addition, they love the social
14 gathering.
15 Another reason we found is that
16 locations were easy to access, to get,
17 and they were convenient at the times
18 of the day that were convenient for
19 each person individually. We used free
20 space, locations that did not limit us
21 or cost us astronomical rates because
22 of the rising rents that we pay as
23 senior centers. Participants shared
24 the motto of the week, "be active, stay

25 healthy, start now," and it was
2 wonderful to see the different
3 generations of 58 plus join in
4 activities that they can all
5 participate in and enjoy.
6 We have two and sometimes three
7 generations of participants. The
8 challenge is to include all generations
9 of older adults in activities that they
10 feel comfortable participating in.
11 Currently, at our congregate meal
12 sites, I'm sure the same as everyone in
13 the audience, we support all
14 activities, including chorus, ceramics,
15 arts and crafts, outdoor activities,
16 walking clubs, tennis, softball,
17 handball, health and wellness seminars,
18 exercise and fitness, and too, yes, the
19 Wii sports and recreation, computer
20 training, poetry and writing classes,
21 reading, bereavement groups, etcetera,
22 etcetera, etcetera.
23 But each one of these groups, in
24 some way, must be fitted to the clients

25 that they serve. These decisions
2 usually fall on the experienced staff
3 and leadership that each organization
4 puts in place. More economic support
5 is needed, yes, to ensure that older
6 generations' needs are met, while
7 encouraging the younger generation of
8 adults to participate in activities,
9 which will help them in the transition
10 into their service environment.

11 As always, we support the
12 advocacy of our Interagency Council,
13 City and Brooklynwide, standing with
14 them on the points that no funding
15 should ever be cut. Thus, no services
16 ever be reduced. We request that the
17 City and state aging officials continue
18 to listen to us, the service providers
19 in our quest to service the changing
20 needs of our constituencies and include
21 our challenges.

22 I share this one thing, change is
23 hard. It is hard to change a table
24 from one location at the senior center

25 to another and expect that the clients
2 will not give a grumble. But as
3 providers and as professionals all in
4 this room, we must understand that the
5 population is growing and we can make
6 these efforts and change along with the
7 Department.

8 Yes, the Borough President did
9 have his points. He did have his
10 target person, I'd rather not say. But
11 we can do this together. And I share
12 this, too, with the Department. I feel
13 the experience of all the staff of the
14 Department For The Aging goes just
15 beyond -- beyond just what they do in
16 the office. I've seen it firsthand at
17 the various events that the
18 Commissioner mentioned, Age In Action
19 and the Senior Stroll that just took
20 place. If there is one senior that did
21 not get on the bus for whatever reason,
22 they went the wrong way, the entire
23 staff emerges on this as a reason to
24 bring that staffer back home.

25 That same way is translated
2 through our heat emergencies, through
3 our cold emergencies and etcetera, and
4 as an active organization, I appreciate
5 the willingness to also count on us, as
6 you probably are also counted on Rabbi
7 Weiner's group and other groups that
8 are in this room.

9 In closing, I do say thank you,
10 but I also say please continue to
11 utilize our skills, our endeavors and
12 our energy as we serve the New York
13 growing aging population. Of course,
14 with less dollars which we need more,
15 but with a passion to serve each one
16 individually with heart-felt services.
17 God bless you all.

18 ASST. COMMISSIONER ROMERO:
19 Maria Alvarez, Brooklynwide Interagency

20 Council of the Aging.

21 MS. ALVAREZ: Good morning.

22 Thank you for holding this public
23 hearing, and I'm glad to be here in
24 these times. I don't have a prepared

25 statement. I'll submit it later.

2 You know, it's ironic, this is
3 the 30th year that Brooklynwide
4 Interagency Council on Aging is in
5 existence, has been serving seniors
6 from all 17 interagency councils
7 through Brooklyn and the Spanish
8 speaking elderly, and yet, it's the
9 year where our funding is going to be
10 cut dramatically.

11 We depend on that -- what
12 Borough President Markowitz was saying,
13 he's talking basically about us. We're
14 the picture of exactly what he's
15 talking about. We provide services
16 once a month right here in Borough
17 Hall, but also we go to different
18 communities, some communities which are
19 not even covered by DFTA contracts. So
20 we reach independent centers,
21 populations that have been
22 disenfranchised, and providing them
23 with vital information that comes from,
24 many times from the Department For The

25 Aging, from state, from federal,
2 anything that is -- that is pertinent
3 to senior issues.
4 We have different members of the
5 community and elected officials that
6 come every single month, and they find
7 it to be a vital meeting because it's
8 where they gather information, where
9 they can interact with other seniors
10 and other communities. When a
11 community has a problem, we've been at
12 the forefront. When they had the basic
13 banking problems here in New York City,
14 we were one of the pioneers and the
15 people who led seniors in Brooklyn and
16 working with other coalitions to make
17 sure that New York State had a basic
18 banking law.
19 We have given out a lot of
20 information about Medicare, Medicaid,
21 EPIC, social security, all of the
22 things that the Department For The
23 Aging also espouses. We have a
24 wonderful relationship with the

25 Department For The Aging, as Charise
2 Lawrence, who did the community
3 liaison, always comes and gives us the
4 information. Charise is wonderful and
5 she's been a wonderful, wonderful
6 liaison.

7 And I'm really heartened to see a
8 lot of the members of the interagency
9 councils come, the ones that represent
10 their councils come and they're here
11 today, and the thing is, though, that
12 what we've noticed over the years, I
13 mean, this is just the last dramatic
14 thing, but even the contracts, the way
15 they've been being processed have been
16 horrible. We just got our contract
17 from last year, you know, approved and
18 we just received it just like two weeks
19 ago for last year. I mean, I can't --
20 it's just beyond words to say something
21 that, you know -- and I suspect that a
22 lot of smaller organizations that don't
23 have other funding are going to be
24 suffering for all of these things.

25 I mean, so the one thing -- I
2 mean, I know everybody's talking about
3 the modernization and everything, and
4 we had the Department come out and
5 explain everything to us. We provide a
6 forum for everybody to come and speak
7 on these issues and that's wonderful.
8 But the one thing that I wanted to
9 point out is on the Annual Plan, page
10 31, you have two sections that just
11 jump out at me, and one is that the
12 Department will develop and advocate
13 for the enrichment of programs that are
14 not only more cost-effective, but also
15 more reflective of the preferences and
16 needs of our rapidly changing adult
17 population.
18 I have to tell you, we're very
19 cost-effective and we reach so many
20 more -- we're just like what the
21 Borough President was saying, we reach
22 many communities on a macro level in
23 Brooklyn, and we work with so many
24 other organizations and bring in

25 resources, informational resources to
2 make sure that the people in Brooklyn
3 are informed.
4 Then the other part is that it
5 says here that you're going to work
6 cooperatively with interagency
7 councils, advocacy groups and with city
8 and state citizen groups on behalf of
9 elderly interests by participating in
10 forums and meetings and collaborating
11 on advocacy and policy concerns.
12 Again, how are we going to do
13 that if our funds are being cut? I
14 have to appeal to you to please restore
15 our funds. That's the only thing I can
16 say. Thank you.

17 ASST. COMMISSIONER ROMERO: Dee
18 Pozzuoli, Vandalia Senior Center.
19 MS. POZZUOLI: Good morning,
20 Commissioner, and the rest of the
21 panel. My name is Dolores Pozzuoli. I
22 am the program director of the Vandalia
23 Active Adults & Senior Services Center
24 in Brooklyn. I have the privilege of

25 working with the New York City
2 Department For The Aging for the past
3 18 years. During this time I've been
4 involved in many facets of senior
5 center programming in two different
6 locations in Brooklyn, including,
7 presently, Starret City. Each
8 community was diversified in its
9 population and requirements of need
10 services.

11 This newly retired generation is
12 more active and independent, thus,
13 dependent on new innovative
14 programming. For this reason, I
15 believe we all need to review our
16 individual programs to better attract
17 the new active adult, while continuing
18 to serve the needs of our current
19 elderly participants.

20 At my center, we offer a variety
21 of programming, including walking club,
22 chair yoga and meditation, billiards,
23 Wii computer game, crafts, painting and
24 a friendship group and computer lab.

25 Our computer workshop challenges the
2 mind and has become one of our most
3 popular programs. With seven ongoing
4 computers, the class has expanded into
5 their own card making business, using
6 the profits to purchase the ink for
7 their class.

8 For many years, we have
9 maintained a strong English As A Second
10 Language class, in order to amply
11 reflect the surrounding Russian
12 community. We are also a distribution
13 site for the food and nutrition
14 program. Monthly we offer an AARP
15 defensive driving course geared for our
16 younger seniors still on the road.
17 Maintaining a healthy senior has
18 been one of our most top priorities.
19 Our walking club meets three times a
20 week, and on a monthly basis, we try to
21 facilitate health lectures, blood
22 pressure, nutrition education programs,
23 as well as providing our annual flu
24 shots. We always try to remember our

25 members' birthdays with a monthly
2 party. In July, we threw a celebration
3 for one of our oldest members, 109
4 years old.

5 Our Annual Grandparents Day we
6 have the opportunity to bring seniors
7 with their children and grandchildren
8 together in a day of activities, food,
9 fun and dancing. They also look
10 forward to our Annual Tree Lighting
11 and Menorah Lighting Festivities,
12 bringing the community with the
13 buildings and the residents together
14 for a fun filled evening of food,
15 enjoyment and fun.

16 The Vandalia program currently
17 uses space within the New York City
18 Housing Authority facility. We occupy
19 a wonderful space which consists of
20 seven rooms within a lower level of a
21 senior high-rise. This NYCHA complex
22 has 10 floors on both sides, with 280
23 apartments. Our program appeals to a
24 diversified population of mature adults

25 age 60 and older.

2 Since I've been director of this
3 program, we have built a great
4 partnership with the Vandalia Tenants
5 Association and Brooklyn NYCHA
6 Administration. We are recently
7 partnering with NYCHA social workers
8 inviting our members to their first
9 Annual Hispanic Heritage Month
10 celebration. It is also an ongoing
11 process of working with our community
12 leaders, local business, the Brooklyn
13 Public Library, other DFTA senior
14 centers, and area nonprofit
15 organizations.

16 As you've probably heard on
17 numerous occasions throughout this day,
18 as a senior center director, we have
19 the opportunity to truly connect with
20 the clients we serve. Through our
21 center services, we are able to assist
22 in a variety of areas with direct
23 services, as well as referrals, special
24 events and needed services, such as a

25 breakfast and lunch, case assistance,
2 friendly visiting, telephone
3 reassurance, and educational and
4 learning opportunities.
5 A vision of senior programming
6 should strive towards enlightening
7 create and progressive ideas. A place
8 where people can age with dignity,
9 finding diversified activities
10 appropriate to their lifestyles, where
11 they can socialize with friends and
12 enjoy two well-balanced meals a day.
13 Our programs have been
14 lighthouses guiding the community
15 elders to healthy and engaging
16 activities which will keep them
17 healthier for many years to come.
18 Right now, with the economy as it
19 is, it is a difficult time for
20 everyone. All our City agencies are
21 under great economic stress. Of
22 course, additional monies are always
23 needed. Any budgetary deductions are
24 only going to hurt our direct services.

