

1 JOINT HEARING BEFORE THE NEW YORK STATE SENATE
2 STANDING COMMITTEE ON SOCIAL SERVICES
AND
3 STANDING COMMITTEE ON CHILDREN AND FAMILIES

4 PUBLIC HEARING

5 TO IDENTIFY OPPORTUNITIES IN THE DELIVERY OF
6 SOCIAL SERVICES, FROM PRENATAL TO PRE-K, TO
7 ENSURE THAT SERVICES ARE BEING DELIVERED
EFFICIENTLY AND EFFECTIVELY TO THOSE WHO NEED THEM

8 Henry Street Settlement Gymnasium
9 301 Henry Street
10 New York, New York 10002

11 September 17, 2015
12 10:30 a.m. to 1:30 p.m.

13 PRESIDING:

14 Senator David L. Carlucci
15 Chairman
Senate Standing Committee on Social Services

16 Senator Tony Avella
17 Chairman
Senate Standing Committee on Children and Families

18 PRESENT:

19
20 Senator Velmanette Montgomery

21 Senator Diane J. Savino

22 Senator Daniel L. Squadron

23 Assemblyman Andrew Hevesi

24 Assemblywoman Maritza Davila
25

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Policy Coordinator and Early Childhood
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1 (Microphones not turned on.)

2 SENATOR AVELLA: We'll just get started, and
3 then I'm just waiting for Senator Savino to come
4 back. She'll be here in a couple of seconds.

5 Some of us got caught in traffic this
6 morning, including myself.

7 Senator Carlucci is still in traffic, coming
8 down from Rockland.

9 So -- but we will get started in a minute.

10 Joining me this morning is
11 Assemblyman Andy Hevesi, and, also, Senator Squadron
12 on my left.

13 I will not have an opening statement.
14 I actually was going to rely on Senator Carlucci for
15 the opening statement, but we're here to hear -- you
16 know, have testimony on social services and children
17 and family issues from a variety of sources.

18 The first panel is going to be from, really,
19 New York City.

20 With that, if, Assemblyman Hevesi, do you
21 have an opening statement?

22 ASSEMBLYMAN HEVESI: Yeah, just very briefly.

23 First, thank you, Senator Avella,
24 Senator Squadron, and, Senator Carlucci, who will be
25 joining us shortly, for having me here.

1 In particular, the issue of child poverty is
2 a huge problem, not just in the city, which we're
3 going to address today, but statewide.

4 (Microphones turned on.)

5 ASSEMBLYMAN HEVESI: The census numbers came
6 out yesterday.

7 So, for 2014, we have some upstate cities
8 that rank in the top of the United States for child
9 poverty.

10 We're looking at numbers for Rochester that
11 put them the fifth highest. Syracuse and Buffalo
12 having similar problems.

13 So we really need to look at a comprehensive
14 program.

15 So I'd like to thank all the Senators for
16 allowing me to participate, and let's get to it.

17 SENATOR AVELLA: Senator Squadron?

18 SENATOR SQUADRON: Thank you.

19 First of all, thank you to Senator Avella,
20 Senator Carlucci, and as you know,
21 Assemblyman Hevesi.

22 Welcome to my district. We are in my
23 district on the lower east side.

24 One way to avoid traffic coming into my
25 district is to never leave it.

1 [Laughter.]

2 SENATOR SQUADRON: So, just for future...

3 SENATOR AVELLA: So we're stuck here, is that
4 it?

5 SENATOR SQUADRON: I mean, you know, there's
6 no particular reason ever to leave it.

7 So, I also want to really thank Henry Street
8 Settlement -- Executive Director David Garza is here
9 today -- for hosting us. It's one of the great
10 providers in my district, in the city, and in the
11 state. Provides what the settlement-house model
12 always does, which is a comprehensive
13 cradle-to-grave services for communities, of focus,
14 however they need it.

15 And I also want to thank everyone who's going
16 to be testifying today.

17 Anyone who knows me knows that I have a
18 particular focus, some might even say obsession,
19 with early childhood issues, especially
20 evidence-based maternal home visiting.

21 And I look forward to hearing about that, and
22 other ways of giving kids, especially kids born into
23 poverty, better chance than too often see we they
24 have by the time they've even entered kindergarten.

25 So I look forward to this.

1 Thank you.

2 SENATOR AVELLA: Senator Savino?

3 SENATOR SAVINO: Thank you, Senator Avella.

4 I also want to thank everyone for coming
5 today, particularly the new Chair of Children and
6 Family, Senator Avella; and, Senator Carlucci should
7 be here momentarily, the Chair of Social Services;
8 Senator Squadron; and, our good friend from the
9 Assembly, Andy Hevesi.

10 I have a particular interest in this subject,
11 as many of you know.

12 I'm the previous chair of Children and
13 Families; and, in fact, I still hold the title of
14 child-protective specialist supervisor. And
15 I oftentimes threaten the mayor that I may show up
16 for my old job.

17 [Laughter.]

18 SENATOR SAVINO: So, I've had tremendous
19 experience in this field, starting 25 years ago as a
20 caseworker in HRA, and what is now ACS.

21 Overseeing the committee for the two years
22 that I had it, we put together -- we created
23 Close to Home during the time that I had it.

24 I've worked with every one of you in various
25 capacities over the years, and I know that we are

1 all very concerned about, you know, early childhood
2 education, early childhood care, nurse-family
3 partnership, homelessness...all of the issues that
4 social services touches.

5 And that's what this task force was put
6 together to address: Commonsense solutions to some
7 of the most complex social problems this city faces.

8 Thank you, Senator Avella.

9 SENATOR AVELLA: Thank you, Senator Savino.

10 Before we get started, I would just do a
11 little public announcement.

12 I'm also the Chair of the task force on the
13 delivery of social services in New York City.

14 We're going to be having a hearing on
15 October 7, at 250 Broadway, concentrating
16 specifically on homelessness in the city of
17 New York.

18 So some of you will be testifying at that
19 hearing as well.

20 ASSEMBLYMAN HEVESI: One more announcement,
21 if I can?

22 SENATOR AVELLA: Sure.

23 ASSEMBLYMAN HEVESI: Another announcement
24 for, September 24th, my Committee, the
25 Social Services Committee; the Education Committee;

1 and Children and Families, in the Assembly is going
2 to be holding a hearing on child poverty in
3 New York City.

4 That's the third that we've done statewide.

5 We've done Rochester, we've done Binghamton.

6 So that will be on September 24th. You're
7 all invited, including all of my colleagues. We'd
8 love to have you there.

9 SENATOR AVELLA: With that, the first panel
10 is already seated.

11 Good morning.

12 We have, Steven Banks, commissioner of
13 New York City Human Resources Administration;

14 Richard Buery, deputy mayor for Strategic
15 Policy Initiatives;

16 And, Roberta Holder-Mosley, director of the
17 Nurse-Family Partnership, New York City Department
18 of Health and Mental Hygiene.

19 Thank you for coming.

20 I don't know, who wants to start?

21 RICHARD BUERY: Thank you, and I will start.

22 So, good morning.

23 Thank you, Senators. Thank you, Assemblyman.

24 SENATOR AVELLA: Let me just make a comment.

25 We are having a little bit of technical

1 difficulty, so the PA system is not working yet.
2 So, you're not going to be able to hear the
3 testimony unless everybody keeps quiet in the
4 background.

5 We are recording, but --

6 Ah, okay.

7 Now, if you'll just hold off starting,
8 Senator Carlucci has joined us.

9 We were just about to get started.

10 SENATOR CARLUCCI: Well, good morning.

11 SENATOR AVELLA: I'm sure you have an opening
12 statement.

13 SENATOR CARLUCCI: Yeah, no, good to see
14 everyone.

15 I want to thank everyone for being here.

16 I want to thank Senator Squadron for hosting
17 us in your district.

18 And, thank Senator Avella for teaming up with
19 our joint hearing here today, with the Committee on
20 Social Services, and, Children and Family Services.

21 I want to thank Senator Savino and
22 Assemblyman Hevesi for being here, and, everybody
23 for working together, to really focus on the goal,
24 which is to make sure that we have a strong agenda
25 going into the next legislative session.

1 We want to hear from you, the people on the
2 front lines. Many of you have dedicated your
3 careers, your lives, to serving our most vulnerable
4 populations, and we want to hear what's working,
5 where the gaps are, where the successes are, and
6 come up with a strategy on ways we can help.

7 So, look forward to the testimony, and
8 working with my colleagues to get this stuff done.

9 Thank you.

10 SENATOR AVELLA: So I already introduced the
11 first panel. They were just about to speak.

12 SENATOR CARLUCCI: Okay.

13 RICHARD BUERY: Well, thank you very much.

14 Thank you, Senators; good morning.

15 Thank you, Assemblyman.

16 And thank you for the opportunity today to
17 testify.

18 I'm going to talk a little bit about the
19 implementation of New York City's Pre-K For All
20 initiative, our effort to bring free full-day
21 pre-kindergarten to every 4-year-old in New York
22 City.

23 And I also want to, before I start, also to
24 acknowledge Henry Street Settlement, which is not
25 only one of the most important poverty-fighting

1 institutions in our country, but, in particular,
2 (unintelligible) David Garza, who I think is one of
3 the most inspirational and innovative and impactful
4 leaders in the fight against poverty in our city.

5 So, very appropriate place to have this
6 conversation.

7 So last year, over -- last week, I'm very
8 proud to say that over 65,000 4-year-olds embarked
9 on their academic journey with full-day
10 pre-kindergarten in New York City.

11 That's bigger than the entire school system
12 of the city of Boston.

13 It's 12,000 students more than we enrolled
14 last year, and it's more than triple the
15 19,000 students enrolled in full-day
16 pre-kindergarten when Mayor de Blasio took office.

17 Pre-K For All, it is just one, of course, of
18 many initiatives that we've implemented to tackle
19 income-inequality in our city.

20 Child care is one of the top three expenses
21 incurred by families in New York City, often
22 surpassing housing costs.

23 Child-care costs, of course, are particularly
24 burdensome for low-income families.

25 According to the report, the self-sufficiency

1 standard for New York State, 2010, families with
2 children enrolled in free full-day pre-K save an
3 average of \$10,000 a year, a sizeable amount for, of
4 course, any family in New York City, but one that is
5 especially important to those in the lowest income
6 brackets.

7 One of the primary long-term benefits of
8 pre-K is the opportunity to bring more children;
9 particularly, more children from low-income
10 families, into the middle-class.

11 Pre-K provides children with an extraordinary
12 opportunity to get on the right track academically,
13 and stay on the right track. And the research about
14 the long-term benefits of pre-K is truly
15 overwhelming.

16 Children who attend quality full-day
17 pre-kindergarten programs have better academic
18 performance. They have a better chance of
19 graduating high school, going on to college, and
20 having a rewarding career. And, certainly, that is
21 the investment more than anything else that makes
22 the difference from moving the needle on poverty in
23 New York City.

24 2014 marked the first phase of the Pre-K For
25 All initiative.

1 In September 2014, again, more than
2 53,000 families enrolled.

3 One of the things that we talk about is why
4 this was so urgent for us. Why we had a 2-year plan
5 to reach true universality.

6 And, of course, the real answer: That
7 4-year-olds only have one chance to be 4 years old.

8 So the urgency of getting this program up and
9 running, we felt -- we felt very intently.

10 So the first stage of our work was to quickly
11 and effectively increase the supply of quality
12 full-day seats in New York City.

13 Pre-K programs, effectively, operate in three
14 settings: District schools. New York City early
15 education centers. These are private providers,
16 such as Henry Street. And, charter schools.

17 They are all held to the same quality
18 expectations.

19 We issued multiple request for proposals each
20 year to identify quality providers, a very
21 vigorous -- rigorous review process.

22 60 percent of applicants were approved last
23 year.

24 About 50 percent were approved this year.

25 The Department of Education provides

1 extensive support, oversight, and training programs,
2 to make sure they are operating at high quality
3 levels and delivering excellent learning experiences
4 for children.

5 For the 2015-16 school year, this school
6 year, the DOE also created what we call "stand-alone
7 pre-K centers." These are programs run by the DOE,
8 and overseen by early childhood directors who report
9 directly to the superintendents, but they're not
10 affiliated with a particular school.

11 In total, we have 63 stand-alone pre-K
12 centers, with just under 8,000 seats open in
13 15 districts around New York City.

14 If you ever want to have, like, a personal
15 high, go into a pre-K center with 400 4-year-olds,
16 doing art, building blocks.

17 And if you have a bad day, there is something
18 very wrong with you.

19 Classroom instruction is based on the
20 New York State pre-kindergarten foundations for the
21 Common Core.

22 It ensures that classroom interaction and
23 materials build on the strength, interests, and
24 diverse background of students.

25 At the pre-K level, what these standards

1 really mean is an approach to learning through play,
2 through rich learning experiences that invite
3 participation, engage the senses, and help children
4 explore their environment.

5 We made major investments in professional
6 development, and have launched really focused
7 teacher support tracks, to make sure the teachers
8 are the best teachers we've, and are creating great
9 experiences for our kids.

10 Second, you know, we have a big commitment to
11 ensuring that every program is safe.

12 Multiple agencies, including the departments
13 of Health, Buildings, Fire and Investigation, along
14 with the DOE and the Administration for Children's
15 Services, are tasked with ensuring the safety and
16 integrity of pre-K programs. This required
17 extensive interagency coordination, to make sure
18 that every site meets the highest standards.

19 And we're really excited about the added
20 investments we've made to make sure that every
21 program is one that any of us would feel perfectly
22 comfortable sending our children to.

23 Third, and most importantly, we work to make
24 sure that parents were aware of the amazing
25 educational opportunities available to their

1 children, and making sure that parents have an easy
2 time finding programs, and making that sure we built
3 in deep, deep, deep family supports, as central to
4 our work.

5 We have a pre-K outreach team which,
6 basically, engages in a comprehensive grassroots
7 strategy to get the word about pre-K out there.

8 Just an example, they made about 400,000 live
9 calls to parents of 4-year-olds leading up to the
10 school year.

11 We also created a centralized enrollment
12 process to make it easier for parents to apply to
13 the program for the first time.

14 And you can add all of your choices on one
15 application, whether it's a district school or a
16 community center, and get it matched, hopefully, at
17 one of your choices.

18 We've also established strong partnerships
19 with families and increased support for families in
20 high-need areas; everything from investment in
21 social work, investment in family support, extended
22 dual-language and enhanced-language programs to make
23 sure that families for whom English is not the
24 second language can effectively engage in our
25 programming.

1 It's (unintelligible) of work to make sure
2 that families are truly engaged. It's one of the
3 keys to a successful pre-kindergarten experience.

4 And as we move beyond our launch phase into
5 deep implementation, we look forward to continuing
6 to improve our system, especially our work with
7 families.

8 And, actually, I would also just say, it's
9 important that we say that it's is not too late to
10 apply even for this school year.

11 We continue to have seats in every part of
12 New York City available.

13 Our outreach team continues to work to
14 connect families to services.

15 And we hope that everybody here will do
16 everything they can to let families know it's not
17 too late to create a transformative experience for
18 your 4-year-old in New York City.

19 So, look forward to your questions when we're
20 done with our presentations, and thank you again for
21 having us.

22 SENATOR CARLUCCI: Thank you.

23 ROBERTA HOLDER-MOSLEY: Good morning,
24 Chairs Carlucci and Avella, Senator Squadron, and
25 members of the Committees.

1 My name is Roberta Holder-Mosley, and I'm the
2 director of the Nurse-Family Partnership program
3 within the division of family and child health at
4 the New York City Department of Health and Mental
5 Hygiene.

6 I am honored this morning to be on the panel
7 with both Deputy Mayor Buery, and HRA
8 Administration, Commissioner Banks.

9 On behalf of Commissioner Bassett, thank you
10 for the opportunity to testify on the topics of
11 social needs from the prenatal stage to the pre-K
12 age.

13 Ensuring that appropriate services and
14 supports are available for our children and families
15 in this period is a critical issue for the
16 department and the City, and I thank you for your
17 continued attention to it.

18 The health of our youngest New Yorkers is a
19 top priority for the administration, the department,
20 and our commissioner.

21 As testament to this commitment,
22 Commissioner Bassett created the division of family
23 and child health, which includes the bureaus of
24 maternal infant reproductive health, school health,
25 early intervention, and the oral-health program, to

1 address the health and development of children and
2 youth in the context of their families in a
3 comprehensive way.

4 This division creates and oversees programs,
5 policies, and services that support and promote
6 physical and socio-emotional health, primary and
7 reproductive health services, health equity, social
8 justice, safety and well-being, for New York City
9 families and children.

10 I would like to spend time today discussing
11 some of the department's many initiatives serving
12 this population.

13 Home-visiting programs:

14 The department provides a range of direct
15 services to families around New York City,
16 particularly in the neighborhoods burdened by poor
17 health outcomes.

18 Neighborhood-level approaches and
19 geographical targeting of resources are a focus for
20 our health-equity strategies, and we see this work
21 as supporting all communities and undoing inequities
22 and injustice.

23 The department's home-visiting programs for
24 new mothers and families are central to these
25 efforts.

1 Our Nurse-Family Partnership program, which
2 many of you know well, is a flagship program, and
3 demonstrates the significant and beneficial outcomes
4 that result from investing in parents and children.

5 NFP is a voluntary, evidence-based,
6 preventive public-health program for low-income,
7 first-time-pregnant women, their children, and
8 families.

9 Mothers participating in the program are
10 partnered with a registered nurse early in their
11 pregnancy and receive regular nurse home visits
12 throughout the prenatal and post-partum period,
13 until the child's second birthday.

14 Over the past 11 years, the New York City NFP
15 has served over 11,500 clients, and has graduated
16 over 2500 clients.

17 NFP has been researched extensively, and has
18 a substantial range of health and social benefits
19 for mothers, their children, and their families
20 resulting from this program.

21 Moreover, NFP is cost-effective and yields
22 economic benefits to taxpayers, generating a return
23 of 323 to 570 for every dollar invested.

24 We thank you for your ongoing commitment to
25 this program and urge you to continue to maintain

1 your support.

2 The department's second home-visiting
3 program, the newborn home-visiting program, offers a
4 short-term intervention for families with a new
5 infant.

6 Currently, the program is focused on
7 providing breastfeeding support and developmental
8 screening; addressing household hazards, such as
9 missing window guards and lead; promoting safe-sleep
10 and infant safety; and making appropriate referrals
11 for social services and community programs, such as
12 WIC.

13 Additionally, participating mothers receive
14 essential resources that promote mother, child, and
15 family health and safety, including cribs, breast
16 pumps, smoke and carbon monoxide detectors,
17 infant-safety DVDs, as needed.

18 Since its expansion in 2007, the nurse
19 home-visiting program has visited and provided
20 services to 35,000 families in targeted communities.

21 I apologize. Newborn home-visiting program.

22 Breastfeeding education and supports:

23 The department works on numerous fronts to
24 promote breastfeeding, which is critical to address
25 stark disparities in breastfeeding rates among

1 certain communities.

2 We have recently released data, showing that
3 women of color, as well as mothers who are
4 low-income, who don't have a college degree, who
5 qualify for Medicaid, and who are from high-poverty
6 neighborhoods, have the highest-- lowest,
7 I apologize, breastfeeding rates in New York City.

8 Mothers of color face structural barriers to
9 breastfeeding, including hospital policies and
10 practices, marketing of infant formula, social
11 norms, returning to work early, and unsupportive
12 work environments, as well as racism and
13 discrimination.

14 Given the well-established evidence of
15 disparities in breastfeeding, the department has a
16 comprehensive strategy to help diverse mothers
17 across the city get the support they need to
18 breastfeed.

19 We partner with maternity hospitals and
20 birthing centers to increase breastfeeding
21 initiation and continuation among mothers who choose
22 to breastfeed.

23 The New York City Breastfeeding Hospital
24 Collaborative provides evidence-based technical
25 support to 18 maternity facilities to promote

1 optimal maternity-care practices by achieving the
2 World Health Organization/UNICEF "baby-friendly"
3 designation.

4 To date, four hospitals in New York City have
5 achieved this highly-rigorous designation.

6 Through the Latch On NYC initiative, we work
7 with an additional 14 hospitals to reduce formula
8 supplementation and healthy breastfed babies during
9 the hospital stay, unless medically indicated, and
10 discontinued distribution of promotional or free
11 infant formula that can interfere with a mother's
12 decision to breastfeed.

13 Additionally, to address breastfeeding
14 disparities, we introduced community-based
15 initiatives, such as the Brooklyn Breastfeeding
16 Empowerment Zone.

17 Through this program, community members are
18 trained to become community breastfeeding educators,
19 educate workshops for families, and referrals to the
20 zone fatherhood support group, and actively include
21 faith-based leaders, small businesses, and community
22 members.

23 Support for women before, during, and after
24 labor and delivery:

25 "DOULAs" are women who are trained to provide

1 physical, emotional, and informational support to
2 women in childbirth.

3 DOULA support has been shown to improve birth
4 outcomes, control costs, and reduce health
5 disparities.

6 Over one-third of births end in a Cesarean
7 section, or, a "C-section," which rates highest
8 among African-American women.

9 However, C-section rates go down by one-fifth
10 among women whose births are attended by a DOULA;
11 yet, access to this supportive service is generally
12 reserved for those who can pay out-of-pocket.

13 To counter this imbalance, Healthy Start
14 Brooklyn and the Breastfeeding Empowerment Zone,
15 both run out of the Brooklyn District Public Health
16 Office, have sponsored several workshops to train
17 community residents as DOULAs.

18 Safe-sleep:

19 Sleep-related injuries remain one of the
20 leading causes of death among infants in
21 New York City, with a rate of more than three times
22 that of deaths due to other types of injuries, such
23 as falling, drowning, or poisoning.

24 However, while they are among the leading
25 causes, sleep-related-injury deaths are also among

1 the most preventible.

2 These outcomes are marked by striking racial
3 disparities.

4 Death rates of Black infants from
5 sleep-related injury are more than six times that of
6 White infants, and, of Hispanic infants, nearly
7 twice that of White infants.

8 The department's Safe-Sleep Initiative works
9 with families, home-visiting programs, and community
10 agencies to prevent unintentional injury deaths due
11 to suffocation.

12 Since 2007, the department has partnered
13 with the Cribs For Kids program to provide over
14 4600 cribs to families through the newborn home
15 visiting and Nurse-Family Partnership programs, and
16 has provided safe-sleep education to over
17 30,000 families.

18 Additionally, the administration recently
19 sponsored a safe-sleep public-awareness campaign
20 with ads in public transportation, check-cashing
21 facilities, nail and hair salons, laundry centers,
22 and on social media.

23 Early intervention:

24 Finally, I would like to highlight the
25 department's early intervention program which serves

1 over 30,000 children per year under age 3 with
2 developmental delays or disabilities.

3 Services are provided through a network of
4 over 100 community-based provider agencies that
5 conduct evaluations, provide care coordination, and
6 deliver services, such as speech therapy, special
7 instruction, and physical and occupational therapy.

8 The early intervention program has undertaken
9 several exciting initiatives to improve the quality
10 of early intervention service delivery.

11 For example, over 700 treating professionals,
12 service coordinators, and clinical leaders have
13 participated in our learning collaboratives.

14 A professional-development program focused on
15 evidence-based approaches to home-based services for
16 children with developmental delays, and building
17 expertise within the EI agencies delivering these
18 important services.

19 In addition, the early intervention program
20 has developed academic collaborations with the
21 State University of New York and City University of
22 New York to strengthen, professionally, the
23 educational preparation for individuals who plan to
24 work with the birth-to-three population with
25 developmental delays or disabilities in their future

1 careers.

2 Developing capacity and academic preparation,
3 and within the provider community, is key to further
4 ensuring quality EI service provision.

5 The programs I have touched on today
6 represent some of the resources the department
7 provides to children and families, from the prenatal
8 to pre-K stages, in order to help address the gaps
9 in health outcomes in New York City.

10 As you know, it is only by addressing these
11 and other social determinants of health that,
12 together, the branches and levels of government will
13 truly impact family and child poverty.

14 We look forward to working with the Senate to
15 continue to develop and expand approaches that
16 improve the health and well-being of our children
17 and families.

18 Thank you for the opportunity to testify
19 today.

20 I would be happy to answer any questions.

21 SENATOR CARLUCCI: Great, thank you very
22 much.

23 Before we move to Commissioner Banks, we've
24 been joined by another guest.

25 Assemblyman Hevesi, will you introduce.

1 Assemblywoman Maritza Davila, this is her --
2 she works in this area, very hard, and she's a
3 rising star in the Assembly.

4 I want to welcome her here today.

5 ASSEMBLYWOMAN DAVILA: Hi.

6 SENATOR CARLUCCI: Commissioner Banks.

7 STEVEN BANKS: Good morning.

8 Thank you very much for this opportunity to
9 testify.

10 I appreciate this further opportunity to work
11 with Senator Avella, Senator Carlucci,
12 Senator Savino, Squadron; Assembly Member Hevesi,
13 and, Assembly Member Davila, who I have known for a
14 very long time.

15 I've known Senator Savino for a very long
16 time too, as well as Senator Avella.

17 We appreciate the support that you've given
18 us for our reform efforts.

19 Yes, I know, Senator Carlucci and
20 Senator Squadron, I've known you for a long time
21 too.

22 SENATOR CARLUCCI: How long?

23 No, I'm just kidding.

24 STEVEN BANKS: You not as long as some of the
25 others, I must admit.

1 SENATOR SAVINO: Me the longest.

2 STEVEN BANKS: Anytime, as a commissioner,
3 you start testifying, and people try to figure out
4 how long they've known you, you're doing well.

5 [Laughter.]

6 STEVEN BANKS: In closing...

7 [Laughter.]

8 STEVEN BANKS: You have our testimony for the
9 record.

10 I just want to highlight a few aspects of it;
11 in particular, I want to focus on the services that
12 we provide to pregnant women, and children up to the
13 age of 5. And then, where relevant, mention some of
14 our reforms.

15 But there's a lot of testimony here, and
16 I know you'll have it for the record, and then I
17 know there are other hearings that will be held.

18 I think, by way of background:

19 HRA has a budget of \$9.9 billion, and a
20 headcount of 14,000 staff on the front lines,
21 providing services to more than 3 million low-income
22 children and adults in the city.

23 The key aspects of our services are economic
24 support and social services for families and
25 individuals through the administration of major

1 benefit programs, cash assistance, food stamps,
2 Medicaid, and child support; homelessness- and
3 eviction-prevention assistance;
4 educational/vocational employment services;
5 assistance for persons with disabilities; services
6 for immigrants; civil legal aid; and disaster
7 relief; and for the most vulnerable New Yorkers,
8 HIV/AIDS services, adult protective services, home
9 care, and programs for survivors of domestic
10 violences.

11 Our services assist low-income New Yorkers in
12 staying on the job and in the workforce, providing
13 food and health care for their families, and
14 averting homelessness.

15 In a city where the cost of living has
16 steadily increased, households that depend on the
17 earnings of low-wage workers can quickly be derailed
18 by unforeseen emergencies and expenses.

19 This is the case for more than 25,000 HRA
20 cash-assistance clients who are employed; however,
21 their incomes are so low that they still qualify for
22 cash assistance.

23 For them, increasing the minimum wage is
24 essential to moving out of poverty and off of the
25 HRA caseload.

1 For low-income working New Yorkers and their
2 children under the age of 5, among other assistance,
3 HRA provides these key work supports:

4 197,484 New York children under the age of 5
5 receive Medicaid through HRA, and tens of thousands
6 more through the new state health exchange.

7 94,494 children under the age of 5 receive
8 SNAP food-stamp assistance, and millions of children
9 and adults receive meals through food pantries and
10 community kitchens supported by HRA funding.

11 107,000 New Yorkers receive one-shot rent
12 assistance each year and utility assistance to keep
13 their homes and continued utility services,
14 including many children under the age of 5.

15 44,000 families seek services related to
16 domestic violence they're experiencing, and
17 3877 families receive domestic-violence shelter from
18 HRA, including working heads of households and their
19 children.

20 9,044 New Yorkers receive eviction-prevention
21 legal assistance, including working heads of
22 households and their young children.

23 Having access to comprehensive health care
24 allows families with children to stay healthy, in
25 school, and working, and gives them the security in

1 knowing that they're not one potential medical
2 emergency away from economic catastrophe.

3 Having food-stamp benefits gives families the
4 chance to put fresh and nutritious food on their
5 table to alleviate hunger and food insecurity for
6 children.

7 In addition to work supports for families
8 and individuals, over the past year, as has been
9 the case for the past 7 years, HRA has provided
10 basic cash assistance to a stable caseload of
11 500,000 adults and children, 38,926 of whom are
12 below the age of 5.

13 Having access to cash assistance allows
14 parents to pay for necessities for their children,
15 including clothing, public transportation, and
16 school supplies.

17 Every day HRA helps thousands of the most
18 vulnerable New Yorkers, including children under the
19 age of 5, by providing energy assistance,
20 homelessness prevention and legal aid, support for
21 children and adults recovering from the trauma of
22 domestic violence, services for people with HIV and
23 AIDS, child-support enforcement, access to expanded
24 tax-credit assistance.

25 These services are assisting families in

1 moving towards self-sufficiency, and researchers
2 have positively associated many of these social
3 services with improved long-term outcome for
4 clients, particularly children.

5 Homelessness-prevention programs reduce risk
6 factors for poor school outcomes.

7 Medicaid and other public-insurance programs
8 are associated with better health, lower mortality,
9 and decreasing household debt.

10 Food-stamp benefits improve long-term health
11 and self-sufficiency.

12 Access to pre-natal care fosters healthier
13 children and provides long-term benefits to mothers.

14 And child support is positively associated
15 with a number of child well-being indicators, such
16 as educational attainment, schooling, and cognitive
17 outcomes.

18 For the past 18 months, HRA has implemented
19 or substantially developed reforms of policies and
20 procedures to better serve low-income families and
21 individuals, aimed at reducing the number of
22 New Yorkers living in poverty and helping clients
23 move off the HRA caseload.

24 We're focused on reforming counterproductive
25 policies that harm clients and have an adverse

1 impact on staff workload, and subject the City to
2 financial penalties due to unnecessary fair
3 hearings.

4 I want to take this opportunity to again
5 thank all of you on this panel for your leadership
6 and assistance to enact the reform of the Fair
7 Hearing Charge-Back Law; particularly,
8 Senator Avella and Assemblyman Hevesi were the
9 prime sponsors.

10 This is the law that subjects New York City
11 to, potentially, \$10 million in a penalty, even
12 though we've eliminated a backlog of 70,000 fair
13 hearings that we had inherited.

14 And we also appreciate your support to enact
15 reform of the cash-assistance program, in which
16 we're currently barred from providing aid to
17 households in which a household head is -- has
18 not -- has cured employment-program compliance
19 issue, but is still subject to a durational
20 sanction.

21 Both bills are pending submission to the
22 Governor, and we appreciate your leadership in
23 getting to this point, and we're hopeful that they
24 will both be signed.

25 We've already enacted more than 100 key

1 reforms aimed at creating a more efficient and
2 effective service-delivery system, to ensure that no
3 one who is eligible for services is denied due to
4 bureaucratic barriers.

5 Our testimony highlights a number of the
6 areas that we've made these changes in.

7 And, again, I want to thank you for your
8 support in moving forward.

9 I want to, in particular, note some of the
10 issues that are of concern to us, as we move
11 forward, just in closing.

12 We've done a lot over the past year to put in
13 place legal-services programs to keep people in
14 their homes, and rental-assistance programs to keep
15 people in their homes.

16 In the -- when these programs for legal
17 services are fully implemented in FY 17,
18 New York City will be allocating nearly \$76 million
19 for legal assistance for low-income New Yorkers in
20 our baseline budget. This is in comparison to up to
21 \$6 million that had -- the prior administration had
22 funded, year-to-year.

23 There's no other municipality that allocates
24 even a small fraction of what New York City is
25 committing to provide access to civil justice.

1 And this provision of civil legal assistance
2 is a key component of the administration's overall
3 efforts to address poverty and income inequality.
4 And, obviously, there's a tremendous benefit for
5 children under the age of 5 to be able to remain in
6 their homes.

7 We've implemented a number of
8 rental-assistance programs, with your leadership and
9 support. We hope to continue to be able to expand
10 those programs.

11 For all of these programs to be successful in
12 preventing and alleviating homelessness, and helping
13 low-income children under the age of 5, we need a
14 sustained investment from both the City and the
15 State for years to come.

16 And we're very appreciative of your
17 assistance through the Legislature, the Senate and
18 the Assembly, in terms of allocating -- in terms of
19 obtaining the allocation of \$220 million over
20 4 years for rental assistance and related
21 homelessness assistance, the \$15 million to prevent
22 evictions and alleviate homelessness through a pilot
23 program, to increase supplemental housing allowances
24 that have not been raised in over a decade, and your
25 support for supportive-housing units.

1 However, there's much more that needs to be
2 done to address the needs of children and to keep
3 them in stable homes, and to move children and
4 adults from shelters into permanent housing.

5 We're looking forward to continuing to work
6 with the members of these Committees, and all of
7 your leadership, to respond to these pressing needs,
8 and to work with our state partners to adequately
9 fund necessary programs and services, including
10 increases in the amount of supportive housing, and
11 addressing the need for rent allowances that are
12 adequate to raise children in a home, as required by
13 the state social services law.

14 We've accomplished a great deal over
15 18 months, with your support, but we know we've much
16 more to do, and will continue with our former
17 initiatives during the coming year.

18 And with your assistance in the enactment of
19 our legislative priorities to further these reforms,
20 we know there's much more that can be accomplished
21 for children and vulnerable people in New York City.