25 Yes, this program is a lifeline to the
2 280 residents within these buildings
3 and surrounding Spring Creek Community,
4 and should not be considered to be
5 moved or closed.

6 And yes, I care deeply about
7 every one of my members who have ever
8 stepped through our doors. This
9 program is a lifeline not only to each
10 other, but to their families and the
11 community. When it's election years,
12 my seniors come to my center to vote,
13 as we are also a voting poll site.

14 When major events occur in the news, we
15 are here to discuss and inform our
16 members. When Medicare came out with
17 many new plans, we brought the
18 information to them in a clear,
19 understandable manner, where no one
20 could decipher the new information.

21 When the temperatures reach in the 90s
22 in the summer, they come to my center
23 to cool off as a cooling site.

24 Around the holidays, the local

25 children come to our seniors to
2 entertain them, bringing the two
3 generations together. I can go on and
4 on. The point is, a center is a vital
5 part of our community. Not only
6 encouraging life, life to go on, but
7 enriching it as well.

8 We all, all of us will become of
9 age and will need a place to go and
10 make sure -- I want you to make sure
11 today that we have centers to go to.

12 Thank you very much for your time.

13 ASST. COMMISSIONER ROMERO:

14 Nancy Yost, New York Statewide Senior
15 Action.

16 MS. YOST: Good morning. My
17 name is Nancy Yost. I am Vice
18 President of Political Action and
19 Legislation of the 26,000 members of
20 the Retiree Association of DC-37
21 AFSCME, who are retired city workers.
22 I'm a board member of the New York
23 Statewide Senior Action Council, and
24 legislative director of the New York

25 City Alliance For Retired Americans.
2 As a past consumer co-chair of
3 Brooklynwide Interagency Council For
4 The Aging, I know firsthand what an
5 important educational service they
6 provide to the 17 interagency councils
7 around Brooklyn. I urge you to
8 reinstate their funding.
9 And now to the issue at hand.
10 Being a senior living through the
11 Medicaid Modernization Act of 2003, I
12 have to tell you that anything that
13 claims to modernize, frankly, scares
14 me. What is needed is the outreach and
15 provision of services of three distinct
16 populations: The frail homebound
17 elderly; the baby-boomers who are
18 becoming of age to receive senior
19 services; and the seniors who
20 traditionally attend the centers.
21 While we agree that the senior
22 centers could make better use of their
23 resources, we feel that reducing the
24 amount of centers and staff to run them

25 by way of the budget cuts is not the
2 answer.

3 One possible solution is

4 instituting a civic engagement program

5 where seniors can be peer providers.

6 For example, pairing able-bodied

7 seniors with the homebound to provide

8 companionship, socialization, and also

9 serve as monitoring of needs in an

10 effort to ensure the well-being of the

11 frail.

12 Currently, senior centers lack

13 the manpower to provide proper

14 oversight, care and supervision for

15 these seniors to make sure that they

16 are accessing all of the programs,

17 entitlements and benefits that they

18 have a right to obtain. Many times the

19 seniors trust in the staff at the

20 centers to look at their situations and

21 help them navigate an increasingly

22 difficult and complicated system.

23 We must ensure that the staff at

24 these centers receive adequate salaries

25 and incentives to stay on the job.

2 Senior centers should be the hub in the
3 community where this population can
4 obtain the latest information on topics
5 such as health care, social programs
6 and other services.

7 DFTA must continue to provide
8 transportation to the senior centers.

9 Senior services in New York City have
10 sustained around \$11,000,000 in cuts
11 this year. On top of that, NYCHA is
12 planning on closing senior centers in
13 the most vulnerable areas of the City.

14 If DFTA insists on putting all of
15 the senior centers up for bidding
16 without a clear guideline of what it
17 will consider acceptable and functional
18 at such a reduced budget, the
19 increasing number of seniors in New
20 York City will be grossly under served.

21 There will be mass confusion of what
22 centers and services will remain
23 operational, and in these times of
24 fiscal uncertainty, seniors and their

25 families will get the raw end of the
2 deal.

3 It feels like the City government
4 is cutting all the vital arteries and
5 organs of the social services that
6 serve our city. What's the hurry? We
7 need New York City DFTA to provide
8 community organizations with a clear
9 set of criteria and a plan of action
10 that will take into account the
11 diversity of people that live in the
12 City and that provide services and
13 alternatives for a population that is
14 continually growing. Thank you.

15 ASST. COMMISSIONER ROMERO:

16 Cecilene Frank, Brooklynwide
17 Interagency Council of the Aging.

18 MS. FRANK: Good morning,
19 Commissioner Méndez and assistants.

20 Also to the audience. My name is
21 Cecilene Frank. I'm a board member of
22 East New York Interagency Council on
23 Aging, director of St. Barnabas
24 Episcopal Senior Center, and I am a

25 member of Brooklynwide Interagency
2 Counsel on Aging.
3 Concerning the Department's
4 recent suggested Annual Plan:
5 As a group, we are very concerned
6 about reduction of senior centers which
7 will have a devastating effect on the
8 various vital services for the aging
9 community. Services such as:
10 Educational programs; nutritional
11 programs; health information, and
12 exercise activities.
13 In terms of social contact,
14 socializing is critical for seniors to
15 feel connected. A lack of
16 socialization and interaction can
17 result in isolation and progress to
18 depression which can become fatal.
19 In East New York, senior citizens
20 rely heavily on the supplemental
21 services provided by the senior
22 centers. A good example of this is our
23 transportation program.
24 Pink Senior Center operates two

25 vans used to transport seniors on
2 errands to shopping centers, medical
3 appointments, and other errands.
4 Because of the fact that our
5 neighborhood lacks many of these basic
6 services, many times the vans must
7 drive them round-trip between their
8 homes, the centers and their
9 appointments. While this service is
10 part of our senior center budget, the
11 upkeep, insurance, and gasoline costs
12 are not.
13 We are constantly in need of
14 fundraising and seeking other types of
15 funding for this vital service to our
16 seniors. With the rising cost of gas,
17 insurance and the cost of living in
18 general, in addition to the fact that
19 we are experiencing an influx of new
20 members at our center, we need more
21 money for this service.
22 It has come to our attention that
23 New York City Department For The Aging
24 shall sustain cuts of 15.5 million

25 between now and the year 2010. Senior
2 centers cannot take any more budget
3 cuts. Seniors are losing meals, van
4 service, exercise, and health classes,
5 case management, home care and other
6 important services.

7 Another important issue that I
8 would like to highlight is regarding
9 information and education. As an
10 example, I am the director of a
11 self-funded senior center that serves
12 over 200 seniors and their families in
13 East New York.

14 Every month I'm able to come to
15 Borough Hall to attend the Brooklynwide
16 Interagency Council meetings where I,
17 and many other representatives or
18 organizations throughout Brooklyn,
19 gather important information to
20 disseminate to the rest of the
21 community.

22 We are very grateful for the work
23 that Brooklynwide does for us. They
24 maintain us informed of all of the

25 current changes to policies affecting
2 the community. They bring in speakers
3 that inform us of available services
4 and we have the opportunity to interact
5 among the different neighborhoods in
6 Brooklyn.

7 We are very distressed to find
8 out that their funds are being cut and
9 they may not be able to assist us in
10 the same way. We strongly urge you to
11 reconsider funding of this important
12 organization.

13 Our members need to be reassured
14 that the plan put in place under this
15 Modernization initiative satisfies the
16 guidelines that we have outlined. May
17 our appeal be heard with appropriate
18 response. Thank you.

19 And also, I suggest, Commissioner
20 Méndez, as a person who retired and my
21 first going to a senior center was
22 impressed, and then I learned about the
23 Department Of Aging. I appreciate your
24 models, and this is why I tried to be

25 running a senior center attached to the
2 church. However, I could only do but
3 so much and no more.

4 But I hope that you will be able

5 to cajole and reassure us that

6 everything will not be last. Thank

7 you.

8 ASST. COMMISSIONER ROMERO:

9 Nathan Williams, Abe Stark Senior

10 Center.

11 MR. WILLIAMS: Good morning,

12 Commissioner and panelists. My name is

13 Nathan Williams. I am honored to be

14 here to represent the seniors who are

15 currently attending the Abe Stark

16 Senior Center, which is located at

17 103-15 Farragut Road in Canarsie

18 Brooklyn, in Community Board 18, which

19 covers East New York, Canarsie,

20 Brooklyn. As a director of the Abe

21 Stark Senior Center, which is currently

22 serving contract under New York City

23 Department For The Aging, and which

24 prior to my tenure used to be an HRA

25 site.

2 I've seen a vast change with the
3 service and client I serve. Our
4 sponsor organization, Millennium
5 Development, has been proactive in
6 community collaboration, networking in
7 order to share resources, allowing our
8 agency to be effective and effectively
9 do more.

10 Currently Abe Stark Senior Center
11 serves the senior residents of two New
12 York City Housing communities. The
13 first being Breukelen Houses, which is
14 located one block from our center. The
15 second is Bayview Housing, which is
16 located five blocks away from our
17 center.

18 Our organization also provides
19 much needed transportation within the
20 areas we serve. This allows us to pick
21 up older, frail senior clients. Our
22 center is well-diverse with a wide
23 range of nationalities, all relaying
24 very valuable friendship that they feel

25 comfortable with the help and the
2 unique diversity that we have.
3 Our motive at Abe Stark is a home
4 away from home. As a director, my
5 entire staff volunteers. Community
6 allies have accomplished this in so
7 many ways. As I stand before you
8 today, I encourage you to come visit us
9 and sense the family style atmosphere
10 as we serve both breakfast and lunch,
11 take part in innovative activities,
12 while still supporting those members
13 who have walked through our doors for
14 the past 20 years.
15 But our current goal has been to
16 encourage the younger active adult or
17 what we foresee the rising baby-boomer.
18 We have worked with the New York City
19 Department For The Aging who, too, have
20 understood our needs to provide changes
21 in our programming. We're currently
22 supporting the New York City Department
23 For The Aging walking and health and
24 wellness program. Our senior members

25 look forward to attending our annual
2 Senior Stroll and Senior Age In Action
3 events that the DFTA sponsors. And
4 through these events, our members have
5 their eyes open to other centers and
6 members which they meet and learn from
7 in their arts and crafts exhibits and
8 dance presentations.
9 I am also happy to say that many
10 of our seniors enjoy participating in
11 organized activities outdoors within
12 our local parks as we also support many
13 outdoor trips and local civic health
14 fairs and activities.
15 The Abe Stark Senior Center is
16 also actively involved in the 69th
17 Precinct Annual National Night Out
18 Against Crime and also the Annual
19 Canarsie Memorial Day Parade. Many of
20 our members march along with families
21 and young people in strong support of
22 communities standing together.
23 We are also proud to partner with
24 the annual Canarsie Bridges, Breukelen

25 and Bayview Family Days, and up until
2 recently, annual holiday tree lighting
3 ceremonies, in collaboration with
4 resident associations.

5 Through our sponsor, Millennium
6 Development, we have also partnered
7 with local after-school programs which
8 encourage all of our members to share
9 their knowledge with the youth today.

10 As I close, Abe Stark Senior
11 Center is looking forward to the
12 future, knowing that our agency and
13 program must adapt to the changing and
14 the growing population of the young and
15 the older elderly. That our borough
16 must be supported. I truly believe
17 that our state and city must increase
18 taxpayer dollars to support the
19 increasing need additional service and
20 well trained staff to work with our
21 residents who live at home and enjoy
22 the community they love.

23 Thank you, Commissioner Edwin
24 Méndez-Santiago, and your staff, for

25 your concern and our members. Please,
2 Commissioner, continue to fight on the
3 behalf of our center and many others
4 who stand with us. Thank you.

5 ASST. COMMISSIONER ROMERO:
6 Mabel Davis, Brownsville-Ocean Hill
7 Interagency Council of the Aging.

8 MS. DAVIS: Good afternoon. I
9 thought I would be gone by now, so I
10 guess I'll set some fire to my speech
11 because you've done made me angry. To
12 powers that be: Mayor and government
13 has violated the Torah and the
14 covenant. Seniors need to be exempt
15 from any budget cuts and hospitals for
16 the sick, because the bureaucracy will
17 suffer greatly for this unjust.

18 This is inhuman to society in
19 which we all serve. Our seniors have
20 paid their dues throughs 10s of years
21 of empowerment. They have met all the
22 challenges they can bare. They aren't
23 supposed to be inconvenienced because
24 the system is broken.

25 Now I'm on the diet. I didn't do
2 it this way, but it's there.
3 Concerning their Meals-On-Wheels. You
4 so educated, you don't even have common
5 sense enough to know to supply some
6 flavor to the menu. I hear you on TV
7 analyzing the Mayor and the Bronx and
8 down here in Brooklyn. You so
9 educated, where is the common sense?
10 Put a bay leaf to the diet.
11 Health care for all our uninsured
12 seniors and children when entering
13 emergency no matter the status
14 automatically covered. You don't have
15 time to sit in emergency to wait to
16 find out about somebody's insurance and
17 they having an asthma attack. They
18 getting ready to have a stroke and you
19 worried about their coverage.
20 All of the officials -- all of
21 you officials have mothers, etcetera.
22 Would you like your siblings be treated
23 the way society is greeting those in
24 disparate needs? The covenant states

25 "love thy neighbor as thyself."
2 This covers all the seniors. I'm
3 not talking about no one particular
4 area. I'm talking about all the
5 seniors. And if you don't do what you
6 supposed to do, you will suffer dearly.
7 You think you're comfortable because
8 you got your finances and everything in
9 order. Well, money don't take care of
10 your health. Thank you.

11 ASST. COMMISSIONER ROMERO:

12 Clare Mayer, Shorefront Interagency
13 Council.

14 MS. MAYER: Before I start my
15 written discussion, I have three things
16 I want to talk about quickly. I want
17 to remember Mia Braderman, who was an
18 extraordinary man and advocate for
19 health care.

20 Somebody was mentioning the
21 library. I'm an ex-librarian, and I
22 told a friend of mine in my building
23 about Books By Mail, and this has made
24 her life so much better. She's a

25 reader and they've been giving her
2 wonderful service.
3 Access-A-Ride. If you have
4 Access-A-Ride, you must have a cell
5 phone, and that's something that's
6 really absolutely important and that's
7 expensive.
8 Now my name is Clare Mayer. I'm
9 co-chair of the Shorefront Interagency
10 Council On Aging, and editor of the
11 Brooklyn Owl Newsletter. I'm speaking
12 for myself today, but I'm sure that
13 Brooklyn Owl agrees with me.
14 In Age Friendly New York, you
15 report that the vast majority of
16 seniors want to age in their own homes
17 and communities, and that you want to
18 transform them into support hubs for
19 older New Yorkers. You also praise the
20 Department's award winning NORC
21 program. I certainly agree with both
22 these statements.
23 I was here two years ago asking
24 for help with neighborhood NORCs. We

25 talked about them at the Shorefront
2 Interagency Council and told our
3 members about the three or four NORCs
4 in that neighborhood. Brooklyn OWL had
5 a program on NORCs and had
6 representatives of DFTA, health
7 agencies and nonprofits talking about
8 how to start one.
9 Our members were very interested
10 in the program, but most of us, as do
11 most seniors, live outside of housing
12 complexes. Revved up, I went to their
13 various nonprofit agencies, Community
14 Board, Senator Kruger's office and was
15 given a runaround. Nobody was willing
16 to help me start one in my
17 neighborhood.
18 The problem is that NORCs were
19 started by professionals in large
20 housing complexes and various agencies
21 all have their own priorities. And so
22 now there are a few NORCs in the
23 Brighton Beach-Coney Island area,
24 there's one in Starret City, one in one

25 of the housing areas, and none in the
2 rest of Brooklyn.
3 People who live in the rest of
4 Brooklyn have similar problems to those
5 who happen to live in NORC buildings.
6 We need to develop neighborhood NORCs
7 in a systematic way, cutting up the
8 City into areas where services are
9 managed more efficiently.
10 Here's an example. One of my
11 friends is wheelchair bound. Until now
12 she hasn't required outside help
13 because her husband was there. She
14 lost him and she was lucky that her
15 children knew how to go through the
16 system. She had to speak to lots of
17 social workers before she could get
18 what she needed. Unfortunately, she
19 lives in a building that has a front
20 stoop and she can't get down the one
21 step by herself. And a senior center
22 two blocks away has transportation, but
23 the driver will not help her down the
24 one step. She cannot go to the senior

25 center.

2 What we need is central

3 neighborhood areas to see what is

4 needed in their bailiwicks. A single

5 place where people can call and get one

6 step help. Neighborhood NORCs, that's

7 the way to modernize. That's how to

8 start getting help in an age friendly

9 New York. Thank you.

10 ASST. COMMISSIONER ROMERO: Yui

11 Ng, Brooklyn Chinese American

12 Association.

13 MR. NG: Thank you, Commissioner

14 and all your coworkers. Yui Ng has

15 been living in Brooklyn for more than

16 30 years. Since his retirement in 1993

17 he worked as a volunteer at the Sunset

18 Park Asian Senior Center in Brooklyn

19 and he is actively involved in a

20 variety of activities, helping other

21 seniors who are in need. Because he

22 has a language barrier, he would like

23 me to read his thoughts.

24 Having been a volunteer six days

25 a week working at the Brooklyn
2 Chinese-American Association Sunset
3 Park Asian Senior Center, I have
4 witnessed the rapid growth of the
5 senior members in our center. The
6 daily attendance have changed from
7 below 20 at the beginning to 250 now.
8 Members line up hours before the center
9 is opened in order to get a good seat
10 or lunch ticket.
11 I'm fully aware how difficulty it
12 is for Asian seniors to overcome their
13 difficulties in a new environment.
14 Because of the language and cultural
15 barriers, they cannot enjoy their
16 retirement like American seniors do.
17 Some of our members have never visited
18 Manhattan or Queens, although they have
19 been living in this country 10 or 20
20 years, because they do not have the
21 courage to travel by themselves and not
22 even go shopping in an American
23 supermarket.
24 Our Sunset Park Asian Senior

25 Center runs a number of programs, most
2 visibly our congregate meals, which
3 ensure good nutrition for seniors, as
4 well as providing services like tai
5 chi, singing, folk dancing, chess,
6 Mahjong, Chinese TV and newspaper,
7 health screening, trips and visits to
8 nursing homes, etcetera.
9 For the past 16 years, all of the
10 four Brooklyn Chinese-American Asian
11 Senior Centers can only survive through
12 donations from other charitable
13 organizations, plus generous help and
14 assistance from experienced volunteer
15 workers.
16 However, only very minimal social
17 and recreational activities can be
18 provided to seniors that come to our
19 center. Despite these, many members
20 still come to our center because in
21 Brooklyn, especially in the so-called
22 Brooklyn Chinatown areas, there are not
23 any senior centers that really take
24 care of the needs of our Asian seniors.

25 In order to serve the needy, we
2 have opened up Bay Ridge Asian Senior
3 Center three years ago. Within the 16
4 years, there have been two or three
5 commissioners that we constantly
6 express our concerns and needs to
7 funding. Every time we were
8 disappointed and felt neglected because
9 most of us had paid taxes for so many
10 years before our retirement. Their
11 answers were the same, that they do not
12 have new money. I do not understand
13 why they have never considered about
14 using the accrued money from the
15 hundreds of City funded senior centers
16 to help new centers that need funding
17 badly.

18 Recently, I heard that Department
19 For The Aging is having a new plan for
20 funding reallocation. I worry that our
21 request will be turned down again,
22 since the economy of our city is in
23 crisis and two existing DFTA funded
24 senior centers in Sunset Park have been

25 established for a long time.
2 As a representative of the Asian
3 seniors, I hope that New York City will
4 remember that there are so many Asian
5 seniors in the Brooklyn communities
6 that have been totally neglected in the
7 past 16 years, and they deserve to have
8 a fair share in the funding
9 reallocation. Thank you very much.