22 Thank you again for your support.

23 SENATOR CARLUCCI: Great, thank you,
24 Commissioner Banks.

25 Before we take questions, I'd like to

1 introduce, and welcome, Senator Montgomery.

2 Senator Montgomery, thank you for joining us.

3 Would you like to say a few words?

4 SENATOR MONTGOMERY: No, I'm fine.

5 SENATOR CARLUCCI: Okay. Great.

6 So, do we have questions?

7 Senator Savino?

8 SENATOR SAVINO: First of all, I want to
9 thank all of you for your testimony.

10 And I will try and be brief, because there's
11 many of us, and I'm sure we want to cover a lot of
12 issues.

13 I had hoped that ACS would be here today to
14 talk about some of the issues that affect children
15 through their agency. But, unfortunately, they are
16 not here, so I'm going to ask the deputy mayor a
17 question about an issue that comes under the purview
18 of ACS.

19 You spoke extensively about the UPK program
20 and its success, and that's one of the reasons why
21 we were very supportive of it when the mayor came to
22 Albany to seek authorization for it, and money.

23 But one of the unintended consequences of the
24 success of UPK has been its effect on EarlyLearn.

25 And while I have never been a big fan of

1 EarlyLearn, it was implemented by ACS, many agencies
2 adapted to it, and now they find themselves on the
3 verge of losing programs. It's affecting Catholic
4 Charities, both in Brooklyn and in Staten Island,
5 other parts of the city.

6 And so what do we say to these early
7 childhood programs, EarlyLearn; what do we say to
8 the non-profits that adapted to EarlyLearn; who now
9 find themselves about to go under?

10 RICHARD BUERY: So I think a few things might
11 help to understand some of the specific challenges
12 you're addressing.

13 Obviously, the EarlyLearn system remains
14 a bedrock part of the system of the supports we
15 provide for families with young children in
16 New York City. And, indeed, the EarlyLearn system
17 is part of the pre-K system, in that 4-year-olds in
18 the EarlyLearn system are part of the full-day pre-K
19 seats that we offer to children --

20 SENATOR SAVINO: Not the 3-year-olds.

21 RICHARD BUERY: Not the 3-year-olds, but the
22 4-year-olds.

23 And so there are a number of things that
24 we've tried to do, understanding some of the, you
25 know, unintended consequences of the investments

1 we've made in the 4-year-old system.

2 So just as a few examples:

3 We've worked very hard to ensure that
4 providers that have 3-year-old classrooms are able
5 to maintain enrollment, able to maintain their
6 teaching staff, because that can be a challenge, as
7 we are hiring thousands of pre-kindergarten teachers
8 around the city.

9 And we tried to work very hard with
10 EarlyLearn providers to make sure that they continue
11 to do their good work, and that opening 4-year-old
12 classrooms, opening pre-kindergarten classrooms,
13 does not cause undue harm in EarlyLearn classrooms.

14 We do all the work towards raise rate
15 disparities. For example, being able to pay
16 families on the basis of capacity -- pay provided on
17 the basis of capacity -- on contracted capacity.

18 In EarlyLearn, a very critical way of making
19 sure that providers were able to pay their bills,
20 maintain their overhead, even as enrollment may ebb
21 and flow based on demand in their neighborhoods.

22 But what I would say is that, you know, we
23 continue to engage community of providers on a daily
24 basis to try to address very real concerns.

25 I mean, EarlyLearn system absolutely has

1 challenged. We don't say otherwise.

2 We don't have an overnight fix for all of
3 those challenges, but in addition to all the things
4 that we've tried to do, what we've tried to do, most
5 of all, is to maintain ongoing dialogue with the
6 community.

7 And I think we've tried to be responsive, and
8 will continue to do so over time.

9 SENATOR SAVINO: Well, this is -- just keep
10 it on your radar. It's an evolving problem.

11 And then for my good friend,
12 Commissioner Banks, you know, I realized today
13 is September 17th, so it is the actual
14 25th anniversary of my first day as an employee at
15 HRA.

16 STEVEN BANKS: Yay!

17 SENATOR SAVINO: So I've been -- I remember
18 HRA when it was the superagency, before it broke
19 down into multiple agencies, before welfare reform,
20 post-welfare reform.

21 The more things change, the more they stay
22 the same.

23 But I noticed the other day, you mentioned
24 the bill that we worked on, the conciliation bill,
25 which, in my opinion, is very important to helping

1 you guys, you know, go forward with your reforms.

2 There is objection to it, though, obviously,
3 from certain quarters.

4 And, in fact, the "New York Post," I think on
5 Monday, or Tuesday, wrote a scathing --

6 STEVEN BANKS: Yesterday.

7 SENATOR SAVINO: -- yesterday, wrote a
8 scathing editorial about how you and your agency are
9 trying to roll back welfare reform and take us back
10 to the -- you know, the bad old days, which, of
11 course, is absurd.

12 But what do you say -- what do we say to the
13 Governor's Office who's going to ask for an opinion
14 as to why this isn't the case?

15 Why this is actually a progressive,
16 forward-thinking approach towards welfare reform, as
17 opposed to just maintaining a system, that while it
18 may have worked in 1995, is not necessarily the same
19 approach we should use today?

20 How do we -- what am I -- what should I tell
21 the Governor when he says, Why should I sign your
22 bill, Senator?

23 STEVEN BANKS: I think the problem with
24 arguments that we're rolling things back ignores the
25 reality that the promise of welfare reform has

1 actually not been realized for our clients in the
2 way that it should be.

3 The focus for the prior 20 years, prior to
4 the current administration, was on welfare reform
5 equals caseload reduction.

6 Welfare reform was meant to equal addressing
7 poverty, and moving people out of poverty.

8 The programs that we are putting in place are
9 designed to end the churning.

10 "Churning" is the closing of cases in one
11 month in order to reduce the caseload in that month,
12 with the result that the person applies in a later
13 month and is counted in that month.

14 And every month a certain number of people
15 are being churned on and off the caseload.

16 The most important statistic to focus on is
17 the annual unduplicated numbers of people receiving
18 assistance.

19 Whereas the monthly numbers have varied
20 because of this churning process, the unduplicated
21 annual number has been flat.

22 And what we want to do is to focus on moving
23 people off the caseload so that they can move to
24 self-sufficiency, rather than churning them on and
25 off the caseload.

1 That churning is what led to the unnecessary
2 fair hearings, which is what led to the potential
3 \$10 million penalty. And we spent the last
4 two years working down that backlog, with your
5 support, making those changes.

6 The sanction reform bill is extremely
7 important, because the sanction law, as it exists,
8 says that if a client makes the mistake, and then
9 comes back and says, "I'm ready to participate in
10 work programs," that client must serve out a
11 durational sanction, which deprives that client's
12 household of the benefits that the family needs to
13 live off of, which could result in an eviction,
14 which is going to be more expensive in the long run.

15 The sanctions approach that had been taken in
16 the prior 20 years does not promote
17 self-sufficiency. It promotes homelessness.

18 One of the first things that we saw when we
19 came in, is we analyzed the numbers of people that
20 had had an HRA case closing or sanction, that were
21 applying for DHS shelter.

22 We found that, based upon a cohort analysis
23 of people who applied for shelter in 2013, that
24 23 percent had had an HRA case closing or sanction
25 in the prior 12 months.

1 The sanction reform is aimed at that; the
2 sanction reform is aimed at addressing that problem,
3 to give us the tools to reengage people.

4 I gave you the example of the person who
5 makes a mistake and we can't reengage.

6 What about the person who doesn't make a
7 mistake?

8 They behave willfully, but then they still
9 come back and they want to be helped.

10 We can't help them.

11 We're being deprived of a critical tool to
12 engage people, and to give them the assistance.

13 And, at the same time, we've got data showing
14 that this is associated with people who end up
15 applying for shelter.

16 So it's a critical piece.

17 We definitely appreciate your support.

18 We've had very good conversations with people
19 in the -- at the state level, people on the city
20 level.

21 I think there's a recognition that this is a
22 critical piece of moving forward.

23 I read what was written about what we're
24 trying to do.

25 We're trying to actually enable families and

1 children to have opportunities and move forward.

2 The revamping of our employment programs are
3 really in line with that. They're focused on
4 education and training.

5 In order to construct this program, we looked
6 all across the country at what the best things were
7 happening in the states. Whether they were red or
8 blue, we looked at them.

9 And in red states there were some good things
10 happening, and some states some bad things
11 happening.

12 Same with the blue states.

13 And we picked the things that were shown to
14 be most effective.

15 Education and training were shown to be
16 effective.

17 We're being criticized for this, but the data
18 doesn't lie.

19 If you don't have a high school diploma,
20 you're going to earn about \$20,000.

21 If you have a high school diploma, you're
22 going to earn about \$30,000.

23 If you have two or more years of college,
24 you're going to earn about \$40,000.

25 What could be a better way to move people off

1 the HRA caseload and out of poverty, and make a
2 difference for children under the age of 5, than
3 these kinds of reforms?

4 We're going to keep working, and with your
5 support, we're going to continue to make progress.

6 SENATOR SAVINO: Thank you.

7 SENATOR CARLUCCI: Assemblyman, did you have
8 any questions?

9 ASSEMBLYMAN HEVESI: Yeah, absolutely.

10 Maritza, you want to go? Go ahead.

11 ASSEMBLYWOMAN DAVILA: Oh, no, no. You go.

12 ASSEMBLYMAN HEVESI: Okay.

13 First, thank you all for your testimony.

14 And, Deputy Mayor, I just want to start, you
15 touched on -- first, thanks for your work with
16 pre-K.

17 I've got a 6-year-old. She didn't go to
18 pre-K, but she's in first grade.

19 And considering the kid who was yelling here,
20 I'm really happy my kid's in first grade today.

21 Okay, lighten up people. This is going to be
22 a long day.

23 [Laughter.]

24 ASSEMBLYMAN HEVESI: So, first, you
25 mentioned, when you were talking about pre-K, the

1 self-sufficiency standard.

2 And I think that's an important standard.
3 That's going to be something that we're going to
4 need to consider because, from my perspective, the
5 federal poverty level is an outdated standard, it
6 doesn't make sense.

7 So, we'll have conversations about that in
8 the future.

9 For Ms. Mosley, I just want to say, thank
10 you.

11 Your programs are fantastic, and that's why
12 we in the Legislature come back every year and we
13 try to increase it.

14 I believe you had an increase of 3 million
15 this past year.

16 ROBERTA HOLDER-MOSLEY: Yes. Thank you.

17 ASSEMBLYMAN HEVESI: We're going to keep
18 coming back, because we know that your programs
19 work.

20 And I just want to say publicly, thank you.

21 And, now, Mr. Banks, you're doing some
22 outstanding work. And I want to thank you for all
23 of your help, and your advocacy, when we're talking,
24 particularly about rental assistance, and also legal
25 services, to keep people from becoming homeless.

1 That, from my perspective, is the first prong
2 in a two-pronged assault on homelessness.

3 So, we did increase money in the state for
4 rental assistance. We did not do as much as I think
5 we should have.

6 But, you've got to keep people in their
7 homes, and having programs that at least come close
8 to the federal fair-market rate level is exactly
9 what we need to do.

10 So we've started that process.

11 The second component, which I would,
12 publicly, am now going to ask for your help on, and
13 I know the City is considering, is the back end:
14 What do you do with people who are in the system?

15 And the answer, to get them out, is
16 supportive housing.

17 And that's why, I know you're looking at it,
18 but that's why I want to make a full case for a
19 robust NY/NY IV agreement, that has 35,000 units
20 statewide. It will be the first time we have
21 5,000 units upstate, because they're sorely needed
22 there; 30,000 for the city.

23 I know you're not going to answer this at
24 this point, but this is my advocacy.

25 We sorely need that, and that will be --

1 Everybody getting an Amber Alert?

2 SENATOR SAVINO: Is that what that is?

3 ASSEMBLYMAN HEVESI: Yeah.

4 Okay. Usually, that's my wife telling me to
5 stop talking.

6 Just to finish up:

7 A robust NY/NY IV is our way out of the
8 homeless crisis.

9 I would ask you to seriously consider that.

10 We have a broad coalition who is ready to
11 partner with you, to get what we need out of the
12 State, particularly Governor.

13 We have to do more.

14 We have to match your commitment, and make
15 sure that we get 30,000 units for the city.

16 But I thank you for the fantastic work that
17 you do.

18 Thank you.

19 STEVEN BANKS: Thank you.

20 You're an excellent advocate.

21 SENATOR CARLUCCI: Thank you, Assemblyman.

22 Senator Squadron.

23 SENATOR SQUADRON: Thank you.

24 And thank you all for your testimony.

25 It's inspiring work you're all doing.

1 And I think you see, from a diverse panel
2 here, a lot of enthusiasm about it.

3 Let me sort of ask the question this way:

4 First of all, you all, I assume, agree with,
5 sort of, what the other members of the panel talked
6 about.

7 You all agree that this is a broad picture
8 that requires every component that we heard about
9 today: Pre-K. Some of the more medically-based
10 early childhood programs. Cash assistance.
11 Training. Some of the things that HRA does.

12 Is that fair to say?

13 ROBERTA HOLDER-MOSLEY: Yes.

14 SENATOR SQUADRON: And I'll just kind of go
15 down the line.

16 Commissioner Banks, obviously, the housing
17 issue that Assemblyman Hevesi raised, there's an
18 enormous gap in what's funded in the work you do.

19 A lot of what you talked about with
20 Senator Savino, and others, is some changes in what
21 you're allowed to do, because the way it works, with
22 federal TANF and State support, when it comes to
23 cash assistance, when it comes to dollars, to help
24 support people through training, that's -- we have a
25 funding stream for that, that's based on the number

1 of people who need it.

2 Obviously, the fewer people who need it, the
3 better city we have and the more money we save. But
4 there's a funding stream for that, based on the
5 need.

6 Is that fair to say?

7 STEVEN BANKS: Yes.

8 SENATOR SQUADRON: And, Deputy Mayor, it's
9 fair to say that pre-K has a lot of important
10 statistics behind it, that it's important. But
11 that, at this point, the State, and we've to stick
12 with this, it's critical, gives the City the dollars
13 it needs for the kids who enroll in full-day pre-K?

14 Is that right that, hopefully, should
15 continue?

16 RICHARD BUERY: Yeah, we hope, and expect
17 that the State will continue with the historic
18 investment in the city's pre-K expansion.

19 SENATOR SQUADRON: Great.

20 And, Ms. Holder-Mosley, when we talk about
21 early childhood and maternal-support programs, does
22 the City have the funding it needs from the State to
23 provide those to all of the eligible parents?

24 ROBERTA HOLDER-MOSLEY: No.

25 SENATOR SQUADRON: It does not?

1 ROBERTA HOLDER-MOSLEY: No.

2 SENATOR SQUADRON: Do have you any idea about
3 what percentage it does have?

4 ROBERTA HOLDER-MOSLEY: If I looked --
5 I think we would have to get back to you with those
6 numbers, to ensure that I'm giving you the accurate
7 information.

8 SENATOR SQUADRON: So let me ask:

9 When we talk about evidenced-based maternal
10 home-visiting programs -- and, here, I'll turn to
11 the deputy mayor and the commissioner -- when you
12 look at the evidence behind them, and the
13 Commissioner talked a lot about the evidence he has
14 done; the deputy mayor, I've heard very compelling,
15 talking about the evidence behind pre-K previously;
16 are early evidence-based maternal home-visiting
17 programs less valuable?

18 Are they not for real when it comes to the
19 evidence and the importance of changing people's
20 lives?

21 STEVEN BANKS: No -- no, I mean, clearly, the
22 evidence behind -- one of the reasons why we make
23 the investment in the programs, like NFP, is a very
24 strong evidence-based behind the impact of early
25 home-visiting programs, and other types of programs,

1 that engage parents.

2 You know, I would say that, in our
3 administration, you know, Mayor de Blasio, when you
4 think about how to reform the education system
5 broadly, engaging parents in a comprehensive way is
6 critical to the way we think about reforming the
7 educational system.

8 And it's all the more so, and certainly no
9 less so, when we think about early --

10 SENATOR SQUADRON: And, by the way,
11 Mayor de Blasio's vision or yours, does that start
12 at age 4?

13 RICHARD BUERY: For --

14 SENATOR SQUADRON: Does the engagement start
15 at age 4?

16 RICHARD BUERY: No. We believe, of course,
17 the earlier you can support children, the better.

18 And so we believe that the continuum of
19 supporting children, it starts at birth, obviously,
20 and we want to make sure that we're supporting
21 families as early as possible, as well as possible,
22 as comprehensively as possible, over the long term.

23 SENATOR SQUADRON: Thank you.

24 And, Commissioner, that is true, in terms of
25 children as they enter pre-K, enter the enormous and

1 phenomenal project the deputy mayor is in charge of.

2 Is it also true for families entirely, that
3 engaging families that early makes a difference when
4 you talk about the kind of home stability,
5 professional stability, criminal justice avoidance,
6 that is so important to your work?