10 ASST. COMMISSIONER ROMERO:

11 Mike Camporeale, Marine Park/Midwood
12 Active Adults Center.

13 MR. CAMPOREALE: Good
14 afternoon, Commissioner and panelists.
15 My name is Mike Camporeale. I am a
16 lifelong resident of Brooklyn. I have
17 been living within the Marine Park
18 Community Board 18. I have had the
19 pleasure of raising three children in
20 this community. Actively participating
21 in my local parish and enjoying local
22 parks, libraries and conveniences which
23 my community gives to me. I thank you
24 for this privilege of testifying on

25 behalf of other residents who live
2 within the Marine
3 Park/Midwood/Gerritsen Beach area of
4 Brooklyn.
5 I am proud to be an active member
6 of the Midwood Senior Center, the
7 Marine Park Active Adults, the Marine
8 Park Bocce Club and The Marine Park
9 Civic Association.
10 Allow me to share some of my
11 innermost thoughts and feelings. I
12 truly enjoy giving back to the
13 community as an active volunteer at all
14 of the affiliated groups I just
15 mentioned. I rarely sit when work
16 comes my way. In layman terms, I get
17 my hands dirty by pitching in whenever
18 and wherever needed. I truly enjoy
19 serving others.
20 With these facts in mind, I share
21 with you this day that those like me
22 who reside in Brooklyn, want to
23 continue to live a viable, healthy life
24 with choices. Each day I wake up is a

25 gift from God. Therefore, I truly
2 believe that programs like the Midwood
3 and Marine Park Active Adults allows me
4 the freedom and opportunity of
5 volunteering and participating in
6 well-planned, organized programs and
7 enrichment opportunities, while
8 building important friendships with
9 others who have the same interests.
10 I am happy that on June 13, 2008,
11 the Marine Park Community was able to
12 finally break ground on the new Parks
13 Department community center. This
14 community center will be named after
15 their friend and mine, Mr. Carmine
16 Carro. His life, in many ways, has
17 moved myself and countless others to
18 want to continue to live and volunteer
19 while maintaining a healthy lifestyle
20 in this community. The building will
21 not open for two years. That does not
22 mean that services to the community
23 should stop. I believe our
24 neighborhood is in dire need of an

25 organized program five days a week. I
2 cannot count down the days fast enough
3 that this building will be built and
4 the doors will be open for all to meet,
5 greet and be encouraged by the
6 opportunities that are in store for a
7 retired person like myself.
8 My third home would probably be
9 the outdoors within Marine Park. Here
10 I enjoy walking, playing bocce and
11 socializing with my peers. These bocce
12 courts will be on the outside of the
13 new community center. This will now
14 put in place a wonderful opportunity
15 for all retirees to feel the importance
16 of a localized meeting place.
17 As I also participate at Midwood
18 Active Adults, I cannot stop helping in
19 the kitchen or during special events
20 and parties, and even participating in
21 daily trips, computer learning, and my
22 latest venture, mind stimulating puzzle
23 mania. I am what you call a team
24 player. I will try any new activity

25 and enjoy every bit of time spent
2 completing the task.
3 This is why I feel more enriching
4 activities built around challenges and
5 learning must be offered to adults like
6 myself. Yes, there are many who are in
7 greater physical need than I, and this
8 is why I also feel services should vary
9 to meet the tremendous differences of
10 all adults 60 years and older.
11 I am sure that if we were not in
12 a great fiscal crisis, our seniors
13 would be getting more. I ask today
14 that we do not lose, but that we
15 utilize the abundant resources that New
16 York City offers. Please do not forget
17 my community and the many others that
18 were never originally chartered on the
19 City maps as a senior active adult
20 community. Thank you very much.
21 ASST. COMMISSIONER ROMERO:
22 Grace Brandi, Surf Solomon Senior
23 Center.
24 MS. MITTELMAN: I'm sorry.

25 Grace had to leave, so I will be
2 reading her testimony. Grace Brandi
3 has served as a supervising director of
4 Senior Center Services for the Jewish
5 Community Council of Greater Coney
6 Island, a not-for-profit community
7 based social service agency founded in
8 1973, which provides a wide spectrum of
9 senior citizens, youth vocational and
10 immigrant and educational services to
11 the frail, elderly, educational at risk
12 youth, newly arrived refugees and
13 vocationally disadvantaged poor of the
14 communities of our borough, and in some
15 cases citywide.
16 In addition, we provide technical
17 assistance services to enhance the
18 management capacity of nonprofit
19 organizations throughout New York
20 through computerization and fiscal
21 management.
22 Rabbi Weiner, our Executive
23 Director, our Board of Directors, our
24 staff, and more importantly, the

25 clients we serve, remain profoundly
2 indebted to Commissioner
3 Méndez-Santiago and his dedicated staff
4 for their outstanding visionary
5 leadership over the past years in
6 preparing for and implementing critical
7 changes to enhance the effectiveness
8 and efficiency of the administration of
9 the services DFTA provides.
10 There are a multitude of issues
11 discussed in the Annual Plan Summary,
12 and in the short amount of time
13 available, I would like to address only
14 a very few of the many important
15 issues.
16 DFTA's Annual Plan states that
17 the aging network must expand and adapt
18 to the changing needs of a new cohort
19 of well-elderly, while balancing the
20 service needs of the increasing
21 frail-elderly population. We also
22 believe that the needs of seniors are
23 changing and we must address these
24 issues.

25 Seniors are becoming more infirm
2 and finding it more difficult to travel
3 to their beloved senior centers. We
4 believe that rather than reducing the
5 budgets of centers with underutilized
6 congregate meals, these funds should
7 instead be allowed to be used to send
8 meals home to center members who are
9 too frail to attend and who desperately
10 need the meals, especially considering
11 the waiting time for Meals-On-Wheels
12 and eligibility issues involved. Many
13 seniors have help from Medicaid Home
14 Attendants, have become homebound, and
15 are not eligible for Meals-On-wheels.
16 At the same time, it is a
17 hardship for them to purchase food due
18 to their limited incomes. It is a
19 disservice to them not to be able to
20 provide them with nutritious
21 home-cooked senior center meals where
22 they have the opportunity to make a
23 minimal voluntary contribution instead
24 of paying the full, high cost of food.

25 Many of our seniors are part-time
2 caregivers to grandchildren, full-time
3 caregivers to other family members,
4 have regularly scheduled medical
5 appointments, etcetera, making it
6 difficult for them to eat meals in the
7 centers. They would benefit from and
8 would appreciate being able to take
9 meals home to accommodate their
10 schedules and problems.

11 We understand the importance of a
12 congregate meal setting to seniors and
13 we understand the food safety issues
14 raised by the Department of Health.

15 Although DFTA regulations do not
16 currently allow for meals to be taken
17 home or sent home to ill or homebound
18 members on a long-term basis, perhaps
19 this policy should be revisited and a
20 regulatory acceptable solution can be
21 found to permit this ongoing
22 relationship between seniors and the
23 centers to continue.

24 Senior centers also need to make

25 efforts to attract younger seniors.
2 Efforts should be made to concentrate
3 resources on a public relations
4 campaign to present senior centers as
5 the educational/recreational community
6 and social centers they really are.
7 Specifically, emphasis should be placed
8 on giving senior centers the means to
9 offer information technology access,
10 training and computer-based educational
11 programming, such as e-learning online
12 education. Efforts should be made to
13 establish and build exercise rooms in
14 our senior centers as a method of
15 promoting the health of our current
16 members and to help attract younger
17 ones and help them to maintain their
18 good health. Capital funding is
19 required to renovate deteriorating
20 appearances of some centers, as well as
21 to initiate and expand the previously
22 mentioned services is vital to success.
23 While we stress aspects of senior
24 center services which have heretofore

25 not been their primary attraction, we
2 must not lose focus of what has
3 traditionally been the primary appeal
4 of senior centers, namely the
5 congregate meal program. Our
6 experience, most recently confirmed
7 during our temporary renovation
8 situation when meals were catered from
9 the outside, and that of providers
10 citywide has been that the main factor
11 in attracting seniors to senior centers
12 is the quality of their meals and the
13 fact that the meals are prepared onsite
14 in a manner responsive to the
15 preferences of the center membership.
16 It is vital that this core service of
17 our centers be preserved as it has
18 functioned throughout the history of
19 the senior center movement in our City.
20 However, we must also take into
21 consideration the changing needs of
22 today's seniors and realize that
23 seniors attend centers for various
24 services and activities, besides meals,

25 and this fact should be taken into
2 consideration when assessing
3 utilization of a senior center.
4 Should I go on? Can I go on?
5 Finally, we're grateful to DFTA's past
6 support of our ESL/Citizenship classes
7 that are so crucial to the ability of
8 our immigrant and refugee seniors to
9 integrate and function within their
10 centers in particular and communities
11 as a whole. We agree with DFTA that
12 the quality of communication between
13 patients and doctors can have a
14 significant impact on health outcomes
15 and limited English proficiency can
16 interfere with effective communication.
17 The 1/31/03 cessation of
18 ESL/Citizenship class funding in senior
19 centers was traumatic for many seniors.
20 We are happy and grateful that these
21 services have been, at least, partially
22 restored and hope that they will
23 continue in the future as they do
24 improve seniors' access to information

25 and quality health care.

2 Thank you and may the

3 Commissioner, Deputy Commissioners,

4 Assistant Commissioners and their

5 wonderful staff all be blessed for

6 their outstanding accomplishments,

7 improving the quality of life for New

8 York City's elderly.

9 ASST. COMMISSIONER ROMERO:

10 Chaya Abelsky, Jewish Community Council

11 of Greater Coney Island.

12 MS. ABELSKY: Good morning. My

13 name is Chaya Abelsky. I am a managing

14 director of the NonProfit HelpDesk.

15 It's my pleasure and honor to present

16 testimony on behalf of the nonprofits

17 we serve. Commissioner

18 Méndez-Santiago, thank you very much

19 for attending and presenting at our

20 honoring ceremony at City Hall. Your

21 visionary leadership in implementing

22 these critical changes, really enhances

23 the effectiveness and efficiency in the

24 administration of the services that

25 DFTA provides. Assistant Commissioner
2 Jorge Romero, your attending our Cash
3 Management/Fiscal Management course at
4 Brooklyn College where we had 29
5 directors of nonprofit agencies sitting
6 there made a real difference and left a
7 real impact.

8 At NonProfit HelpDesk, we've
9 built the management capacity of New
10 York City nonprofits through education,
11 services and advocacy. Among the many
12 organizations we have worked with are
13 senior centers and others that serve
14 seniors. These are organizations that
15 do an excellent job providing services
16 to their constituents, just like all of
17 you here. They know what their clients
18 need and are willing and able to change
19 the way they serve their clients as
20 circumstances around them change.

21 Many small to mid-sized
22 nonprofits struggle to accomplish their
23 mission, unlimited budgets, and they
24 lack the resources that can allow them

25 to better manage their finances and
2 strengthen their infrastructure. The
3 tight budgets of these organizations
4 they live with mean that they tend to
5 pay low salaries, keep administrative
6 staffing to a bare minimum, and try to
7 avoid turnover, which is extremely
8 costly.

9 Of course, when salaries are low
10 and work loads are high, hiring staff
11 means tradeoffs. In order to retain
12 quality staff who will really put
13 themselves into their jobs,
14 organizations will hire intelligent and
15 responsible people who may lack
16 technical skills. Particularly what we
17 have found is that in these
18 organizations, the strength of their
19 board really helped them in addressing
20 their organization's mission. Yet
21 they, too, lack the financial knowledge
22 or the skills necessary to oversee them
23 as a nonprofit entity. They need
24 guidance in technology, administration

25 and bookkeeping.

2 As part of our technical

3 assistance engagement, we provide an

4 overview of operations, of services, we

5 help them set up and really provide the

6 comprehensive training that's needed.

7 For an instance, if an organization

8 needs assistance with fiscal

9 management, we start by making sure

10 that they have adequate accounting

11 programs set up, such as QuickBooks,

12 and we see that their chart of accounts

13 and standard reports are properly set

14 up. Then we go ahead and train their

15 appropriate staff to actually do fiscal

16 record keeping, including entering

17 transactions into their system,

18 properly allocating their expenses, and

19 preparing appropriate reports and

20 invoices that are necessary for their

21 funders.

22 When the organization is very

23 young, the people involved are new.

24 Training will usually be short and

25 intensive. We leave the organization
2 confident that they have the tools to
3 manager effectively. This works well
4 because what we teach them is fresh.
5 They are learning what they need for
6 the first time. There is no old and
7 correct or outdated information to
8 correct, and there are no habits that
9 need to be broken.

10 When we work with organizations
11 that have been doing things in a
12 certain way for years, the model needs
13 to change. Staff have gotten used to
14 the way they're doing things under
15 pressure. Those patterns will
16 definitely go -- they'll tend to go
17 back to them. They can't afford --
18 these same organizations can't afford
19 to fire the staff that are loyal,
20 responsible and basically competent,
21 even though they have gotten into
22 habits that are not working for them.

23 Any technical assistance provider
24 really has to be sensitive to this

25 change. What is necessary, what we
2 have found is necessary is to deal with
3 this in a longer term involvement,
4 which gradually tapers down. For the
5 first few months, the organization may
6 need a fair amount of supervision, help
7 and advice. As time goes on, though,
8 that need for monitoring advice will go
9 down to a much smaller fraction of time
10 of what they originally needed.

11 We have seen that at this minimal
12 level of involvement, we do need to go
13 on for an extended period of time just
14 to make sure that they're keeping to
15 the new procedures in place long
16 enough, and they've created a new habit
17 of operation.

18 We spend between three and nine
19 months coaching and focusing to see how
20 implementation is going and providing
21 problem solving assistance if
22 necessary.

23 At NonProfit HelpDesk, we want to
24 do more than wish our clients well when

25 the training is over. We want to
2 really keep them well. We provide them
3 with information of programs that are
4 available to seniors that are already
5 being offered by the Department For The
6 Aging and other funders or
7 organizations. We build on what is in
8 existence, with the specific intention
9 to improve outreach, accessibility and
10 knowledge.

11 Thank you very much for the full
12 committee and panel, for allowing me to
13 testify and provide consideration on
14 how NonProfit HelpDesk can provide,
15 continue to provide and strengthen the
16 organizational capacities of senior
17 serving organizations through short- or
18 long-term capacity building, consulting
19 support and training. Thank you very
20 much.

21 ASST. COMMISSIONER ROMERO:
22 Kwang Kim, Korean Community Services of
23 Metropolitan New York.
24 MR. KIM: Thank you,

25 Commissioner and officers of DFTA, for
2 giving me this opportunity. I am Kwang
3 Kim. I'm a social worker. Actually,
4 based in Queens, but came here to help
5 Korean American senior citizens in
6 Brooklyn. Our population of Korean
7 community has grown 30 percent from
8 70,000 in 1992 to 91,000 in 2000. The
9 majority of the Korean population live
10 in Queens, followed by Manhattan,
11 Brooklyn, Bronx and Staten Island, and
12 about eight percent of the population,
13 the number of 7,392 Korean Americans in
14 Brooklyn, and about seven percent of
15 the total population are senior
16 citizens, and Brooklyn has a deal
17 higher percentage than the others,
18 about nine percent, there were 665
19 seniors in Brooklyn speaking Korean.
20 And poverty level in our community is
21 much higher than the average of the
22 city, about 28 percent, and absolute
23 Korean speaking seniors was worse in
24 the year 2000, was 186, but all data

25 based on census 2000, and the numbers 29
2 have increased for the last eight
3 years.
4 The fact is that due to lack of
5 services of Korean in Brooklyn, Korean
6 Americans in Brooklyn, especially
7 seniors, travel to Queens where they
8 were served in Korean. The seniors
9 complained inconvenience and ask the
10 social workers like myself to help
11 them.
12 In the meantime, I visited many
13 senior centers in Brooklyn to extend
14 the services for the Korean speaking
15 seniors. Some senior centers such as
16 Dorchester and Marlborough, thankfully,
17 extended their programs to help those
18 seniors. However, those who felt not
19 welcomed isolated themselves from those
20 centers, and informally organized
21 themselves to a group, known as Korean
22 American Senior Citizens Association of
23 Brooklyn. Actually, they needed to
24 have a program which was linguistically

25 and culturally adequate to them.

2 At the beginning of the

3 Association, they were over 200 seniors

4 registered, and they opened a senior

5 center program in 1995 at a church

6 facility in Bensonhurst. Resources

7 from community support and membership

8 fee the expenses, including lunch and

9 rent. The program delivered happiness

10 and excitement to the seniors. They

11 enjoyed themselves and even organized

12 community services such as street

13 cleaning and graffiti removals. Due to

14 fiscal constraints over years, the

15 group has been reduced to a daily

16 attendance of 35, and faces a critical

17 moment. Reduced support from the

18 community and \$20 a month membership

19 fee cannot cover the expenses at all.

20 The current rent is \$1,250 per month

21 for using the facility for three days

22 between 9:00 a.m. to 3:30 p.m.

23 The group has been operating the

24 program over 13 years without any

25 support from the public sector, but now
2 urgently needs support from City of New
3 York. Even a small token of support
4 toward the group will motivate the
5 members and the community. It will be
6 sure that support from the public
7 sector will help the group reorganized
8 by increasing more participants and
9 community support. A crisis
10 intervention from the City of New York
11 will be greatly appreciated, and many
12 ways like supporting or finding our
13 spaces for them. Thanks again for
14 giving me this opportunity. Thank you
15 very much.

16 ASST. COMMISSIONER ROMERO:
17 Kayza Kleinman, JCC of Greater Coney
18 Island.

19 MS. KLEINMAN: Good morning.
20 Actually, good afternoon. My name --
21 thank you, Commissioner, and the
22 Advisory Board members for being here.
23 My name is Kayza Kleinman, and I work
24 for the Jewish Community Council of

25 Greater Coney Island. In addition to
2 working with Chaya Abelsky on the
3 NonProfit HelpDesk, I work -- I manage
4 the IT infrastructure for the Jewish
5 Community Council, which provides a
6 great deal of services to thousands of
7 seniors. Esther Mittelman has already
8 discussed our senior center services,
9 as well as some of the services we
10 provide.

11 Just to give you some sense of
12 the scope, in the last fiscal year, we
13 have provided -- JCC has provided
14 services such as transportation, home
15 care information referral and
16 assistance with Medicare Part D, to
17 name just a few, to 6,636 individuals
18 with multiple services, and in the
19 first quarter of this year alone, 3,116
20 seniors have been served. These are
21 individuals who have by in large
22 received multiple services. All of
23 this has been done efficiently,
24 effectively and with low administrative

25 overhead, and always with great care
2 for the clients we serve.
3 The JCC has been able to remain
4 responsible and flexible in dealing
5 with the changing needs of its clients
6 and the changing face of New York's
7 senior population. No organization can
8 accomplish so much without outstanding
9 and dedicated staff, and I am fortunate
10 to work with such a group. But people
11 need the right tools to accomplish
12 their mission. Especially in times
13 when there is a need to stretch
14 resources to their limit.
15 This has been my role. I have
16 been in charge of making sure that our
17 staff and the centers at the office and
18 anywhere else where they may be working
19 has technology tools they need to get
20 the job done and done well.
21 I've worked closely with Rabbi
22 Weiner and all of our staff as well as
23 with the many of the organizations that
24 the NonProfit HelpDesk serves. One of

25 the things that's become crystal clear
2 is that strengthening the technology
3 and administrative infrastructure of
4 existing organizations is a crucial and
5 cost-effective way to maintain and even
6 improve the delivery of services to New
7 York's growing senior population in
8 hard times, but this cannot be seen as
9 a one-time investment, okay. Give
10 everyone a few dollars and we're home
11 free. Investment in technology must be
12 an ongoing part of any viable agency's
13 budget.

14 Of course, choices must be
15 appropriate and wise. A staff must be
16 trained and encouraged to take
17 advantage of the tools available, and
18 that is part of the ongoing investment
19 that is necessary.

20 The Department has shown that it
21 understands the need for technology in
22 the organizations it funds. I hope it
23 continues to support the continued
24 acquisition and implementation of

25 appropriate technology, even in the
2 hard economic situation we find
3 ourselves.
4 There is another thing that I
5 have become convinced of in my work,
6 and by the way, also in my personal
7 life. My mother falls in the active
8 seniors group. Many of her friends are
9 less active, more active, and I do get
10 to hear a lot what they say and think
11 about technology. That's just on a
12 personal note.
13 Seniors should be given more
14 training in technology and access to
15 senior friendly technology. A lot of
16 the stuff out there is really not
17 friendly to people with minor motor
18 skills, visual impairments, etcetera.
19 In other words, a huge proportion of
20 seniors.
21 Computers and the internet
22 provide phenomenal tools for seniors to
23 maintain their independence and
24 lifestyles. If senior centers could

25 become technology hubs, providing not
2 only meals and socialization, but
3 access to training and computers set up
4 to be friendly to them, everyone would
5 benefit. Placing such technology hubs
6 in places where seniors already feel
7 comfortable and where they will never
8 be able to be made to feel too old to
9 be doing this, would break down many,
10 many barriers for people. Not just the
11 barriers of budget and lack of
12 knowledge, but barriers created by
13 senior unfriendly design, and, perhaps
14 most importantly, the barriers created
15 by people's perceptions. This synergy
16 would improve the quality of the entire
17 experience for participants at centers.
18 For the sake of our seniors, let
19 me finish by saying for the sake of our
20 seniors, these are our parents and our
21 grandparents, not some faceless,
22 amorphus group. These are the people
23 we know who've raised us and people we
24 hope to be one day, God willing, and

25 for the sake of the entire City, let us
2 make sure that despite or perhaps
3 because of the hard times that we are
4 facing, that we continue to provide the
5 people who provide these services with
6 the tools they need -- with the tools
7 they need to get their job done, and
8 let us step up our efforts to provide
9 seniors with access to senior friendly
10 technology and the training to make the
11 best use of it.