7 STEVEN BANKS: I mean, certainly, what we've
8 seen in the work that we've already been doing in
9 the last 18 months, that early intervention directly
10 with families makes a difference.

11 It's the old adage, "An ounce of prevention
12 is worth a pound of cure."

13 SENATOR SQUADRON: So let me just ask: Why
14 is it that the State funds --

15 Again, has some crazy policies that we need
16 to change. And Senators Avella and Savino, and
17 Assemblyman Hevesi, and others, have done a lot of
18 work on that, thank goodness.

19 -- but, you know, essentially, funds cash
20 assistance based on need, State funds pre-K --
21 universal pre-K now, thanks to the leadership of
22 this City administration; but doesn't fund
23 evidence-based maternal home visiting that everyone
24 agrees would help everyone's job?

25 RICHARD BUERY: You're asking us why the

1 State does not?

2 SENATOR SQUADRON: Correct.

3 [Laughter.]

4 SENATOR SQUADRON: Look, the State is helping
5 out everywhere else.

6 I mean, it would be a little wacky for the
7 State to say: Yes, we should have cash assistance
8 and training opportunities and housing support.
9 Yes, we should start the educational process and
10 those supports at age 4, not age 5 or 6, as we did
11 not too long ago in a lot of people's lifetimes.
12 But, we shouldn't be helping new moms and their kids
13 who would benefit in exactly the same way they do in
14 the other two programs.

15 So it's a little weird for the State to say
16 yes to two out of three, is what --

17 RICHARD BUERY: Well, again, what I would say
18 is that, again, we've articulated very clearly our
19 commitment to supporting families; particularly,
20 low-income families who escape from poverty.

21 The thing, or the tie, that binds us all
22 together, to be a robust and vibrant city, one that
23 continues to be a leader in the next century, we
24 need to have an economy that works for all
25 New Yorkers, not just some New Yorkers.

1 And, clearly, one of the things that drives
2 that kind of change for families are early
3 intervention -- early comprehensive interventions
4 that support young people, the emotional
5 developmental, educational development, economic
6 development, as early as possible.

7 So we would, of course, welcome the
8 opportunity to work with the State, to make the kind
9 of targeted program investments that children need.

10 And we're excited that this is a topic that
11 the Senate and Assembly are pushing for, and we
12 would love to continue a dialogue on these issues.

13 Clearly, the more support we have to invest
14 in these services, the better off we all are.

15 You know, people talk about these program
16 being expensive.

17 And I prefer to describe them as
18 "resource-intensive," not as expensive, because we
19 all know that the impact of important investments
20 early, more than pay off.

21 It's true for pre-K, and it's true for any
22 number of early investments we make in children's
23 development.

24 SENATOR SQUADRON: And my final question, we
25 have a very busy day, I know:

1 Pre-K would have more impact if more than
2 10 percent of kids got evidence-based maternal home
3 visiting.

4 Is that be fair to say?

5 RICHARD BUERY: Well, what I would say is
6 that parent engagement is a critical part of the
7 pre-K.

8 It's not only part of the standards of the
9 pre-K foundation for the Common Core, but it's part
10 of the commitment to our program in a number of
11 ways.

12 SENATOR SQUADRON: Pre-K will do more if
13 those families have support before the kids show up
14 on the first day of school, when the kids are --

15 RICHARD BUERY: The more opportunities we
16 have to support families early and comprehensively
17 through evidence-based practices, the better off our
18 children will be, the better off our city will be,
19 the better our educational city -- or, our
20 educational system will be, and the better our
21 economy will be.

22 SENATOR SQUADRON: And it's fair to say that
23 it's easier to -- and the statistics you cite is the
24 right one, which is the number of people over the
25 course of a year -- number of different people over

1 the course of a year who are on the caseload.

2 It's easier to keep people off the caseload
3 if they don't have criminal justice problems, don't
4 have substance-abuse problems, are more able to
5 maintain employment, and have fewer additional needs
6 for those who they're taking care of in the home.

7 Is that fair to say?

8 STEVEN BANKS: That's definitely fair to say.

9 SENATOR SQUADRON: Thank you so much.

10 SENATOR CARLUCCI: Great, thank you,
11 Senator Squadron.

12 Assemblywoman Davila.

13 ASSEMBLYWOMAN DAVILA: Yes, hi. Good
14 after -- well, it's "good morning" still?

15 SENATOR SAVINO: Yeah, it's still. Still
16 morning.

17 ASSEMBLYWOMAN DAVILA: First, I want to thank
18 you, Commissioner Banks.

19 You have, by far, exceeded my expectations in
20 terms of the excellent job that you do.

21 I have a question in terms of your
22 computerized program, Access -- is it Access?

23 STEVEN BANKS: Access NYC, yeah.

24 ASSEMBLYWOMAN DAVILA: "Access." Okay.

25 As you're aware, I represent Bushwick and

1 Williamsburg. And, right now, it's probably the
2 highest percentage of illegal displacement,
3 displacement of senior citizens. And, we're having
4 a large number of constituents coming into our
5 office.

6 They do not know how to access these
7 computer-based programs that will give them
8 services.

9 And with that said, we have no problem
10 helping them, but I'm afraid that if there's nothing
11 else in place other than Access, I know they go to
12 the welfare center, they have to wait there five,
13 six hours, it just gets really overwhelming,
14 30 Thornton Street.

15 So they come to my office and we do what we
16 have to do, and that's not an issue.

17 But, I'm really becoming a little afraid of
18 these seniors trying to get this done on their own
19 and making large mistakes; and, therefore, not being
20 able to retrieve the services that they need through
21 Access.

22 That's one question.

23 Second question to you, Steve Banks, is: In
24 the near future, do you see any of the threshold
25 for -- to access food stamps, the income threshold,

1 do you see it going up?

2 Because, in terms of people getting back to
3 work or single parents having children, and being --
4 and having to pay baby-sitting, and making the type
5 of money right now is not a reality in
6 New York State. It's just not.

7 And so pre-K comes in. Pre-K is a wonderful
8 program, because parents are able to put the
9 children in pre-K. But then, again, we need
10 after-school.

11 So we're going back and forth.

12 Everything comes together in terms of social
13 services.

14 But I would please like you to answer: Is
15 there any other program, other than Access, that
16 these older people, that do not know how to navigate
17 computers, will be able to do this on their own?

18 STEVEN BANKS: So let me answer your second
19 question first.

20 The problem you're alluding -- you're
21 highlighting is a very real one, which is the drop
22 in benefits that occurred about a year and a half
23 ago; and irrespective of the drop in benefits, the
24 level of benefits to begin with.

25 Unfortunately, the Congress seems to be

1 moving in the opposite direction than we here in
2 New York would want the Congress to be moving,
3 because the drop in benefits was the result of the
4 congressional reauthorization of the food-stamp
5 program, and so that's what resulted in the drop in
6 benefits for many people.

7 And when we talk about great needs that
8 people have for food and nutrition services, but we
9 see fewer people getting the benefits, one of the
10 reasons why fewer people are getting the benefits
11 is, they were cut so much, that people are
12 discouraged from continuing to pursue that.

13 We're trying to buck that trend in New York.

14 We started foodhelp.nyc, as a new way to try
15 to encourage people to participate.

16 This year (unintelligible), with respect to
17 senior participation, is a very real one, because
18 there are a lot of bureaucratic requirements which
19 we don't feel are necessary.

20 And, we're working very closely with OTDA.
21 The office -- the State Office of Temporary and
22 Disability Assistance has been tremendously
23 supportive of the changes we're trying to make at
24 HRA, and they've been very supportive of a number of
25 waiver requests that we're asking the federal

1 government to make a more streamlined access for,
2 particularly, seniors.

3 We have found in other states, Florida, and
4 the like, that they've been able to get waivers and
5 enhanced access.

6 And with the support of OTDA, we're hopeful
7 that, over the next year, you're going to start to
8 see some changes.

9 The technology that we're rolling out is
10 going to affect both cash and food stamps.

11 And the aim isn't to make somebody, like a
12 senior that you're describing, use it. But to the
13 extent that we can have more people use the
14 technology, the time for someone who wants to go to
15 a center will be reduced, because there will be
16 fewer people in the center seeking assistance.

17 70 percent of our clients have smartphones.

18 And so the fact that next month we're going
19 to be able to, on a citywide basis, move our pilot
20 to a citywide basis, for People to be able to submit
21 documents for SNAP off their smartphone, and not
22 have to go to the center at all, will help deal with
23 staff workload, and also deal with access to
24 benefits.

25 For the senior that may not be able to

1 negotiate that, I understand that. But that should,
2 ultimately, have an impact on the workload for that
3 senior coming in.

4 Over the course of the next year, with OTDA's
5 support, you'll see us being implementing a number
6 of the waivers, and change in the technology, which
7 I think will have the impact that you want.

8 Right now, you're looking at us transitioning
9 from a system that didn't work, towards a system
10 that will work, based upon the experience in other
11 states.

12 And I appreciate your patience. You've been
13 terrifically supportive.

14 On the other hand, we would be happy to come
15 out and meet with seniors in your district, and do
16 whatever we can to provide additional information.

17 ASSEMBLYWOMAN DAVILA: Thank you.

18 I just have one more question, in terms of
19 the universal pre-K.

20 I know that Savino was just talking about,
21 there are other institutions that are suffering
22 because of it.

23 And, of course, I've signed on for the
24 educational tax credit, because I believe that every
25 parent should have the opportunity to put their

1 children where they believe they're going to be best
2 educated.

3 But what I am also seeing in the district,
4 and with universal pre-K, it's a great program.
5 I can't wait to put my grandson in. He'll be
6 three next year.

7 And -- but the problem again seems to be
8 that, there's some schools do have after-school
9 programs, and some do not.

10 And so, while we have the universal pre-K, we
11 still have to have these parents find someone to
12 run, pick up the children, and also take money out
13 of the pocket to pay for that.

14 So now, again, it comes to either you're
15 going to pay your rent, pay baby-sitting, or you're
16 going to eat.

17 That's what we're facing in our district.

18 But I think that's for us to deal with in
19 Albany when we go back in in January, to help you
20 try to resolve that issue.

21 But, again, I thank all of you for being here
22 and addressing a lot of our issues.

23 I appreciate it.

24 SENATOR CARLUCCI: Thank you, Assemblywoman.

25 Assemblyman Hevesi.

1 ASSEMBLYMAN HEVESI: Yeah, sorry.

2 I just -- I'm going to take this opportunity
3 to come back and make two comments.

4 The first is on the benefits "cliff" issue
5 that you just brought up.

6 That's a big problem; particularly, since you
7 have a state match to the food-stamp program.

8 We're looking at a statewide resolution to
9 that issue because the benefits "cliff" is a real
10 problem.

11 If, by definition, somebody's going to lose a
12 certain amount of money by doing better or getting
13 more at their job, then they're not -- it's
14 counter -- you know, counterintuitive.

15 The other thing, durational sanctions.

16 First, the Senator has been fighting for this
17 for several years, with my colleague
18 Assemblyman Wright. They've done a great job.

19 It is before the Governor.

20 But, that bill, which we have advocated for,
21 and we will not stop sending it to the Governor's
22 desk until he signs it, because it is the perfect
23 example of dumb government, as far as I'm concerned.

24 By sanctioning people -- and I take issue
25 with the "New York Post," and, forgive me, I have

1 not read it.

2 But by sanctioning people, all you're doing
3 is, you're hurting people and wasting money.

4 Hurting people and wasting money.

5 And it's part of a bigger problem with this
6 issue area, with social services, where you look
7 myopically at this year's budget alone, What are we
8 spending on this particular program?

9 That's all we do, and nobody looks at the
10 unintended consequences.

11 So, when you have durational sanctions, well,
12 now we have a homelessness crisis.

13 These are the kinds of things that we're
14 going to have to look at, and break.

15 And I'm a politician.

16 I come from a family of politicians, that's
17 why I'm a little crazy.

18 But the politician's mindset is, you solve
19 the problem in front of you, and then move on,
20 because there's 50 more problems.

21 We have to break that mindset.

22 By looking only at the short-term
23 consequences of the decisions we make, we are really
24 being short-sighted, and exacerbating our problem,
25 going further. And that's a huge problem.

1 The durational-sanctions bill is just one
2 piece of that.

3 So, I thank you for your work and your
4 advocacy.

5 We will not stop, I know the Senator will not
6 stop, until that particular piece is ended, and
7 we've got to look at this problem differently.

8 But you guys have been fantastic.

9 So, thank you for your work.

10 SENATOR CARLUCCI: Well, thank you,
11 Assemblyman.

12 And I would just like to add: I want to
13 thank all of you for your testimony, for your time.

14 And, on some of the things that you testified
15 to, being a father, and a Senator, from right
16 outside the border of New York City, I'm envious of
17 the programs that you have in place.

18 I know there's a lot of work to do, but
19 I think we can partner and really mirror some of the
20 things that you're doing in New York City, that we
21 still have to catch up to in Rockland and
22 Westchester counties.

23 One of the things that the Assemblyman
24 touched upon, and I think will be the real focus for
25 us in the next legislative session, is addressing

1 the "cliff"; addressing that cycle of poverty.

2 And I know you've submitted testimony, and
3 you've done a great job also, you know, of painting
4 a clear picture of what you're facing, to work with
5 us on strategies to end that "cliff"; to focus on a
6 sliding scale, to see how we can wean people on to a
7 better life.

8 So, with that, I want to thank you, and look
9 forward to working with you in the next legislative
10 session.

11 Thank you all.

12 ROBERTA HOLDER-MOSLEY: Thank you.

13 STEVEN BANKS: Thank you.

14 SENATOR CARLUCCI: Next we have,
15 Sharon Devine, executive deputy commissioner of the
16 Office of Temporary and Disability Assistance;

17 And Sheila Poole, acting commissioner of the
18 Office of Children and Family Services.

19 SHEILA POOLE: Okay. Great.

20 So I guess it's, good afternoon,
21 Chairman Avella and Chairman Carlucci, and other
22 distinguished members of the Senate.

23 My name is Sheila Poole, and I'm the acting
24 commissioner of the Office of Children and Family
25 Services.

1 And I want to thank you for convening
2 this hearing regarding the current system of social
3 service programs for children in New York State.

4 I'm pleased to testify today, to provide
5 important information of the programs and
6 investments currently underway in New York State.

7 I think it's important to recognize the
8 actions that we've taken as a state, to date, to
9 create early pathways to the successful development
10 of our children.

11 As you may know, OCFS directly operates the
12 statewide central register for child abuse and
13 maltreatment, and oversees the provision of
14 child-protective, foster care, preventive, and
15 adoption services across the state.

16 We are among 13 states with the
17 State-supervised county-administered system of
18 child-welfare services.

19 OCFS works closely with community-based
20 programs, as well as the state's 58 local
21 departments of social services, including
22 New York City, to help strengthen and support the
23 safety, permanency, healthy development, and
24 well-being of our children and families.

25 These partnerships are critical to improving

1 the outcomes for New York's highest-need children
2 and families.

3 I'd also remind all of our distinguished
4 panelists that, New York State, through the
5 Governor's support, as well as yours, we are the
6 most richly reimbursed child-welfare
7 preventive-service system in the entire nation.

8 We reimburse local departments of social
9 services at 62 cents on every dollar. And while
10 there's always more to be done, I think that's
11 something that we should all collectively be very
12 proud of.

13 As many of you know, OCFS also administers
14 the Healthy Families home-visiting program, which
15 we're also happy to say recently celebrated its
16 20th anniversary.

17 Healthy-Families is a nationally accredited,
18 evidence-based child-abuse and prevention program --
19 home-visiting program, offering services to
20 expectant parents and new families.

21 Healthy Family program is made up of
22 individual local fam -- local programs, excuse me,
23 located within 26 separate counties, along with the
24 city of New York.

25 More than \$27 million in state and federal

1 funding support this program, which, last year,
2 served nearly 6,000 families here in New York State.

3 Healthy Families program is unique, in that
4 it becomes involved before the child is born, and
5 continues its support through the age of the child
6 turning 5.

7 Healthy Families is one of only two
8 home-visiting programs in the state that works with
9 children up until that really important milestone of
10 entering kindergarten.

11 This investment in Healthy Families has
12 proven its worth in demonstrable outcomes.

13 And I won't get into too much detail.
14 There's others testifying today who have been doing
15 that research for us.

16 But, just generally speaking, the program is
17 improving birth outcomes by reducing the number of
18 low-birth-weight babies, improving parenting skills,
19 developing school readiness, and reducing child
20 abuse and maltreatment.

21 OCFS is involved in a study examining
22 children and families who were enrolled in the
23 year 2000, to measure the long-term effects of the
24 program 15 years later.

25 The program results -- recruits, rather,

1 home-visitors from the very neighborhoods the
2 families it serves, helping promote cultural
3 confidence and understanding of families needs, as
4 well as making families comfortable with
5 participating in the program.