12 Thank you for the honor of
13 presenting this testimony, and may you
14 be blessed with success in your
15 endeavors.

16 ASST. COMMISSIONER ROMERO:
17 Esther Mittelman, JCC of Greater Coney
18 Island.

19 MS. MITTELMAN: My name is
20 Esther Mittelman. I consider myself
21 privileged to serve as the coordinator
22 of Homebound Senior Services at the
23 Jewish Community Council of Greater
24 Coney Island. Besides senior citizen

25 services, the Jewish Community Council
2 also offers an array of supportive
3 services for all segments of the
4 population. Some of our services are
5 community-based and some are
6 borough-wide or citywide. Our services
7 are offered to all eligible clients,
8 regardless of race and religion.
9 The purpose of this testimony is
10 to underscore the need to maintain and
11 expand the housekeeping, chore and
12 shopping services Jewish Community
13 Council of Greater Coney Island
14 provides to over 700 non-Medicaid
15 eligible, frail elderly of our
16 communities. It needs to be provided
17 to hundreds of additional seniors who
18 desperately need our help, but for whom
19 we don't have adequate resources to
20 provide services.
21 Due to their fixed limited income
22 and chronic acute infirmities and
23 disabilities, the elderly and handicap
24 are often unable to adequately provide

25 for their own basic and essential human
2 needs, such as housekeeping, laundry
3 and shopping for food. A large
4 percentage, however, of those
5 desperately required housekeeping,
6 shopping and laundry assistance, are
7 ineligible for Medicaid sponsored
8 programs due to slight excess in income
9 or assets.

10 These feeble, ailing individuals
11 must either deplete their income or
12 assets to reduce themselves to eligible
13 poverty levels, due to the detriment of
14 the community, or continue to
15 deteriorate until institutionalization,
16 at the immense cost to the taxpayer, is
17 their only recourse. An extensive
18 community-based home care and shopping
19 program is the only solution to this
20 dilemma.

21 Our agency does not receive any
22 EISEP funding and we rely on DFTA and
23 DYCD support, subsidized by
24 discretionary legislative and

25 philanthropic funding, to serve this
2 large number of clients who desperately
3 rely upon our home care services. More
4 over, the DYCD funding we have depended
5 on for the past 27 years was recently
6 drastically reduced by a devastating 70
7 percent.

8 These hundreds of functionally
9 disabled clients' health and welfare
10 depend on our home care services and
11 it's hoped that regardless of the
12 financial health of our City, these
13 essential services will be maintained.

14 Before I conclude, allow me to
15 make quick references to two of the
16 numerous other concerns. Any
17 consideration of eliminating DFTA's
18 English as a second language
19 citizenship instruction program,
20 especially in our area, which is one of
21 the largest elderly immigrant
22 population in the city, would be
23 disastrous for the hundreds of seniors
24 in our ESL programs who cannot

25 communicate with their doctors,
2 landlords, pharmacy or neighbors. They
3 are literally at risk without this
4 assistance, and it is crucial that it
5 should be continued.

6 Also, Jewish Community Council of
7 Greater Coney Island is one the few, if
8 not the only JCC in the City that does
9 not have funding through a citywide or
10 local extended service program,
11 information and referral case
12 assistance contract. We are, thus,
13 able to attest, with great objectivity,
14 to the catastrophic impact that the
15 elimination of these contracts would
16 have.

17 Thousands of seniors in our and
18 surrounding communities fill the
19 waiting rooms of local DFTA-funded ESP
20 providers, such as the Shorefront
21 Jewish Community Council in Brighton
22 Beach, for the unique community-based,
23 ethnic and language-sensitive,
24 highly-expert, dedicated and proficient

25 assistance these contractors provide.

2 Without this program, multitudes of our

3 most at-risk elderly would not have

4 access to or to be able to maintain the

5 crucial entitlements and benefits they

6 require to maintain their basic health

7 and welfare.

8 Thank you for considering my

9 concerns and for caring so much about

10 the client population I represent.

11 We all feel fortunate that DFTA

12 is headed by a caring, dynamic

13 Commissioner with exemplary direct,

14 hands-on experience and proven success

15 addressing the concerns and needs of

16 our seniors. We are certain that his

17 passionate and strategic leadership

18 will assure the safeguarding of these

19 critical services that our seniors'

20 health and welfare depend on. Thank

21 you.

22 ASST. COMMISSIONER ROMERO:

23 John Alvarez, JASA.

24 MR. ALVAREZ: Good afternoon.

25 My name is John Alvarez, and I'm the
2 director of the community-based
3 programs for JASA. The Commissioner's
4 letter soliciting responses to the
5 Annual Plan asked the question, how can
6 DFTA best support the aging network,
7 particularly senior centers as health
8 and wellness centers, in establishing
9 prevention programs to promote healthy
10 aging? JASA appreciates this
11 opportunity to share its view point on
12 this matter and makes some
13 recommendations.

14 First, the mission of JASA is
15 much like that of DFTA, to sustain and
16 enrich the lives of the aging in the
17 New York Metropolitan area, so that
18 they can remain in the community with
19 dignity and autonomy. JASA was
20 established and incorporated in 1968 to
21 identify and respond to the needs of
22 frail poor and isolated elderly,
23 regardless of race, religion or
24 ethnicity. And in the 40 years since

25 its inception, JASA has developed a
2 comprehensive integrated network of
3 services that provides a continuum of
4 community care.

5 JASA provides case and group
6 services, housing, legal services,
7 mental health and home care. JASA also
8 operates 23 senior centers throughout
9 Brooklyn, the Bronx, Queens and
10 Manhattan. JASA has long provided
11 activities that enhance participants'
12 physical, emotional, social and
13 spiritual health, and we welcome new
14 opportunities and initiatives that may
15 prompt older adults to improve their
16 health related behaviors.

17 Certainly the Department For The
18 Aging must be aware that activities
19 that promote health and wellness have
20 long been and remain an important
21 component of the daily schedule at
22 senior centers throughout New York
23 City. Focusing on the needs of our
24 current constituencies, which in JASA's

25 case are seniors over 75 years of age.
2 However, we recognize that a new
3 generation of seniors, baby-boomers is
4 poised to become the next generation to
5 fill our centers, and that this
6 generation brings with it a new set of
7 expectations concerning their futures
8 and the kinds of services they seek.
9 JASA fully expects to be an
10 important partner with DFTA in
11 modernizing the delivery of services to
12 seniors, and in developing the senior
13 center of tomorrow. Towards that end,
14 JASA would like to recommend that DFTA
15 consider focusing its attention and
16 resource on the following issues that
17 we feel are relevant towards attaining
18 this goal.
19 First, the overall principles of
20 a health and wellness initiative. JASA
21 feels that there needs to be a
22 recognition within the senior -- that
23 within the senior population there
24 exists different generations, and the

25 needs and capabilities of an 80 year
2 old are often different from those of a
3 60 year old. Therefore, we suggest
4 that any new initiative address the
5 differing needs of young, as well as
6 old seniors.

7 We also recommend that the focus
8 of any expanded health promotion
9 initiative remain holistic and
10 acknowledges the important role of
11 social and emotional health in the
12 lives of seniors.

13 Finally, we want to say that
14 based on the enthusiastic reception of
15 programming that was made possible
16 through Healthy Aging funding in
17 Brooklyn and the Bronx, that JASA feels
18 that this is an initiative whose time
19 has come.

20 Collaborations. Partnerships
21 need to be formalized that would allow
22 the pooling of experience and resource.
23 Some of the collaborators should be
24 hospitals and clinics and health care

25 providers. Currently, JASA works
2 closely with health care providers at
3 its NORCs, where registered nurses
4 provide health care counseling, which
5 includes measuring weight and blood
6 pressure. This role could be extended
7 within with the introduction of
8 expanded fitness programs, to help
9 develop an overall fitness profile of
10 participants, and key indicators for
11 measuring progress, such as the
12 participant's flexibility, strength and
13 weight.

14 Collaborations should also be
15 with colleges, universities and trade
16 schools. These could serve as
17 invaluable sources of student
18 placements for those seeking careers in
19 therapeutic recreation, fitness or even
20 occupational therapy. They could also
21 serve as centers for the dissemination
22 of information and training through
23 classes and seminars for both seniors
24 and service providers.

25 Libraries. They're excellent
2 sources for disseminating information
3 and offer participation in groups such
4 as book clubs and the like.

5 The use of technology. JASA
6 feels that using new technology, such
7 as video computers and some gaming
8 systems, might prove to be
9 cost-effective and could help attract
10 generations of seniors that are
11 familiar and comfortable with these
12 technologies.

13 Training. JASA recommends that
14 training be offered to service
15 providers on issues pertaining to older
16 adult fitness and senior specific
17 health and fitness activities. It
18 should be also available to center
19 participants, and there should be
20 methods for addressing individual, as
21 well as group needs.

22 Evaluation of programs and
23 participant progress. JASA recommends
24 that a well thought out framework be

25 developed, that would lend itself to
2 easily measuring improvement in the
3 health and well-being of participants
4 and which would be consistent across
5 multiple communities.

6 For instance, weight, strength,
7 flexibility and stamina of participants
8 could be measured before participating
9 in a program, and again several months
10 into the activities. This could help
11 to identify which activities and
12 programs are more effective. Likewise,
13 an inventory could be made of which
14 health conditions seem to predominate
15 in different centers and communities.

16 Many baby-boomers, that is
17 younger seniors, do not certify
18 themselves as senior citizens, and by
19 in large, will not attend the senior
20 center. JASA has found that many in
21 this age group are not interested in
22 committing themselves to one program
23 five days a week. They are looking for
24 socialization, fitness and educational

25 opportunities, and will be more likely
2 to attend an early evening program that
3 would follow the traditional senior
4 center program.

5 To accomplish this, so that the
6 variety of needs can be addressed, DFTA
7 and providers should consider extending
8 hours of programming to allow centers
9 to remain open into the late afternoon
10 and evening.

11 In conclusion, all of us want to
12 address the needs of the new generation
13 of older adults while continuing to
14 serve the needs of the older cohorts.

15 We want senior centers to play a vital
16 role in the life of the community, and
17 despite its vastness, the complexities
18 and challenges of life of New York City
19 make it more difficult to navigate as
20 one's own capabilities begin to
21 diminish.

22 That's why it's so important to
23 maintain easy accessibility to
24 communities centers within the many

25 neighborhoods of the City. Thank you
2 very much.

3 ASST. COMMISSIONER ROMERO:

4 Alex Wong, Brooklyn Chinese-American
5 Association. Elwood Wright, The Family
6 Center.

7 MR. WRIGHT: Good afternoon.

8 My name is Elwood Wright and I am 67.

9 I was 67 yesterday was my birthday. I

10 turned 67 years old. Thank you. And

11 my grandson lives with me. I live in

12 Canarsie, and I'm here to talk about a

13 program that helped -- that has helped

14 me and has kept my entire family

15 together.

16 Many people here today are

17 speaking about meal programs and senior

18 citizens, but they were not the program

19 I most needed. I still go to work as

20 the church organist, which I have done

21 for 40 years. The help I needed began

22 when my grandson, now age 11, came to

23 live with us. Several years ago, my

24 wife and I took in my son, age 33, and

25 his boy, my grandson. It was tough.
2 My wife has cancer and my own grown son
3 lives with us. That would be
4 challenging enough.
5 But most challenging of all is
6 our young grandson. It is not easy
7 raising a young man today. His life is
8 so different than anything I know
9 growing up. Than anything I knew
10 growing up. I am trying to care for my
11 wife and son as well, but dealing with
12 the challenges of raising an 11 year
13 old boy has been very difficult.
14 Just over two years ago we were
15 referred to The Family Center. I would
16 not be here today but for their help.
17 Our workers, Ms. Rebecca and
18 Ms. Jennifer, have been so very helpful
19 to us. I do not know what I would have
20 done without The Family Center's help.
21 We now communicate better and
22 have better knowledge about facing our
23 challenges. They are helping me

24 understand how to deal with my
25 grandson. They have most surely
2 improved our family life. It has been
3 a blessing for us. They have helped
4 care for me so that I could care for my
5 family. But they have also given me
6 the support to have my own life.
7 As I said, I have been a church
8 organist for 40 years plus. This year
9 I am planning to offer a concert,
10 classical music, including Chopin and
11 Beethoven. I would not consider doing
12 a project like that without the
13 encouragement and support The Family
14 Center has given our family.
15 The Family Center has been a
16 blessing to keep our family moving
17 forward in this hard time. I am very
18 grateful to them. The Department For
19 Aging has provided the support for them
20 to do this for me. I know there are a
21 lot of families like mine in Brooklyn.
22 I have met some of them through The
23 Family Center. I have met others from

24 across the City. I hope the Department
25 For The Aging will remember one of the
26 success stories, the many of us who are
27 served by the Grandparent Caregiver
28 Support Program at The Family Center.
29 The families you help are
30 families like mine. As you consider
31 the new plan, please, do not forget us
32 and the many other families like mine
33 who need this help across our City.
34 Thank you.

35 ASST. COMMISSIONER ROMERO: Is
36 Alex Wong here? Judy Kleve, Catholic
37 Charities.

38 MS. KLEVE: Good afternoon. My
39 name is Judy Kleve, and I am the vice
40 president of Older Adult Services for
41 Catholic Charities Neighborhood
42 Services, an affiliate of Catholic
43 Charities Diocese in Queens.
44 Catholic Charities provides a
45 vast array of quality services to over
46 16,000 older adults in Brooklyn and
47 Queens. One of the key points in

24 DFTA's Annual Plan, is the concern for
25 the increase in the elderly population
2 and our ability to have capacity to
3 assist this growing number of seniors
4 in the future. The recent
5 modernization of aging services was
6 instituted according to the Plan to
7 accommodate not only the existing
8 number of clients, but build in the
9 capacity to grow services to meet these
10 needs of the increasing senior
11 population in the near future.
12 In the recent case management
13 reorganization, at least six contracts
14 in this modernization did not have the
15 capacity to provide services for the
16 present number of identified clients.
17 The Catholic Charities South West
18 Queens Case Management Program was
19 contracted to provide services for 900
20 homebound seniors. However, it was
21 immediately discovered that over 175
22 self-assessed clients were not counted
23 in this 900 client base.

24 Also not included in this 900
25 client count were the 100 seniors on
2 the waiting list at South West Queens
3 or the number of new clients calling
4 daily for services.

5 In the month of August, six new
6 clients daily were added to the waiting
7 list, for a total of 132 new clients
8 for this month alone. In these first
9 six months, the number of case
10 management clients soared to over
11 1,400. That is 500 more clients over
12 the RFP number.

13 South West Queens Case Management
14 Program was asked to prioritize these
15 clients and develop a waiting list for
16 assessment because there is not
17 sufficient funding to build on to this
18 capacity. Our case loads are over 100
19 clients per worker with a wait list of
20 over 300 clients.

21 Other services, including home
22 delivered meals and home care, are also
23 maxed out. This leaves seniors without

24 services and our agency legally
25 vulnerable and liable for these clients
26 on our wait list.
27
28 We urge you to continue to
29 advocate for additional funding for
30 these most vulnerable seniors that we
31 have today on our wait list and who
32 will not have services for a long time.
33 Advocate also for those seniors that
34 are coming in the future and will also
35 be on long wait lists.
36
37 If additional funding is not
38 available, then other methods must be
39 explored to lower the case loads and
40 not stalemate the system. At the
41 recent case management provider meeting
42 at DFTA, these recommendations were
43 discussed and we asked for your
44 assistance to continue to work on them.
45 Pursue Medicaid funding
46 reimbursement to case management
47 programs for the assistance that the
48 workers provide to Medicaid clients.
49 This will enable additional funding to

24 be added to our programs to hire more
25 workers, to assist more clients, as
2 well as develop guidelines for the
3 programs to capture all the time
4 workers provide to these Medicaid
5 clients.

6 If a client is an APS client,
7 then APS should directly send the
8 referrals for home delivered meals to
9 the Meal-On-Wheels program. If this is
10 not possible, then an alternate method
11 should be developed to free up the
12 system to serve more clients.

13 Continue to advocate to the state
14 for additional EISEP funding. As we
15 all know, this funding is not
16 sufficient for the number of seniors
17 desperately needing home care and
18 housekeeping service, and the need will
19 only increase in years to come.

20 Communication between all DFTA
21 staff and the agencies should be
22 clarified to reflect the working
23 partnership of effectively resolving

24 this difficult situation together.

25 Continue to advocate for a COLA for the
2 case management staff. Most of the
3 case management staff were hired at the
4 same rate pay as in previous year.

5 Provide a written agreement that
6 the agencies are not responsible for
7 the additional clients that were given
8 to them above the contracted number and
9 are now on our waiting list, or develop
10 a system to place these additional
11 clients on a central DFTA wait list.

12 Continue to work with service
13 providers on eliminating case
14 management standards that are
15 bureaucratic in nature and maintain
16 those that ensure integrity practice
17 and maintain quality services.

18 Another key element in DFTA's
19 Annual Plan is to provide cultural
20 diverse programs that provide
21 assistance to seniors who are poor.

22 We, therefore, urge DFTA, in their
23 modernization efforts of senior

24 centers, to fund a sufficient number of
25 senior centers that can be truly
26 community-based and reflective of
27 seniors cultures, as well as have
28 sufficient funding to have appropriate
29 staff with activities that will assist
30 the seniors in maintaining their
31 health.

32 A number of Catholic Charities'
33 programs provide healthy aging
34 initiatives. These evidence-based
35 programs have produced outcomes which
36 have impacted seniors' health and
37 mental well-being and must be
38 continued.

39 We should not have two types of
40 programs in the system; one that has
41 all the bells and whistles, while the
42 other center is a second rate program
43 without these programs. The seniors
44 will then be made to feel less worthy
45 of a larger program and establish a two
46 tier system of service among seniors.

47 We urge DFTA to provide

24 sufficient funding for all senior
25 centers to have the depth and richness
26 in activities.

27 We also urge you, with this
28 modernization of the senior centers,
29 that there be sufficient funds to have
30 case managers in a prominent role in
31 assisting clients to access services in
32 the community, assisting seniors to
33 utilize the entitlements and benefits
34 programs.

35 Catholic Charities senior centers
36 have seen a big increase in service
37 needs by the seniors to assist them in
38 stretching their finances to pay for
39 the rising costs of food, energy and
40 rent.

41 Finally, we thank you for your
42 part, again, this year in seeing that
43 City discretionary funding continues,
44 enabling elected officials to add to
45 our DFTA contracts. Within Catholic
46 Charities' programs, in addition to
47 providing more educational and

24 recreational program, these funds pay
25 for rent, cover salaries for case
26 workers, pay for catering increases,
27 3 and expand our transportation services.
28 4 We hope that the Borough
29 5 President's funding will also be
30 6 continued to be added to our DFTA
31 7 contracts. These funds provide for our
32 8 Project Independence Program in South
33 9 West Queens, and the Catholic
34 10 Charities' Alzheimer's program in
35 11 Flushing. These programs would not
36 12 exist without this funding, and they
37 13 provide essential services to frail,
38 14 isolated seniors who are the most
39 15 vulnerable.
40 16 Project Independence brings
41 17 recreational services to the homes of
42 18 the most isolated, as well as it
43 19 facilitates a weekly group of visually
44 20 impaired seniors who meet at the
45 21 center. The Alzheimer's program serves
46 22 approximately 150 people annually, with
47 23 at least 20 clients daily, plus their

24 caregivers.

25 In addition, the Borough

26 President's funding and other Catholic

27 Charities' programs provides for

28 salaries for social workers and office

29 managers, educational, recreational

30 activities, for utilities, as well as

31 for telephone and postage costs.

32 Without this Borough President's

33 funding, these programs would not be

34 able to operate. Our main concern now

35 must be how to maintain quality

36 services during this time. We must not

37 sacrifice quality and we cannot slip

38 into the cultural -- I'm sorry -- slip

39 backwards into the culture of

40 mediocrity. We must work together and

41 advocate together to ensure our seniors

42 continue to have the highest quality of

43 services.

44 We thank DFTA and the

45 Commissioner for taking the lead in

46 this modernization effort of senior

47 services to provide more services to

24 seniors, and Catholic Charities fully
25 supports you in this. So we hope, in
26 the future, that we'll be able to
27 expand our services and expand the
28 services to all seniors.

29 We thank DFTA for holding these
30 hearings and inviting our
31 recommendations. Thank you.

32 ASST. COMMISSIONER ROMERO: Our
33 last speaker is Hannah Frund, JCC of
34 Greater Coney Island.

35 MS. FRUND: I'd like to bring
36 this testimony on behalf of Abigail
37 Adler, who could not be here. Abigail
38 feels privileged to serve as the
39 transportation coordinator of the
40 Senior Citizen Transportation Program
41 of the Jewish Community Council,
42 Greater Coney Island.

43 As you know, JCCGCI provides a
44 wide spectrum of senior citizens'
45 vocational, educational and technical
46 assistance services assisting the frail
47 elderly, the disadvantaged poor, the

24 educationally at-risk youth, the
25 immigrant population and the nonprofit
2 organizations of our communities.
3 JCC of Greater Coney Island is
4 one of the primary providers of a vast
5 array of senior citizen services in our
6 community. Thousands of our local
7 seniors depend upon JCCGCI for their
8 basic needs. JCCGCI consistently
9 marshals outside resources and provides
10 services at levels high above that
11 required by DFTA.
12 Thanks to DFTA and other public
13 and private sector support, our senior
14 citizen transportation program expanded
15 to become one of the largest such
16 programs in New York City. In 2007
17 alone, all funding sources combined,
18 51,015 transportation units of service
19 were provided to an unduplicated count
20 of 4,808 frail elderly clients -- over
21 7.7 percent of the total units of
22 service DFTA projects to provide this
23 year, according to the Annual Plan

24 Summary.

25 It is common knowledge that our
26 senior population is growing older and
27 more frail. The number of seniors
28 requiring assistance is rapidly
29 increasing, while those already
30 receiving help are requiring more
31 intensive assistance.