6 Earlier this year -- and we were happy to
7 hear our colleagues in New York City really talk
8 about the importance of promoting safe-sleep
9 campaigns -- we've convened a statewide safe-sleep
10 workgroup that brought together community-based
11 organizations and other stakeholders to develop
12 better strategies to reduce the prevalence of unsafe
13 sleep practices and related infant fatalities.

14 We were also co-chairing with New York State
15 Department of Health, what's called "the safe-sleep
16 subcommittee" of the statewide collaborative
17 improvement and innovation workgroup.

18 The team has been charged with developing a
19 measurable strategy to address unsafe sleep for
20 infants, with activities to be undertaking between
21 now and September of 2016.

22 OCFS also administers programs that are
23 funded through the William Hoyt Memorial Children
24 and Family Trust program, we call it the "trust
25 fund," that seeks to improve the safety and

1 well-being of children of or at risk of experiencing
2 child abuse.

3 These programs target high-need communities
4 and emphasize partnerships with community providers,
5 including local departments of social services.

6 These include family resource centers and
7 networks, evidence-based parent-education programs,
8 that are aimed at increasing protective factors in
9 families.

10 In 2014, the trust fund provided crucial
11 support and resources to 191,000 adults and children
12 through 23 program providers.

13 The trust fund public-education efforts
14 include the Safe Babies New York, formerly known as
15 the "New York State Shaken-Baby Prevention Program."

16 This statewide program has documented a
17 sustained 50 percent decrease in abusive head trauma
18 in the counties where it has been piloted.

19 In 2013, this program expanded to provide all
20 parents of newborns with information about
21 safe-sleeping practices and coping with crying.

22 OCFS also partners with Prevent Child Abuse
23 New York to support a statewide parent helpline, to
24 help parents find programs and services within their
25 own communities.

1 The public-private partnership is yet another
2 pilot program that OFCS administers for new or
3 expanded preventive services, early childhood
4 development, and other services for at-risk children
5 and families.

6 This is the third year of the 5-year pilot
7 program, and there are currently 18 programs funded
8 in 8 regions of the state. They include an array of
9 services for families with children, from birth
10 through young adulthood.

11 For example, academic support, career
12 exploration, post-secondary education planning, and
13 jobs-skills training, are a few of the examples of
14 services provided through that program.

15 In this pilot, communities are required to
16 invest a 35 percent cash-match from a private
17 funding source, and the program has grown from
18 merely serving 3,000 families in 2013 in its
19 inaugural year, to now serving more than 3700 last
20 year.

21 Recognizing the importance of grandparents
22 and other relatives who have stepped forward to care
23 for their young relatives and provide them with a
24 safe and stable home environment when their parents
25 cannot, OCFS also funds programs that support

1 services for kinship caregivers.

2 And I'm wearing proudly today, a ribbon.

3 As many of you know, September is Kinship
4 Caregiver Month.

5 So we're proud to support all our kinship
6 caregivers from throughout the state.

7 OCFS administers the child-care subsidy
8 program that helps temporary assistance and
9 low-income families pay for child care.

10 The New York State child-care block grant,
11 which consists of combined state and federal
12 funding, is the primary funding source for
13 child-care subsidies.

14 OCFS continues to consider child-care
15 subsidies a priority in the overall child-care
16 system.

17 Over the past seven years, the Governor, with
18 support from all of you in the Legislature, has
19 either maintained or increased the
20 child-care-subsidy allocation to local departments
21 of social services.

22 This has been accomplished, despite an
23 approximately \$7 million reduction in federal
24 support over the past 10 years.

25 Programs for school-aged children and

1 pre-school children receive the highest subsidies,
2 with each accounting for approximately 37 percent of
3 overall subsidies.

4 17 percent of our subsidies go to toddler
5 programs, and with infant programs receiving the
6 remaining 8 percent of subsidy.

7 OCFS also works closely with local
8 departments of social service to help them serve as
9 many families as possible with available subsidy
10 dollars.

11 Toward that end, OCFS continues to find ways
12 to maximize our federal dollars.

13 The State recently received approval from the
14 U.S. Department of Agriculture, that allowed
15 districts to transfer certain child-care claims to
16 the food-stamp education and training program; thus,
17 freeing up child-care block-grant funds to serve
18 additional families.

19 The State also continued to allow districts
20 to transfer funds from the flexible funds for family
21 services for child-care subsidies.

22 Earlier this year, the federal Administration
23 for Children and Families awarded grants to
24 child-care programs in New York State, with the goal
25 of expanding access to high-quality, comprehensive

1 services for low-income working families with
2 infants and toddlers. This funding was through the
3 Early Head Start-Child Care partnership, or through
4 the expansion of Early Head Start services.

5 11 programs in our state were awarded more
6 than \$20 million from the feds, and this funding is
7 now supporting full-day, full-year programs for
8 low-income families, so that infants and toddlers
9 have the healthy and enriching early experiences
10 they need to realize their full potential.

11 OCFS is also responsible for overseeing
12 licensed and registered child-care programs in
13 New York State.

14 We're committed to protecting the health and
15 safety of children in regulated care.

16 And in 2014, OCFS conducted over
17 56,000 inspections of nearly 19,000 licensed or
18 registered child-care programs that it regulates.

19 The Office of the State Comptroller
20 positively acknowledged OCFS's inspection and
21 oversight activities of regulated child-care
22 programs in an audit report of that program.

23 OCFS also funds regional infant and toddler
24 technical-assistance centers to promote strategies
25 for improving the quality of care.

1 These centers work with new and existing
2 providers to share best practices, address issues in
3 the program, and to promote safe staffing and
4 specialized staff training on caring for infants and
5 toddlers.

6 OCFS, and I know all of you, will continually
7 seek to improve and integrate our efforts to address
8 the needs and build on the strengths of our state's
9 children, families, and youth.

10 Thank you again for the opportunity to
11 address you today.

12 SENATOR CARLUCCI: Great, thank you.

13 And just for protocol, as we testify, we have
14 the written testimony. So maybe if we can just get
15 a consolidated version, you know, an abridged
16 version, and then we can talk and ask questions.

17 SENATOR SAVINO: You don't need to read it.

18 SENATOR CARLUCCI: But that was great.

19 And then, going forward, let's just try to,
20 you know, consolidate.

21 SHARON DEVINE: All right. Well, good thing
22 my comments are brief anyway.

23 So, good afternoon, and thank you,
24 Chairman Carlucci, Chairman Hevesi, as well as
25 Chairman Avella.

1 Thank you for having me here today.

2 And I just want to thank you for the
3 opportunity to appear before you today; but more
4 importantly, because this is a really important
5 issue that we all should be looking at and figuring
6 out how to do better with our governmental services
7 and programs.

8 And I just also want to thank the
9 Henry Street Settlement, because they are one of the
10 organizations that really is a valued partner in
11 delivering low-income help to low-income families as
12 they try to better their lives.

13 So our work, as you know, at the Office of
14 Temporary and Disability Assistance really focuses
15 on assisting a family, as well as the individual, on
16 whole.

17 And for a variety of reasons, people find
18 themselves in need of some temporary help and
19 assistance.

20 And that's what we're about.

21 So while today's topic really focuses on the
22 efficient and effective delivery of social services
23 programs to prenatal and pre-K children, I want to
24 remind everybody that stabilizing a family is really
25 one of the very most important things that we can

1 all do to actually make a better life for a child
2 and for young children as they get ready to enter
3 into our society.

4 So statistics show that the stress of growing
5 up in poverty can have lasting effects on the
6 architectural nature of how a child's brain grows
7 and develops.

8 It can have physical, as well as emotional,
9 you know, impacts, and those can last right into
10 adulthood, including, you know, depression,
11 diabetes, and other things, learning disabilities.

12 And so those formative years, we recognize in
13 OTDA, are very important.

14 We provide programs and supports to families
15 that help them lay that better foundation, so that
16 all the care that they need through those prenatal
17 terms is there and ready and available.

18 More specifically, we recognize that children
19 need stable homes to thrive, but for families facing
20 challenges, such as poverty, poor health, and mental
21 illness, creating that nurturing environment is
22 really a struggle.

23 And so some of the programs that we provide,
24 of course, you know, are providing temporary cash
25 assistance to families and individuals, providing

1 assistance in paying for food, providing heating
2 assistance, as well as overseeing New York's
3 child-support enforcement program, and determining
4 certain aspects of social security disability
5 benefits, as well as homeless housing and services,
6 through those programs.

7 And I think we all also recognize, that while
8 there's no single program that helps a family out of
9 poverty or a single program that actually provides
10 all the supports needed for a child in the
11 prenatal-to-pre-K care, our programs do help the
12 low-income household address all of those emergency
13 issues and situations that they face on a daily
14 basis that really knock them for, you know, a couple
15 of loops, and they end up in trouble, as far as work
16 and providing for their family.

17 For example, the SNAP program has been
18 particularly effective in helping nursing mothers,
19 you know, have a healthy -- healthy food choices.

20 And so it also enables a family that's a
21 single parent and has two children, those -- that
22 family is eligible up to \$4,000 a year in SNAP
23 benefits.

24 Child-support program, as you know, is also
25 critical to families with young children. That

1 program really helps custodial parents get child
2 support, financial support, as well as medical
3 insurance for the child who's covered.

4 And so these programs are all extremely
5 important.

6 And one program that I think I'd like to
7 recognize individually, is the Nurse-Family
8 Partnership program.

9 I know our New York City partner spoke about
10 it.

11 And it's an extremely important program that
12 I know is near and dear to Senator Squadron's heart,
13 and ours as well.

14 And, so, it used to be, of course, funded out
15 of OTDA budget.

16 It is not funded out of OTDA budget anymore;
17 however, during those years that we partnered with
18 DOH, the program really provided pregnancy outcomes
19 by helping eligible first-time mothers and pregnant
20 women engage in sound preventive health care.

21 I just want to thank you again for the
22 opportunity to talk before you today.

23 SENATOR CARLUCCI: Great, thank you so much.

24 Questions?

25 Senator Squadron.

1 SENATOR SQUADRON: Thank you very much.

2 And thank you both, and for the perspective,
3 both, from OCFS and OTDA. Great to hear about both
4 Healthy Families and Nurse-Family Partnership.

5 I would say the partnership between agencies
6 across evidence-based programs, that the executive
7 deputy commissioner showed, is something that we
8 haven't always had at the state level, frankly, and
9 it's great to see.

10 I know OCFS has -- is attached to one of
11 these programs. OTDA and DOHMH the other.

12 The fact is, the evidence is there; and when
13 the evidence is there, they should both be
14 supported.

15 So let me just as a question.

16 The evidence is there.

17 Talked about the fact that a lot of what OTDA
18 does, just like HRA, is provide, essentially,
19 emergency assistance to families in crisis.

20 In the case of HRA, they're really looking to
21 avoid that, with OTDA's partnership.

22 But the goal here is to avoid crisis much
23 earlier.

24 I think everyone would agreed that these
25 evidence-based maternal home-visiting programs do

1 that.

2 So let me just ask:

3 \$27 million sounds like a lot of money in the
4 real world. It certainly would be a lot of money,
5 I think, for any of us.

6 But what does that mean, in terms of eligible
7 families, between Nurse-Family Partnership?

8 And I will ask you to speak to that, since we
9 don't have DOHMH here.

10 And, Healthy Families, what percentage of
11 eligible families receive either Healthy Families or
12 Nurse-Family Partnership services annually in
13 New York State? What percentage?

14 SHARON DEVINE: You know, I don't know what
15 that exact percentage is, but I would hope that a
16 lot of families who are in need of those services do
17 receive that.

18 I don't know if OCFS has any
19 readily-available statistics here, but, that's
20 something we can look up and get back to you on.

21 SENATOR SQUADRON: Great.

22 Do have --

23 SHARON DEVINE: In fact, we had a
24 collaborative meeting yesterday with the four
25 evidence-based home-visiting programs at OCFS, and

1 I asked that very question: How do we really assess
2 the actual unmet need? And understanding how far
3 we're really penetrating.

4 And we don't. We don't actually have that
5 specific data, but I think it's an excellent
6 question.

7 SENATOR SQUADRON: So let's do the math,
8 quickly.

9 \$27 million in Healthy Families, plus
10 Nurse-Family Partnership.

11 We were able to, through tri-partisanship
12 partnership, Senator Savino; myself,
13 Senator Carlucci; Senator Gallivan, who's a
14 Republican from Western New York, all took the lead,
15 along with a lot of colleagues, and were able to get
16 an increase in Nurse-Family Partnership funding.

17 But it's still, I think, \$4 million this past
18 year, plus, as Assemblyman Hevesi pointed out, 3?

19 ASSEMBLYMAN HEVESI: Yeah, three.

20 SENATOR SQUADRON: I always get optimistic.

21 Plus, as Assemblyman Hevesi pointed out,
22 there's a social-impact bond allocation that's
23 likely to go for Nurse-Family Partnership.

24 Let's add that in, let's call it 30.

25 So let's call it, as much as \$60 million a

1 year, total, in evidence-based home-visiting
2 programs.

3 Call it, between 4500 and 7500 a year per
4 family per program.

5 Do we know how many Medicaid births there are
6 a year in New York State?

7 I happen to have it here. Thank you.

8 120,000 Medicaid births.

9 Right?

10 So, I'm pretty sure that, having done the
11 math very quickly, not in my head, we're serving
12 5600 families through Healthy Families a year?

13 Is that right?

14 SHARON DEVINE: Seven, last year.

15 SENATOR SQUADRON: It's 5700, that's great.
16 That's an extra 100 families that have changed their
17 lives. That is a significant thing.

18 Plus, 2800 families through Nurse-Family
19 Partnership.

20 So that's, call it, 8500 families a year out
21 of 120,000 eligible.

22 So, these programs work.

23 I think we agree that different programs for
24 different families.

25 Certainly, these two have evidence behind

1 them. We heard about it from HRA.

2 And we are serving, today, with increases in
3 support, 8500 out of 120,000. Right?

4 So that means that we are not serving, call
5 it, 113,000 eligible families a year.

6 Serving just over 5 percent of eligible
7 families.

8 95 percent aren't being served.

9 So let me just ask you a question: Does that
10 make everything else you do at your job harder or
11 easier?

12 SHARON DEVINE: I think, you know, as
13 I stated in my testimony, you know, the earlier that
14 we can provide the supports to the entire family,
15 the better off we all are.

16 I mean, you know, healthy families build
17 healthy communities and healthy neighborhoods.

18 And so I think that the earlier we can get to
19 them, the more funding we have to support this
20 program, the better.

21 SENATOR SQUADRON: Dollar for dollar, if we
22 were giving parental-support programs or cash
23 assistance, if it was just dollar for dollar, as a
24 state, what would we rather do, if they were equally
25 effective?

1 Parental support; right?

2 SHARON DEVINE: Of course.

3 SENATOR SQUADRON: What if parental support
4 actually saved multiples in Medicaid, cash
5 assistance, and criminal justice costs?

6 It's crazy to me.

7 I really appreciate your testimony, your
8 support.

9 We're hearing a lot of support today, but,
10 it's a lot of support that gets us to 5 percent of
11 the eligible families.

12 So we've got to do something different, and
13 it can't be all agreeing and feeling good.

14 We all agree, we all feel really good about
15 that.

16 David and I were talking about our own young
17 children, and what a tough time this is in our
18 lives -- Senator Carlucci, excuse me.

19 But the truth is, we have a lot of committed
20 people doing great work, telling us great things
21 today.

22 And we, as a Legislature, and as a state, are
23 failing to serve 95 percent of eligible families
24 with the evidence-based program that we know has a
25 big effect on all the other needs.

1 I just think that's important to say.

2 I say that not in opposition to anyone here,
3 because, again, you tell us all the right things
4 today, and you are supportive of these programs.

5 Certainly, the same is true of my colleagues.

6 But, we've got to go beyond that.

7 Thank you.

8 SENATOR CARLUCCI: Thank you

9 Senator Squadron.

10 Senator Savino.

11 SENATOR SAVINO: Thank you.

12 Thank you, ladies, for your testimony.

13 I want to pick up where Senator Squadron left
14 off, because I think what he's really talking about
15 is something that we all need to be concerned about,
16 going forward.

17 We know that, in about the next six weeks,
18 your agencies will be asked to put forward your
19 budget requests for next year. And we understand
20 the constraints that are placed upon you by the
21 division of budget, that says, Gives us a zero-based
22 budget, right, which makes it very difficult to
23 advocate for the expansion of programs like this.

24 And we want to be able to help you make that
25 argument to DOB, that status quo is not enough.

1 Zero-based budgeting is insufficient right now.
2 That we have to do more, but we also have to do more
3 on evidence-based programs, like Nurse-Family
4 Partnership.

5 Dan Squadron is obsessed with the
6 Nurse-Family Partnership, and rightfully so.

7 But, you said something, Deputy Commissioner,
8 that stuck in my mind, that the most important thing
9 we can do for children is to provide a stable home.

10 And you're absolutely right.

11 So that going to bring me to a question
12 I have for you, and it's really -- it's not
13 necessarily something you're doing.

14 It's -- as you know, here in New York City,
15 our system of child welfare is much larger than most
16 of the other counties combined.

17 And, recently, a lawsuit was filed against
18 the agency, again, by our current public advocate,
19 Tish James, joined by Marcia Robinson Lowry, who's
20 probably sued the City more times than anybody in
21 history over child-welfare policy and children
22 rights.

23 And I'm not sure if Legal Aid is involved in
24 this one.

25 They're not.

1 Okay. He says no.

2 But, challenging the length of stay in foster
3 care, that it exceeds the statewide average, it
4 exceeds the national model, and, certainly, the
5 length of stay is shorter now than when I did
6 casework, but it's still far too long, which means
7 we're not providing a stable home for children.

8 One of the impediments, though, to reducing
9 the length of stay in foster care, quite frankly, is
10 one of your partner agencies, and that's the Office
11 of Court Administration, because they also have been
12 submitting zero-based budgets for the past several
13 years, because they were told that they have to.

14 You have courthouses now that close every day
15 at 4:30.

16 You have more responsibilities placed on
17 caseloads and caseworkers, including, in my opinion,
18 these ridiculous permanency hearings, where it
19 may make sense in Onandaga County, but, in
20 New York City, you could go two years before you get
21 a dispositional hearing.

22 So what you're doing -- what is the purpose
23 of a permanency hearing?

24 All it does is require the courts to set
25 aside more time to deal with issues, and not provide

1 stability in the home.

2 Is there anything that you, in your capacity
3 as head of OCFS, do to influence the expansion of
4 OCA's budget to address this need, particularly
5 since one of the things you're going to be tasked
6 with, going forward, is raise the age, which is
7 going to put an additional burden on the family
8 court system.

9 So if we don't address the budgets of these
10 agencies, we're not going to be able to improve
11 services for anybody.

12 SHEILA POOLE: So, you know, just to be
13 clear, you know, Senator, I certainly want to
14 address your question, but I also have to just be
15 clear that OCFS was also named in the New York City
16 lawsuit. So I can't, I'm not in a position, to
17 speak, you know, directly to anything.

18 But that aside, I think to the general
19 question that you're raising about our child-welfare
20 system, in general, and our relationship with the
21 courts:

22 So absent an influx of new dollars coming to
23 us, I think what we have been trying to do
24 successfully, again, is work in partnership with the
25 Office of Court Administration, and with the support

1 of KC family programs, a private foundation, we've
2 established over 20 family court collaboratives,
3 with local departments of social services, with the
4 goal of bringing all the core processing folks
5 together with the local department of social service
6 leaders and workers, to say, for this particular
7 child, how can we expedite the case processing time,
8 given, you know, the regulations that we have
9 through the Adoption and Safe Families Act?

10 So it's really getting those folks to the
11 table, recognizing the rules and regs, financial
12 constraints, and otherwise, that we have. But,
13 really, trying to create, wherever possible, more
14 efficiencies, so that we are identifying permanency
15 resources for these children, many of whom, as you
16 know, are the most likely ones to actually languish
17 in care of our kids, are the older teens
18 (unintelligible) home resources are difficult.

19 But, again, making sure that the court
20 process, or, honestly, the local department of
21 social service process, needs some fine-tuning, that
22 those partners are working together at a very local
23 level, to try and expedite the time to permanency.

24 I can't, Senator, sit here to you, you know,
25 today and say that we've made tremendous progress.

1 But, again, absent an infusion of major
2 dollars, what we try and do is make the best out of
3 what we have through relationship-building, and
4 through really looking at those processes that can't
5 be streamlined and expedited.

6 SENATOR SAVINO: Thank you.

7 SENATOR MONTGOMERY: Can I just --

8 SENATOR CARLUCCI: Oh, Senator Montgomery.

9 SENATOR MONTGOMERY: Oh, thank you.

10 First of all, I just want to thank both of
11 you. And I'm especially impressed by the fact that
12 you cover the whole gamut, from birth, and up.

13 So -- but I would just like to -- and I know
14 we're talking about, you know, the Nurse-Family
15 Partnership, with the babies, and so forth and so
16 on.

17 But I would just like to, if I may, because
18 I may not have an opportunity to talk to you before
19 you come back with your budget, so I wanted to ask
20 you about a couple of areas that are not specific to
21 our hearing today, but it's specific to something
22 that you said, regarding stabilizing families, and
23 what that does to add to the success of the children
24 in those families.

25 My first question is:

1 I'm from the old, old school, from way
2 yesteryear.

3 We have -- in the city of New York, and
4 across the state, we had the programs that, really,
5 families were able to bring children to a local
6 child-care center for the full day. It was really
7 sort of to support working parents or parents in
8 school or training, or whatever. And those programs
9 went all the way up to children aged 12.

10 And, so, it was all-day care and
11 after-school.

12 And most, or, hopefully, all of those
13 programs, were also connected to a local school, so
14 that children could be picked up by the people at
15 the center, and so there was not a gap, and there
16 was -- it didn't leave families to have to scramble
17 for care and to worry about the safety of their
18 children beyond the 3:00 schoolday.

19 So my question is: Where are we in terms of
20 having that kind of comprehensive service in
21 communities for families, so that people can
22 actually feel a sense of comfort, that at least that
23 part of their family life is taken care of by us?

24 So that's the first thing.

25 And the second part of it, perhaps related,

1 but maybe not, is:

2 As you have now entered into an era of
3 evidence-based funding, through the RFT process,
4 have you been able to identify -- I would be very
5 interested, and not today necessarily, but I would
6 be really very interested in knowing, to what extent
7 that process has changed the landscape, in terms of
8 programs that actually offer services, so -- and
9 especially as it relates to non-traditional
10 programs.

11 Because a lot of the organizations in my
12 community, especially those organizations that work
13 with teens, pre-teens, even young adults, they're
14 very non-traditional. And it's because, very often,
15 what you do with African-American or Latino young
16 males is different from what you do with young
17 females or other children in other communities.

18 So I would like to know, to what extent we
19 have lost the opportunity to provide services to
20 young people in districts like I serve, especially
21 those non-traditional kinds of organizations, and,
22 where are they in this whole scheme?

23 Because as we enter the -- hopefully, the era
24 of dealing with keeping young people out of the
25 criminal justice system, we're going to need more of

1 those kinds of organizations providing support
2 services in communities, very non-traditionally.

3 And I'm just wondering, how you can be able
4 to address that, where they are, where we are with
5 them, and how you're going to be able to fund them
6 through this process now, evidence-based.

7 It's even hard to measure, some of it, in a
8 realistic sense.

9 So those are the two areas that I would like
10 to hear from both of you, because I see both of you
11 as being key to this, my questions.

12 SHEILA POOLE: They're very thoughtful
13 questions. They're big questions, for sure,
14 Senator.

15 Sharon, do you want to take that?

16 SHARON DEVINE: Well, let me just sort of try
17 and address the last question, which was relative to
18 how we are able to use our current procurement and
19 funding mechanisms to really target the areas of
20 greatest need.

21 I think some of the most recent procurement
22 tools that we have actually do it very effectively,
23 because it allows us to really get down to
24 performance-based.

25 I think part of the problem is, is having

1 hard evidence-based information.

2 I think we've been good about evidence-based
3 information in several different areas. And there
4 are other areas where we could do a lot better, and
5 so that we can be better at targeting our funding
6 streams.

7 And, so, I think that the tools that are out
8 there really exist to do that.

9 We need the information.

10 SHEILA POOLE: I would just add, you know,
11 Senator, I think it's a great question, and it's one
12 that we spend a fair amount of time, you know,
13 struggling with it at my agency.

14 I think it's -- you know, given, you know,
15 the peripheration (ph.) of evidence-based programs
16 in human services is something many of us who have
17 been doing this work for much of our lives have
18 waited for. We're way behind, you know, the
19 health-care industry, but are certainly catching up,
20 now that we've had research and evidence to say, you
21 know, particularly with what we know now about brain
22 development, about what practices are really
23 promising.

24 And so given limited dollars, right, we have
25 to really think hard about making strategic

1 investments where there's evidence to say, This
2 program works really great. We know, or it's
3 likely, that we're going to get really good outcomes
4 for very needy kids and families.

5 I think where we also struggle, though, is
6 recognizing that we're also, today, very dependent
7 on many not-for-profits across our state who, for,
8 sometimes, hundreds of years, have done incredible,
9 you know, organic community-based services, you
10 know, often on a shoestring budget, without a lot of
11 sustainable support, getting a funding stream from
12 here and there.

13 And so, for some of those agencies, it's been
14 difficult to move their programs, which also do good
15 and have value, to becoming evidence-based.

16 And so it's really trying, I think, while
17 recognizing the value of evidence-based programs, is
18 being responsible in making sure that we are not
19 dismissing the incredible work and commitment of our
20 not-for-profit community across the state.

21 So, I think that's, frankly, I think a
22 challenge and a balance, given where we are
23 sometimes with the precious dollars that we do have
24 to make investments.

25 SENATOR MONTGOMERY: I appreciate your

1 sensitivity to that issue, and it's something that
2 I care a lot about.

3 And -- so, hopefully, if there's anything
4 that we can do to help with that, I would like to
5 work with you on it.

6 And the other one, the other part of my
7 question?

8 SHARON DEVINE: I'll let Sheila answer that.

9 But I will say that there are models out
10 there like that, where you have schools that have
11 not-for-profit partners who do after-school programs
12 that last until 5:30 and 6:00.

13 I think part of the issue is, is making sure
14 that the not-for-profits are -- and/or the other
15 providers in the areas are hooking up with the
16 schools and making that connection, because, I think
17 you're right, I think it's hard for families when
18 services like that are outside of the school base.

19 You know, we tend to live close to where our
20 kids go to school, so having them in programs that
21 extend beyond the day is vital, and really helpful.

22 SHEILA POOLE: Yeah, I think how I would
23 answer that, is that I -- to Sharon's point, I think
24 there are clearly, throughout the state, examples,
25 exemplary programs, that you have a school, you have

1 a school-aged after-school program.

2 We have Advantage after-school programs, you
3 have a community not-for-profit, a youth bureau, you
4 know, who all come together in a coordinated way to
5 really create that sense of community, like we had
6 in the old days.

7 I think our challenge, and it gets back to
8 Senator Squadron's question earlier about, you know,
9 home-visiting programs, is taking it to scale, and
10 being able to say that, in every community and every
11 school, you know, this is the standard we set in
12 New York State.

13 But, again, it's an incremental build, given
14 the resources, you know, that we have to be able to
15 do that, and then everything else that we do in our
16 very wide human-services line of businesses.

17 SENATOR MONTGOMERY: Thank you.

18 SENATOR CARLUCCI: Thank you,
19 Senator Montgomery.

20 Assemblyman Hevesi.

21 ASSEMBLYMAN HEVESI: Yeah, first, thank you
22 both for your testimony.

23 Sharon, it's good to see you.

24 Just one question for you: Do you have any
25 concerns about the reauthorization of the federal --

1 the child-care block grant?

2 SHEILA POOLE: So, we do have concerns.

3 So that's the sweeping -- just for everyone,
4 the very sweeping federal bill that President Obama
5 signed last November, and so it does create many new
6 requirements for states around child care.

7 Some of them, I think, conceptually, and
8 ideologically, are very good. They're about safety
9 and early development, and all the kinds of things,
10 you know, that we talk about.

11 The challenge, however, is that it is a
12 largely unfunded state mandate.

13 And, so, we are working very, very hard to do
14 an analysis of what those implications are for us in
15 New York State, of course, being sensitive to
16 protecting the subsidy dollars, you know, that we
17 have that are so critical to families -- you know,
18 and our working families having access.

19 We've been doing a lot of advocacy,
20 Assemblyman, with the feds, really pointing out to
21 them in very concrete ways, understand what this
22 means for a state like New York, or California.

23 And, so, we're hopeful that the feds will pay
24 attention to some of that.

25 I will say, however, thus far, they have not

1 retracted. I mean, it's in law, so there's really
2 no going back on that.

3 I think what we're trying to do, and the
4 Governor has been supporting this, is to try and
5 appeal to the feds that we cannot implement fully
6 every aspect of that child-care act without undoing
7 a lot of good work that we've done to build, you
8 know, child-care subsidy and access to care here.

9 So we want to try and get federal approval to
10 lengthen out the implementation cycle of all of
11 those components.

12 Even with lengthening, though, the
13 implementation cycle, there are, without a doubt,
14 fiscal impacts to New York State that we will be
15 grappling with in the upcoming budget session.

16 ASSEMBLYMAN HEVESI: If we can be helpful in
17 that regard, you let me know.

18 SHEILA POOLE: Thank you.

19 ASSEMBLYMAN HEVESI: Thank you very much.

20 SENATOR MONTGOMERY: Could I just --

21 SENATOR CARLUCCI: Yes, Senator Montgomery.

22 SENATOR MONTGOMERY: Thank you for taking an
23 extra little moment, but I do want to say to you:
24 I want to thank Cassie, who is here. I see she's
25 down here.

1 I never see her in the city, so --

2 SHEILA POOLE: Yeah, we keep her busy.

3 SENATOR MONTGOMERY: Yes. But I learned so
4 much from her, when we were working together a few
5 years back.

6 So, thanks, Cassie, and welcome.

7 Thank you, Senator.

8 SENATOR CARLUCCI: Thank you for your
9 testimony.

10 Look forward to working with you in the next
11 session.

12 SHEILA POOLE: Thank you.

13 SHARON DEVINE: Thank you.

14 SENATOR CARLUCCI: Next we have,
15 Michelle Martinez, from the Nurse-Family
16 Partnership, a home-visiting nurse;

17 And we have Jessica Santos, who is a client.

18 Good afternoon.

19 Please introduce yourself.

20 MICHELLE MARTINEZ: Thank you for the chance
21 to testify on behalf Nurse-Family Partnership and
22 supportive evidenced-based home-visiting and
23 maternal-child health programs.

24 I am Michelle Martinez, and I have worked as
25 a nurse home-visitor for the Nurse-Family

1 Partnership program at Public Health Solutions,
2 serving over 100 clients in the past 5 1/2 years.

3 I am here with one of my former clients who
4 completed the program, Jessica Santos, who is a
5 wonderful example of how this program can empower
6 young mothers to succeed.

7 Nurse-Family Partnership is a wonderful
8 program for first-time moms. It starts in
9 pregnancy, and continues until the child turns two.
10 It empowers moms to reach their goals and provide a
11 better life for themselves and their children.

12 During our visits, we do a great amount of
13 education around health during pregnancy and how to
14 care for an infant.

15 We try to lower the number of pre-term births
16 by teaching moms to maintain optimal health during
17 pregnancy. We discuss how to prevent subsequent
18 pregnancies. We work with clients on creating goals
19 in their lives, and how they can take steps to
20 achieve their goals or heart's desire.

21 During my time as an NFP nurse, I have seen
22 my clients grow into their role as a mother, and
23 have seen them become more comfortable in caring for
24 their child.

25 I have also witnessed clients meeting their

1 goals. I have had clients return to school, obtain
2 their high school diploma or GED. I have seen
3 clients obtain employment.

4 NFP helps clients become more
5 self-sufficient, and serves as a guide on how to --
6 for clients for -- to teach them how to communicate
7 with their doctor, and how to advocate for what they
8 need.

9 What motivates me to continue to do the work
10 I do is the relationship I build with each client.

11 Each story is unique, and to see their growth
12 during the 2 1/2 years is amazing and rewarding.

13 SENATOR CARLUCCI: Thank you, Michelle.

14 And, Jessica?

15 JESSICA SANTOS: Yes.

16 SENATOR CARLUCCI: Who's this is with you?

17 JESSICA SANTOS: My daughter.

18 SENATOR CARLUCCI: And what's her name?

19 JESSICA SANTOS: Jana Belle (ph.) Alvarez.

20 SENATOR CARLUCCI: Oh, great.

21 Well, thanks for coming today.

22 Did you want to say something?

23 JESSICA SANTOS: Huh?

24 SENATOR CARLUCCI: Were you going to say
25 something?

1 JESSICA SANTOS: Yeah.

2 SENATOR CARLUCCI: Great.

3 JESSICA SANTOS: I was 18 when I got
4 pregnant. When I found out that I was pregnant,
5 I was scared, but also happy. It was a mix of
6 emotions, and I didn't know what to do.

7 I got connected to NFP through a friend of
8 mine.

9 I had recently found out that I was pregnant,
10 and I had gone over to her house, and my friend's
11 NFP nurse, Michelle, was there, and she asked me if
12 I wanted to start the program.

13 I am really happy I decided to join NFP,
14 because NFP taught me a lot about raising a baby.

15 They would give me little papers that helped
16 me learn what to do when she's crying, how to feed
17 her, and what to do from certain month to certain
18 months. And then what she should eat and what she
19 can't eat.