32 Hence, our area critically
33 requires increases in senior citizen
34 program funds. With this in mind, it
35 is obvious that it is vital that
36 current allocations in support of
37 senior citizen programs be maintained
38 and any decrease in funding would be
39 catastrophic.

40 Since time is short and the
41 testimony of others will focus on
42 various aspects of any reductions in
43 DFTA's budget, I want to focus my
44 remarks on a specific proposal that has
45 been considered in the past, namely the
46 importance of baselining Borough
47 President and City Council

24 discretionary support in general, and
25 their support of our senior citizen
26 transportation program particularly.
27 There are many who are under the
28 erroneous impression that Borough
29 President and City Council
30 discretionary and initiative
31 allocations are not really essential.
32 Our experience does not support that
33 assertion. Each community has
34 different needs. The baseline funding
35 provided by DFTA is not always adequate
36 to address the needs of every specific
37 community. It is for that reason that
38 our Borough President and City Council
39 members have discretionary funds to
40 fill the gaps and help assure that
41 adequate service delivery is available.
42 In the case of senior citizen
43 transportation, the baseline funding
44 provided by DFTA to the Jewish
45 Community Council of Greater Coney
46 Island Senior Citizen Transportation
47 Program is wholly inadequate to address

24 the immense transportation needs to the
25 six Brooklyn community districts, 10
2 through 15, where the JCC of Coney
3 Island is contracted to provide these
4 services, an area which is home to the
5 highest concentration of seniors in the
6 City.

7 In their great wisdom, the
8 Borough President and City Council have
9 substantially subsidized the DFTA
10 funding in this area to such an extent,
11 that approximately 60 percent of our
12 DFTA transportation program budget is
13 compromised with Borough President and
14 City Council discretionary initiative
15 allocations.

16 The loss of such massive amounts
17 of funds would severely cripple our
18 ability to deliver senior citizen
19 transportation services for those who
20 need it the most. Our agency, and more
21 importantly, the clients we serve
22 remain profoundly indebted to the
23 Borough President and the City Council

24 for their multifaceted support for
25 human and social services in our
26 borough, and specifically for their
27 ongoing visionary leadership in
28 providing transportation services to
29 the frail, low income, elderly of our
30 borough.

31 As you know, in addition to the
32 improving the quality of life of our
33 clients, senior citizen transportation
34 reduces their exposure and
35 vulnerability of the elderly to crime,
36 enables them to continue at home in
37 their own communities, prevents and
38 delays the need for unnecessary costly
39 institutionalization and fosters
40 neighborhood stabilization.

41 Many elderly people are
42 physically unable to use subways and
43 buses, and certainly cannot afford the
44 cost of private care service. This
45 problem is particularly exacerbated in
46 Coney Island and similar sections in
47 Brooklyn, but due to the high incidents

24 of crime against the elderly, seniors
25 are afraid to travel. Resulting that
26 they often stay at home alone, lose
27 contact with friends, and often become
28 depressed.
29 Moreover, because mobility is
30 often one of the first functions to
31 become impaired with advancing age,
32 availability of transportation is
33 essential to an elderly individual's
34 ability to continue living
35 independently.
36 In 1981, JCCGCI recognized this
37 problem and initiated a transportation
38 program that provides no-cost travel to
39 enable low-income, functionally
40 impaired elders, and especially those
41 who are sight-impaired and hearing
42 impaired, to keep medical and
43 entitlement appointments, go shopping
44 and to attend senior centers. Over the
45 years, thanks, in large part, to
46 Borough President and City Council
47 support, this highly acclaimed senior

24 citizen transportation program expanded
25 to become one of the largest such
26 programs in the City. As indicated
27 earlier, in 2007 alone, 51,015
28 transportation units of service were
29 provided to 4,808 frail elderly
30 clients -- mostly residing throughout
31 the six southern community districts of
32 Brooklyn, which contain the highest
33 concentration of elderly in the City.
34 Loss or reduction of the Borough
35 President and/or City Council
36 discretionary or initiative funding
37 that supports such a large portion of
38 this vital program would be nothing
39 less than devastating to the program
40 and the thousands of frail elderly
41 depending upon it.

42 ASST. COMMISSIONER ROMERO:

43 Okay. Do you have written testimony?

44 If you can --

45 MS. FRUND: We just thank the
46 Borough President's office and the City
47 Council for all they have done to

24 preserve the health, welfare and
25 dignity for our senior citizens in the
2 past, and specifically for their
3 ongoing visionary leadership in
4 providing transportation services to
5 the frail, low income elderly of our
6 borough. We encourage the continued
7 increase allocation of Borough
8 President and City Council funds for
9 their senior citizen transportation in
10 the future.

11 We all feel fortunate that DFTA
12 is headed by a caring, dynamic
13 Commissioner with exemplary, direct,
14 hands-on experience and proven success
15 addressing the concerns and needs of
16 our seniors.

17 We are certain this passionate
18 and strategic leadership will ensure
19 the safeguarding of these critical
20 services that our seniors' health and
21 welfare. On behalf of the thousands of
22 elderly who are too old and infirm to
23 be here today, I thank you for the

24 consideration and support.

25 ASST. COMMISSIONER ROMERO:

26 Thomas Kamber, OATS.

27 MR. KAMBER: Good afternoon.

28 Thank you for holding this hearing.

29 I'm sorry I'm late. I had to pick up

30 my kid at school, but I did want to

31 come -- and rabbi as well -- I did want

32 to come in and speak briefly about the

33 Department For The Aging Plan that we

34 read on the website.

35 As some of you may know, I run an

36 Older Adults Technology Services. It's

37 a nonprofit organization that provides

38 computer courses and technology classes

39 to senior citizens and older adults

40 across New York City at more than 30

41 locations.

42 Last year we taught 1,300 people

43 in multi-week courses that lasted for

44 20 sessions per site, and we taught

45 seniors not just how to go online and

46 do email and internet and some of the

47 sort of basic things that older adults

24 need to be able to do to communicate
25 with families and participate in sort
2 of modern mainstream society, but we
3 also did a whole range of community
4 building programs with seniors, using
5 the internet where we hosted forums and
6 special events where seniors could come
7 and talk about workforce issues,
8 because seniors, many of the ones that
9 are coming to our offices -- our
10 programs rather, are looking for jobs
11 and need the employment and the income
12 in order to stay engaged in their
13 communities, and also continue to
14 contribute, and also, obviously, pay
15 the rent and earn income that they
16 need.

17 We were very fortunate to be able
18 to host a series of videotaped sessions
19 with our seniors who are part of our
20 group called Senior Planet, one of
21 which the Commissioner himself
22 participated on and we're providing
23 seniors a chance to comment on issues

24 of the day, including DFTA's plans for
25 the senior centers and senior services
2 that are being provided.
3 We would like to obviously
4 comment on DFTA's modernization
5 component of the plan, which we think
6 is an important set of initiatives that
7 help provide new kinds of services for
8 seniors, and I'm aware of a lot of
9 challenges that the senior centers face
10 because so many of our partners are
11 local community-based centers, like the
12 Castle Hill Senior Center in the Bronx
13 or the Glenwood Center in Canarsie
14 Brooklyn, very small centers that are
15 really wrestling with what to do about
16 modernization.
17 A lot of these centers also
18 really want new programs, like
19 technology services, like the wellness
20 services that people are talking about.
21 Many of the centers want to have
22 progress and change and new kinds of
23 services and open up the model for

24 delivering programs to seniors so that
25 we can reach more of their needs, not 176
2 just for the older individuals that are
3 often in their 70s or 80s or even 90s,
4 but also being able to attract younger
5 seniors into the centers and create
6 what we're calling an intergenerational
7 environment within the senior centers.
8 I know the pace of change is very
9 fast and a lot of centers have been
10 struggling with this, but I think that
11 DFTA is making an effort to reach out
12 and provide services which we've seen
13 with some of our local sites, who are
14 now receiving calls from some of the
15 partner organizations that are
16 providing them with assistance.
17 I would love to see more overall
18 resources devoted to these initiatives
19 from the City's point of view. I think
20 that the Department For The Aging
21 should proceed with modernization, but
22 from a larger point of view, I think we
23 also need to make the case that the

24 overall budget for the Department For
25 The Aging needs to be increased over
26 time to facilitate a lot of these
27 transitions, and that is one of the
28 things that worries us, because there
29 is so much need for these new services,
30 and I'll just close with an example, in
31 May of this year, there was a five
32 minute spot on TV that mentioned that
33 Older Adults Technology Services
34 provides free computer classes to
35 seniors. That spot was at 6:00 in the
36 morning on a Tuesday, and when I
37 arrived at the office, our phone system
38 had already shut town.
39 We had calls that whenever we
40 picked up the phone and answered a
41 call, as soon as I put it down, it
42 would ring again. And so finally we
43 managed to pick it up between calls and
44 put an outgoing message on our machines
45 saying we were unable to answer calls
46 because we had a high volume of demand
47 for a program. Our office phones were

24 shut down for four days and we had to
25 bring in a consultant, an outside
26 person that we hired to come in just to
27 receive all of those calls and call all
28 those people back and get them on a
29 waiting list. The demand was that
30 intense. This is a Spanish language
31 station on Univision at 6:00 in the
32 morning. It was Mario Tapia from
33 Latino Gerontological Association that
34 made -- that discussed that issue.
35 So there's just such urgent need
36 for a lot of these new kinds of
37 programs, and we really need to
38 increase the overall funding, because
39 these are a lifeline for seniors to
40 connect to health care and to family
41 and other resources that they really
42 need.
43 So I commend the Department For
44 The Aging for being so open and willing
45 to discuss these things, and for coming
46 out and hearing our points of view, and
47 I wish you more success in growing

24 these programs and helping implement
25 them with you.

2 ASST. COMMISSIONER ROMERO: I

3 would like to thank our speakers for

4 sharing their views this morning. I

5 would also like to thank all the DFTA

6 staff who helped coordinate today's

7 event. The Department will issue a

8 formal response to the testimony

9 presented at this year's annual

10 hearings, which will be posted on our

11 website in late November.

12 We encourage everyone to visit

13 our website at www.nyc.gov/aging for

14 the latest news, press releases and

15 information on problems and services.

16 This hearing is officially

17 closed. Thank you.

18 (TIME NOTED: 1:14 P.M.)

2 CERTIFICATION

3

4

5 I, Edward Leto, a Notary Public

6 in and for the State of New York, do hereby

7 certify:

8 THAT the witness(es) whose

9 testimony is herein before set forth, was

10 duly sworn by me; and

11 THAT the within transcript is a

12 true and accurate record of the testimony

13 given by said witness(es).

14 I further certify that I am not

15 related either by blood or marriage, to any

16 of the parties to this action; and

17 THAT I am in no way interested in

18 the outcome of this matter.

19 IN WITNESS WHEREOF, I have

20 hereunto set my hand this 10th day of

21 November, 2008.

22

23 -----

24 EDWARD LETO

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