20 NFP was important for me because, with
21 Michelle, I know I could always talk to her and tell
22 her what was happening. And as much as she could,
23 she would try to help me out.

24 Michelle was like my daughter's second
25 doctor.

1 Whenever my daughter was sick, she would say,
2 No, you don't need to take her to a doctor. She
3 probably has this, instead of me running to the
4 emergency room every week or something.

5 Also, other things I didn't know about my
6 daughter, I would ask her, and she would give me the
7 answers, because I don't know everything about my
8 daughter yet because she's still small and I'm still
9 learning everything about her.

10 Michelle has also bought me thermometers and
11 sippy-cups. And whenever I ask for something, if
12 she could, she will bring it.

13 Michelle has also helped me enroll my
14 daughter in a speech program, and she is now saying
15 sentences.

16 I would definitely recommend NFP to my
17 friends.

18 When I started NFP, I was with my daughter's
19 father.

20 Around when my daughter was a year old, we
21 got into a big fight and it turned into a
22 domestic-violence case.

23 That day I texted Michelle, and she called me
24 to see what was wrong, and I told her that it wasn't
25 the first time.

1 He had hit me once when I was pregnant too,
2 and I forgave him because I thought he was going to
3 change.

4 The second time was when my daughter was
5 about a year old, and then he got arrested. They
6 arrested him, and he went to jail.

7 I feel like NFP here helped me out a lot,
8 because I would -- it would distract me and help me
9 focus on positive things.

10 That's when Michelle was, like, You should go
11 back to school instead of staying home. You're
12 going to get depressed. You can make changes in
13 your life that he wouldn't let you do.

14 He wouldn't let me go to school, he wouldn't
15 let me work. He wanted me to be a stay-at-home mom,
16 and he didn't want me to become something better.

17 NFP has helped me accomplish a lot.

18 I told Michelle that I wanted to go back to
19 school, and I went back to school.

20 I graduated, and I found myself a new job.

21 Now I have my GED, and I'm working full-time
22 in customer service in a florist shop near where
23 I live. And now I am somewhere I don't think
24 I would be if I wasn't part of NFP.

25

1 SENATOR CARLUCCI: Great.

2 Well, Jessica, thank you so very much for
3 your testimony. We really appreciate that, your
4 sharing your example and what you've gone through.

5 That's very important.

6 Now, how old is your daughter now?

7 JESSICA SANTOS: She's two year old.

8 She recently graduated from the program.

9 SENATOR CARLUCCI: Oh, excellent.

10 And when's her birthday?

11 JESSICA SANTOS: July 1st.

12 SENATOR CARLUCCI: Oh, excellent.

13 Well, my son is July 30th, so they're very
14 close.

15 2013; right?

16 JESSICA SANTOS: 2013, yes.

17 SENATOR CARLUCCI: Okay, great. Awesome.

18 Would love to introduce them.

19 JESSICA SANTOS: I'm sorry?

20 SENATOR CARLUCCI: Would love to introduce
21 them.

22 JESSICA SANTOS: Yes.

23 SENATOR CARLUCCI: That would be good.

24 Any questions?

25 SENATOR SQUADRON: I would say, we have

1 the -- we had a lot of helpful people put together
2 this, my staff, George Annetto (ph.), I know
3 Senator Carlucci's staff, and others.

4 But, your daughter's moving of the chairs has
5 probably been the most helpful thing today.

6 So...

7 [Laughter.]

8 SENATOR SQUADRON: And this is -- I am, as
9 Senator Savino said, obsessed with this issue,
10 obsessed with this program, and other evidence-based
11 home-visiting programs.

12 But the highlight of the day for me, so far,
13 was giving your daughter my pen.

14 So, thank you for that.

15 Let me ask one thing, you know, because the
16 one thing that I think people sometimes don't
17 understand is, Is this just a medical program?

18 I know you're a registered nurse, and with
19 the special training. And you spoke really
20 beautifully about your experience, and a lot of it
21 was health care.

22 But, just explain to me, or others who are
23 here, is this just a medical program?

24 MICHELLE MARTINEZ: No.

25 SENATOR SQUADRON: It's -- why not?

1 MICHELLE MARTINEZ: Because we also
2 concentrate on their goals. What -- helping them
3 obtain child care, helping them link up to resources
4 in the community, and it will help decrease doctor
5 visits, and stuff like that.

6 So they're more prepared. Instead of going
7 to the doctor every week, like she said, and just
8 for normal stuff, like constipation, and some things
9 that they can just do at home.

10 And it's more patient education.

11 SENATOR SQUADRON: Right.

12 But when you had a domestic-violence incident
13 in your life, Michelle is the person you called for
14 support?

15 JESSICA SANTOS: Yes.

16 SENATOR SQUADRON: Why?

17 JESSICA SANTOS: Because I felt like I could
18 trust her.

19 She knew about all the problems I was having
20 with my daughter's father, and I felt like she was
21 my -- the person I could go to and tell, and her not
22 going to anybody else, and judging me. And, you
23 know, because a lot of people do judge you.

24 And when it happened, I went to her, because
25 I felt like not even family could help me out. And

1 I felt like she could.

2 SENATOR SQUADRON: And just, Michelle, how
3 many families have you worked with?

4 MICHELLE MARTINEZ: Over my time, I've been
5 there 5 1/2 years; so, over 100.

6 SENATOR SQUADRON: Over 100 families?
7 And why do you do it?

8 MICHELLE MARTINEZ: I love the relationship
9 you build with each client, and the growth you see
10 from them.

11 When they're pregnant, they're very
12 vulnerable, they're scared, they don't know what
13 they're doing. And then just seeing their growth
14 into the role as a mother.

15 SENATOR SQUADRON: Are you still in touch
16 with graduates from --

17 MICHELLE MARTINEZ: Yes.

18 SENATOR SQUADRON: How are they doing?

19 MICHELLE MARTINEZ: They're good.

20 Some of them are starting pre-K this year, or
21 have started pre-K.

22 SENATOR SQUADRON: Great. And it's going
23 well?

24 MICHELLE MARTINEZ: Yes.

25 SENATOR SQUADRON: Thank you, both.

1 Thank you for the work you're doing, raising
2 your beautiful daughter.

3 I have a 21-month-old son too.

4 So, I wish I had brought him in today.

5 And, good luck to you both in your jobs.

6 And, thank you for the work you do, changing
7 lives.

8 MICHELLE MARTINEZ: Thank you.

9 SENATOR CARLUCCI: Thank you,
10 Senator Squadron.

11 Senator Montgomery?

12 SENATOR MONTGOMERY: I want to thank you,
13 Senator, both of you, for the work that you're
14 doing.

15 And you, too, in the Assembly, thank you for
16 doing this.

17 And, Senator Avella, we appreciate you coming
18 down, and joining us.

19 And I just have one, sort of, question.

20 You have a piece of -- you have a, what you
21 say -- an energy bunny there? What do you call
22 those things, that keep --

23 So -- so, obviously -- and she's out of the
24 program now.

25 MICHELLE MARTINEZ: Yes.

1 SENATOR MONTGOMERY: But you will continue to
2 be a life-coach, I guess, of some sort, but, what do
3 you do now?

4 And I guess my question is: Where does she
5 go now, with a 2-year-old that's extremely active,
6 and she is now ready to move on with her own
7 development?

8 I don't want to talk about you like you're
9 not here, Michelle, but -- so -- so what happens
10 now?

11 That's my question.

12 MICHELLE MARTINEZ: Well, we hope that
13 throughout the 2 1/2 years she received what she
14 needed, so that she's prepared now.

15 And she knows -- I mean, during the time in
16 the program, she knew that she could make goals and
17 achieve them.

18 Her goal was to obtain her GED. She did it.
19 It was something that she wasn't sure if she was
20 going to be able to do.

21 And so now she knows that if she focuses on
22 something, she's going to be able to obtain it.

23 SENATOR MONTGOMERY: So what does she do with
24 her baby now, her child?

25 MICHELLE MARTINEZ: Her baby's in day care.

1 SENATOR MONTGOMERY: She's in day care now?

2 MICHELLE MARTINEZ: In day care.

3 SENATOR MONTGOMERY: Okay. So that's a
4 full-day for you, and you can --

5 MICHELLE MARTINEZ: She's working full-time.

6 JESSICA SANTOS: Yeah, I'm working full-time.

7 SENATOR MONTGOMERY: Very good.

8 Thank you very much.

9 SENATOR SQUADRON: I'm sorry to jump in, and
10 I know you need to get back to your daughter.

11 Does that work?

12 Does the -- the full-day day care, is it
13 helpful?

14 JESSICA SANTOS: Yes, it is, with my
15 schedule.

16 And, also, the day care is flexible, certain
17 hours. If I drop her off a little bit later in the
18 hour, they get paid, they push it off to the end, so
19 it helps me out a lot.

20 SENATOR SQUADRON: Is it a New York City-run
21 day care -- or, sorry, not New York City-run.

22 Is it New York City-funded, through vouchers?

23 JESSICA SANTOS: Yes.

24 MICHELLE MARTINEZ: Yes.

25 SENATOR SQUADRON: Thank you.

1 SENATOR CARLUCCI: Thank you, Senator.

2 ASSEMBLYMAN HEVESI: I just want to say, it
3 takes a lot of courage to come here and share your
4 personal story, and it's much appreciated.

5 Thank you very much.

6 SENATOR SQUADRON: Thank you.

7 SENATOR CARLUCCI: Thank you both.

8 And, Michele, thank you for the commitment
9 that you've had to your profession, and the
10 dedication that you've made.

11 You've obviously influenced so many lives,
12 and really changed the trajectory, so I want to
13 thank you for that. And thank your colleagues as
14 well.

15 And thank you for sharing the story, so that
16 we know exactly what's going on, to try to help that
17 and make that happen.

18 I know, as a young father, you know, I didn't
19 even know how to change a diaper, let alone the
20 nutrition, and the questions that you talked about:
21 Is it constipation? Is it hiccups?

22 And the confidence that you give to parents,
23 that rubs off on the children, and prevents so many
24 things from happening in the future, and helps so
25 many things happening in the future.

1 So thank you for the work you're doing.

2 And I know we're all on board to support this
3 initiative and the work that you do.

4 So, thank you.

5 Thank you both.

6 JESSICA SANTOS: Thank you.

7 MICHELLE MARTINEZ: Thank you.

8 [Applause.]

9 SENATOR CARLUCCI: Great. And our -- next
10 we'll hear from Timothy Hathaway, the executive
11 director of Prevent Child Abuse New York.

12 Also, Renee Nogales, Nurse-Family
13 Partnership;

14 Jenn O'Connor, New York State director of
15 Council for a Strong America;

16 And Clarissa Iggie, nurse manager at the
17 Nurse-Family Partnership.

18 Please don't read the testimony. We have it
19 submitted.

20 Please, just, if you could, just abridge; hit
21 the high points of things that you want us to really
22 focus on, because we did receive the testimony, and
23 then we'll ask questions.

24 So whoever would like to start, just please
25 introduce yourself, and that would be great.

1 JENN O'CONNOR: I'm Jenn O'Connor. I'm the
2 New York director of Council for a Strong America.

3 And Council for a Strong America is a
4 national non-profit umbrella organization. There
5 are a couple of organizations under the CSA
6 umbrella, but the two that are relevant today are:

7 Fight Crime: Invest in Kids, which is
8 250 police chiefs, sheriffs, and district attorneys
9 across the state;

10 And the second is, Ready Nation, which is a
11 little over 150 business leaders across the state.

12 With my testimony is also the
13 Winning Beginning NY executive agenda, because
14 we are a member of that statewide coalition.
15 I co-chaired that coalition.

16 My testimony is a lot more extensive than
17 what I'm going to talk about right now. It covers
18 pre-K, child care, and after-school.

19 So please take a look at that.

20 But what I wanted to focus just briefly on
21 was home visiting.

22 We are part of the statewide home-visiting
23 workgroup, and you've heard, and you will continue
24 to hear, about Nurse-Family Partnership and
25 Healthy Families New York.

1 I wanted to mention that there are two other
2 research-based programs that that group is
3 supporting. They're, Parents as Teachers, and the
4 Parent-Child Home Program.

5 These are programs that serve slightly older
6 children, and certainly could pick up where a
7 program like Nurse-Family Partnership leaves off.

8 And so the reason that we're supportive, from
9 a law-enforcement standpoint, these are
10 two-generational strategies to prevent child abuse
11 and maltreatment, and, also, to get kids ready for
12 school.

13 We're certainly spending a lot on pre-K, and
14 so we need to focus a little more on the zero to
15 three.

16 Our Ready Nation business leaders talk about
17 this, again, as a two-generational strategy for
18 economic development; that these are programs that
19 strengthen and stabilize families economically; and,
20 therefore, strengthen society.

21 What we are advocating for this year is a
22 continuum of services.

23 All four of these research-based programs
24 serves slightly different populations. They have
25 certain -- slightly different outcomes, each of

1 them, but very strong outcomes. And we would like
2 to see all four of those invested in along the
3 continuum.

4 States, like Washington State, have a number
5 of programs for home visiting that they put money
6 into, and the money goes out the door in a way that
7 serves populations in need in certain districts, so
8 communities are able to kind of pick and choose what
9 program or programs work best for them.

10 And we'll be back in touch with all of you in
11 a month or so, with a mapping tool, that a partner
12 organization of ours has put together, that will
13 show you the poverty in your district, as well as
14 the home-visiting programs in your district, so
15 you'll be able to get a better sense of the eligible
16 families.

17 So, thank you very much.

18 SENATOR CARLUCCI: Thank you.

19 TIMOTHY HATHAWAY: So, good morning,
20 Chairman Avella, members of the Committee.

21 I'm Tim Hathaway. I'm the executive director
22 with Prevent Child Abuse NY, and our purpose is to
23 eliminate child maltreatment in all of its forms,
24 and we really do that through advocacy work, as well
25 as providing resources -- skills, ideas,

1 information -- to local communities.

2 Child abuse is prevented in local
3 communities, and those folks do the work.

4 And so we're here to really support that
5 effort and engage with those folks.

6 I am here today because we are really vested
7 in this idea of early childhood systems.

8 What we know is that these early childhood
9 home-visiting programs reduce child abuse by up to
10 50 percent.

11 That's part of my testimony, and other folks
12 will speak more in detail to that.

13 We know it works as a strategy.

14 I think the points brought forward, that
15 we're severely, severely missing a large population
16 of people that would benefit from these programs, is
17 really an important piece that we need to be
18 addressing.

19 Again, there are a number of different things
20 within my testimony.

21 The state of New York logged about
22 71,000 child abuse-indicated children, so those are
23 kids that we really did identify as being abused.

24 If we could knock that number down to
25 50 percent, it's still not good enough, but I think

1 it goes a long way. And I think this program is
2 part of the array, the continuum of services, that
3 really does help do that.

4 A couple of other points.

5 Back to what Ms. O'Connor was saying about
6 this continuum of services, we know that programs
7 like Nurse-Family Partnerships and Parents as
8 Teachers, when they're working together with an
9 array of social services in a community, these
10 programs have just a phenomenal impact.

11 They're able to really blanket a community
12 with the sort of services, in terms of
13 parent-support services, that really do catch those
14 families that potentially fall through the cracks.

15 And so there's a real power, exponentially,
16 in having a kind of a sense of multiple programs
17 working together, side by side, so that they're
18 really achieving the sort of impact that we hope to
19 see in communities.

20 A couple of other things I'd be remiss in my
21 role as prevention supporter if I didn't mention.

22 One thing, I'm so glad to hear that there's a
23 lot of discussion about housing.

24 That's another place that we have to focus if
25 we're going to help families deal with some of the

1 strains and stress that they're dealing with, that
2 lead to the sort of maltreatment that we see.

3 And another area, again, that I am -- I know
4 the department, OCFS, is working on right now, but,
5 there's a concept called "the protective-factors
6 framework" that they're engaging around already.

7 This really helps youth-serving organizations
8 think about, How do we really come together and
9 protect kids, build strong families?

10 So, again, I would encourage, and I hope that
11 I have another opportunity to speak with this
12 Committee about that work. I think it's important
13 work.

14 In conclusion, I would just like to say
15 again, thank you so very much.

16 I would love to respond to questions that you
17 might have.

18 RENEE NOGALES: Hello, Chairman Avella,
19 Chairman Hevesi, and Senator Squadron.

20 My name is Renee Nogales, and I'm with the
21 Nurse-Family Partnership national office.

22 Really pleased to be here to represent the
23 programs in New York.

24 And as Jenn and Tim have already said, we
25 work collaboratively across various models, and

1 we're really excited about the notion of a
2 continuum, because it really does take a village,
3 and we each have a part to play.

4 So, I'm so thankful that we were all able to
5 be here today.

6 You know, I just want to first start out,
7 just around the "reach" issue.

8 I've been serving in New York, supporting
9 programs, for over eight years. And since the
10 program got started in 2003, in Queens, we've served
11 about 15,000 families.

12 We're going to soon have the funded capacity
13 to serve about 3,000.

14 So when you consider that, in 2012, I have
15 2012 data, there were about 46,000 first-time
16 income-eligible women or Medicaid births.

17 So just using that number as a proxy, we're
18 hitting about 6 1/2 percent.

19 And, actually, the Medicaid program has
20 expanded through the Affordable Care Act, so that
21 percentage is probably actually gone down because
22 the eligibility has gone up.

23 You know, I know that a lot of people have
24 talked about the goals of NFP, and, you know, that
25 it focuses on first-time mothers that are paired

1 with nurses.

2 The goals of the program is to really impact
3 pregnancy outcomes, healthy child development, and
4 the self-sufficiency of the family.

5 But I think one thing I'd like to highlight
6 is that, you know, for so many of the families, and
7 I think you may have seen evidence of that earlier,
8 the nurses are really mentors to the families, and
9 in some cases they're the lifelines, because a lot
10 of the families that we support, they don't have any
11 other support systems.

12 So they're really working with the families,
13 to focus on their goals, think about their futures,
14 help them become advocates for themselves, and to
15 really believe, once they start to accomplish those
16 goals, that they really have it in them to be
17 successful, and to forge a new path for themselves,
18 for their families, you know, whether it's going
19 back to school, finding employment, doggedly
20 ensuring that they get the right specialists to
21 focus on a medical condition that their child has,
22 or finally having the courage to leave an abusive
23 relationship.

24 So these nurses are really working each and
25 every day to shift the poverty trajectory in

1 New York State.

2 I know that you have a lot of information
3 there in the testimony about the evidence behind
4 NFP.

5 I'll just very quickly say that, you know,
6 it's unique, in that, even before we released the
7 program for replication, it was studied across
8 three clinical trials, across three different
9 populations, and three different parts of the
10 country.

11 The research around this model continues.
12 It's been studied for over 38 years.

13 And the outcomes that are in the testimony
14 really show that there are outcomes to the mother
15 and the child, that it really is a dual-generation
16 strategy that's making a difference in New York.

17 It's also good economic policy. There's
18 various studies that have shown that there's an ROY
19 associated with the program.

20 And the last thing that I'll just highlight
21 is that, you know, as we've moved from the research
22 period into replication, we've been, you know,
23 operating NFP and growing it for the last 20 years.

24 Not only are the researchers behind the
25 model, constantly trying to make it better in a very

1 thoughtful way, but we take accountability very
2 seriously.

3 We collect data, and we put a lot of tools in
4 place, so that the agencies can monitor that they're
5 implementing the model as it should be implemented,
6 and that they can use that data to continuously
7 improve the program.

8 So those are the highlights.

9 I just want to thank you all again for having
10 us here.

11 Really pleased that we can showcase
12 evidence-based home visiting, you know:
13 Nurse-Family Partnership, Healthy Families,
14 Parents as Teachers, and Parent-Child Home Program.

15 So, thank you.

16 SENATOR AVELLA: Well, thanks, you know, for
17 your testimony, and for the great work that you do.

18 Questions?

19 Senator Squadron.

20 SENATOR SQUADRON: It sounds great, but,
21 isn't it really expensive, though?

22 JENN O'CONNOR: It's more expensive to pay
23 for child welfare, to pay for involvement in the
24 criminal justice system, to pay for special ed.

25 SENATOR SQUADRON: Isn't it a lot cheaper to

1 do other things? Not home visiting, just provide
2 targeted medical care?

3 You know, you always read about, you know,
4 vaccine programs, other things; things I'm
5 supportive of.

6 But, I don't -- it -- you know, if a budget
7 officer was here, what they would say is, I don't
8 get it. Why are we spending this kind of money?
9 You know, it would be great, you know, buying them a
10 home and a car too.

11 Why is this money well spent?

12 TIMOTHY HATHAWAY: So if -- and some of the
13 details is in my testimony, I'm sure it's in Renee's
14 as well, but, what we know is that, there is a
15 return on investment. And that, you know, figures
16 vary a little bit. But, at least five-and-a-half
17 dollars spent -- or, one dollar spent on home
18 visiting is going to get us back five-and-a-half
19 dollars.

20 So there is a return --

21 SENATOR SQUADRON: Is that any home visiting,
22 if I just started my own home-visiting program?

23 TIMOTHY HATHAWAY: Well, and the difference
24 is evidence-based.

25 So, Renee's alluded to, you know, 38 years of

1 research.

2 There's extensive research, and they help the
3 families' model as well.

4 Most of that -- a lot of that is happening in
5 the state of New York.

6 So what we know is that these are programs
7 who have created a model. They're remaining
8 faithful to that model.

9 That's what gets the sort of results that we
10 talk about return on investment.

11 SENATOR SQUADRON: And return on investment
12 just essentially means, what, in this context?

13 Because it doesn't feel like an investment.
14 It feels like lives.

15 So, what do you mean?

16 TIMOTHY HATHAWAY: Sure.

17 So, if we put a dollar in now, then we'll
18 have that five-and-a-half dollars returned to us
19 through later savings.

20 SENATOR SQUADRON: What kind of
21 (unintelligible) are we saving on?

22 TIMOTHY HATHAWAY: So, really, there are four
23 primary areas that we talk about.

24 One of those is the issue of parents being
25 able to contribute back, in terms of tax. And then

1 a reduction also in the --

2 SENATOR SQUADRON: The parents working?

3 TIMOTHY HATHAWAY: -- liability --

4 Parents working.

5 SENATOR SQUADRON: Okay?

6 TIMOTHY HATHAWAY: We know that child-abuse
7 costs are going to go down.

8 SENATOR SQUADRON: Child abuse goes down, and
9 child-abuse costs has financial costs, in addition
10 to the terrible costs on lives.

11 Okay?

12 TIMOTHY HATHAWAY: Absolutely, yeah.

13 SENATOR SQUADRON: Okay?

14 TIMOTHY HATHAWAY: We also know that there's
15 savings to education systems. Special ed, grade
16 retention. Kids --

17 SENATOR SQUADRON: Fewer kids in special ed.
18 Kids do better in school, whether they're in
19 special ed or not?

20 TIMOTHY HATHAWAY: Yep, absolutely.

21 SENATOR SQUADRON: Okay. And what's the last
22 one?

23 TIMOTHY HATHAWAY: And then criminal systems.

24 We know that criminal justice systems are --
25 there are less families getting into that spot if we

1 can keep them with early solid foundations.

2 SENATOR SQUADRON: Okay. So we save money --
3 just so I understand, we save money because:

4 You have more people working, right, being
5 self-sufficient, or getting close to it.

6 You have fewer kids being abused. Less child
7 abuse and other physical abuse in the home.

8 You have fewer people involved in the
9 criminal justice system, in the first place, ever
10 getting there. Right?

11 And, kids do better in school? This is like
12 putting money into schools?

13 TIMOTHY HATHAWAY: Yes, absolutely.

14 JENN O'CONNOR: And better health outcomes.

15 SENATOR SQUADRON: And better health
16 outcomes.

17 And we're saving money on Medicaid, which we
18 spend a few dollars on a year (unintelligible)?

19 Okay.

20 Just briefly, Parents as Teachers and
21 Parent-Teacher (sic) Home Program, do we have those
22 in New York State right now?

23 JENN O'CONNOR: We do have both in
24 New York State.

25 We do -- Parent-Child Home Program gets a

1 little bit of money through the Hoyt Family Trust,
2 very little money. About 85 percent of it is
3 actually foundation grants, private funding.

4 And Parents as Teachers has been in the state
5 for about 30 years, and it is very, kind of,
6 locally. It's Binghamton, Binghamton School
7 District, and a couple of other places.

8 But, what we're hoping for this year is that
9 those two programs get some state funding.

10 SENATOR SQUADRON: And they're
11 evidence-based?

12 Health and Human Services would tell us that
13 they're the same?

14 JENN O'CONNOR: They -- yes, they would say
15 they're both research-based programs.

16 SENATOR SQUADRON: And, just finally: What
17 state has the highest percentage of eligible
18 families in home visiting -- in evidence-based
19 home-visiting programs?

20 You mentioned Seattle, which is a city, of
21 course.

22 But, which state, or locality?

23 RENEE NOGALES: I mean --

24 TIMOTHY HATHAWAY: (Unintelligible) New York.

25 SENATOR SQUADRON: New York has the highest

1 percentage right now?

2 Around 5 percent is the best for anywhere?

3 (Unintelligible.)

4 RENEE NOGALES: Yeah, I can't -- I don't know
5 about the other models, but I -- for example,
6 I think, in Delaware, they're actually hitting
7 25 percent.

8 SENATOR SQUADRON: 25 percent, 5 times better
9 than New York State, in Delaware?

10 RENEE NOGALES: Yes.

11 SENATOR SQUADRON: Wow.

12 Let me just ask: Is Delaware in bankruptcy?

13 RENEE NOGALES: Not that I know of.

14 SENATOR SQUADRON: They're doing that, and
15 maintaining the solvency of the state?

16 TIMOTHY HATHAWAY: Let's be realistic.

17 Delaware is a smaller state.

18 SENATOR SQUADRON: They also have a smaller
19 tax base. I mean, I guess Delaware has a wacky tax
20 base.

21 Nonetheless, it's one of the states that
22 houses most corporations.

23 Any other state?

24 RENEE NOGALES: I mean, I know, you know,
25 Pennsylvania -- I don't know the percentage off the

1 top of my head, but, Pennsylvania, I know two-thirds
2 of the counties offer Nurse-Family Partnerships.

3 SENATOR SQUADRON: What percentage --

4 RENEE NOGALES: Colorado.

5 I can get those numbers, but, it's definitely
6 more than 5 percent.

7 Colorado has a huge reach.

8 Oklahoma.

9 SENATOR SQUADRON: And in New York, we have
10 how many counties, Nurse-Family Partnership?

11 RENEE NOGALES: Nurse-Family Partnership,
12 twelve.

13 I would say a couple of those counties
14 haven't started yet. They're hiring and getting
15 ready; but, essentially, twelve.

16 SENATOR SQUADRON: (Unintelligible) of the
17 counties, you're saying.

18 Okay.

19 Thank you very much.

20 Thank you very much for the work you're
21 doing.

22 JENN O'CONNOR: Thank you.

23 ASSEMBLYMAN HEVESI: No, I'm good.

24 Thank you for the work you do.

25 SENATOR AVELLA: Thank you for your

1 testimony, and for the great work that you do.

2 SENATOR SQUADRON: Thank you very much.

3 SENATOR AVELLA: Next panel is, Ms. Greene,
4 from -- the director for the Center of Human
5 Services Research;

6 And, Ms. Lee, assistant professor at the
7 School of Social Welfare, University at Albany.

8 It is now afternoon; right?

9 ROSE GREENE: Right.

10 I'm going to be really, really brief.

11 I'm the director -- I'm Rose Greene, director
12 of the Center for Human Services Research, located
13 at the University at Albany, and we conduct studies
14 of social issues and social programs, and develop
15 information systems for human-service providers.

16 And, I've been studying home-visitation
17 programs and child-abuse-prevention programs for
18 over 20 years.

19 So I want to thank you for this opportunity
20 to present these research findings, and some of the
21 insights that I have gathered over this period of
22 time.

23 My remarks are going to be focused on the
24 model Healthy Families New York, which is being
25 delivered in 39 communities. That's been the focus

1 of our research.

2 Healthy Families is based on a national model
3 of home visitation, Healthy Families America, which
4 is being delivered in 600 communities across the
5 nation.

6 So I'm going to skip ahead.

7 I was going to talk a little bit about the
8 model, but, my expertise is in the research that
9 we're doing, so I just want to give highlights of
10 the research.

11 Healthy Families has been evaluated through
12 the most rigorous type of research design: a
13 randomized controlled trial.

14 Starting in the year 2000, we identified
15 1200 women who were eligible for the program. And
16 via a computer program, we assigned them to either
17 an experimental group that received home-visiting
18 services, or a control group that didn't receive
19 home-visiting services. And we interviewed them
20 when the mom was pregnant, when the baby was born,
21 baby turned 1, 2, 3; child turned 7.

22 And we're now back in the field. The babies
23 are 15 years old.

24 The research is extremely rigorous.

25 We had interviewers who were blind to

1 assignment. That means they didn't know whether the
2 parents were in the treatment or the control group.

3 And, we had excellent response rates in each
4 wave of the study, between 85 and 91 percent.

5 And in addition to the interviews, we had
6 data from the connections: child-welfare databases,
7 New York State Health Department birth records,
8 Healthy Family program records, school records.

9 And, we videotaped parent-child interaction.
10 We worked with an expert from our psychology
11 department. We videotaped the parents. And every
12 10 seconds of videotape, we had a coding lab set up,
13 and examined that.

14 So, anyway, what are the findings?

15 I'll race through these.

16 And, my colleague here, Eunju, will be
17 talking about one of the findings more in-depth.

18 Healthy Families has demonstrated positive
19 effects, including reduced low-birth-weight
20 deliveries. And that's what Eunju will be
21 presenting on.

22 Healthy Families sustained reductions in
23 harmful parenting practices.

24 Healthy Family New York mothers engaged in
25 significantly fewer acts of very serious physical

1 abuse, minor physical aggression, psychological
2 aggression, and harsh parenting.

3 Healthy Families New York resulted in
4 increased engagement and more positive parenting
5 strategies.

6 Healthy Families promoted behaviors --
7 positive behaviors, such as being more responsive to
8 children and cognitively engage the child.

9 Healthy Families New York reduced
10 child-welfare system involvement.

11 And I just want to talk about that in a
12 little more depth in a second.

13 Healthy Families New York increased school
14 readiness, and an improved access to health care for
15 both mothers and children.

16 And like I said, we're out in the field now.
17 The kids are 15 year olds, and we're going to
18 examine the longer-term effects as the children
19 enter adolescence.

20 One finding that I think is particularly
21 compelling, is there have been positive outcomes for
22 mothers who are not eligible for other home-visiting
23 programs. These are mothers who already have other
24 children.

25 Some models of home visitation only serve

1 first-time mothers, but, Healthy Families New York
2 was able to reduce rates of confirmed child abuse --
3 child-abuse and -neglect reports for moms who had
4 prior CPS reports; so, those moms had to have
5 children before.

6 Specifically for this group, we found lower
7 rates of confirmed CPS reports for any type of abuse
8 or neglect, lower rates of reports with the study
9 mom as the confirmed subject, lower rates of reports
10 involving physical abuse, and lower rates of
11 preventive, protective, and placement services.

12 And the final point I want to make, and
13 I think this is really important, and Renee talked
14 about this a little bit in NFP, that no matter how
15 well-crafted a program is, and how impressive the
16 research findings are, unless the program continues
17 to be implemented with rigor and fidelity, that the
18 effects won't be sustained.

19 And Healthy Families New York is extremely
20 well administered and carefully monitored.

21 All the programs input data into a
22 centralized web-based management-information system.

23 The system produces automated reports on
24 program performance, and the system is continuously
25 monitored by a centralized Healthy Families New York

1 administrative body comprised of researchers, state
2 administrators, and training staff, who, bimonthly,
3 review program performance, and then develop
4 training and technical assistance.

5 An example about how this works, is that we
6 found in the research the earlier parents enroll in
7 the program, the better the outcomes.

8 So the central administrative team will look
9 at the data carefully, see where the enrollment
10 snags are, if parents are getting enrolled later or
11 earlier, and then develop corrective actions for
12 those particular programs.

13 So, anyway, in conclusion: It's a
14 well-implemented program that has produced positive
15 effects for families being served.

16 EUNJU LEE: Hi, my name is Eunju Lee. I'm
17 assistant faculty -- assistant professor at the
18 School of Social Welfare at the SUNY Albany.

19 I want to talk a little bit about the science
20 behind the Healthy Family New York.

21 You know, you heard a lot of evidence-based
22 home-visiting program, and what the evidence really
23 means here.

24 And I think the -- we heard, that whether
25 there's a question of the home-visiting program,

1 Nurse-Family Partnership, a medical program or not.

2 And I would say the home-visiting program is
3 family-support program.

4 And no matter if the nurse delivers or the
5 home-visitors deliver, we call, in the Health Family
6 New York, it's called "family-support workers."

7 It's really about family-support program.

8 And the -- there -- I have a -- also, I want
9 to use the opportunity to say that I have the utmost
10 respect for the Nurse-Family Partnership's research.

11 But I would also want to say that, in our own
12 program, the State-funded program, Healthy Family
13 New York has been producing a lot of good evidence,
14 data, you know, to really support that this program
15 is worth all of your investment.

16 And Rose -- Ms. Greene mentioned about the
17 RCT, and I don't want to throw the jargon about that
18 research language, but, this is the design that the
19 medical companies or drug companies use to really
20 get approval from FDA.

21 So using really very rigorous methods to
22 really evaluate the design.

23 And one of the study I want to talk about is
24 the (unintelligible) outcome.

25 And the (unintelligible) outcome is that,

1 again, it's not a medical program, but a widely
2 achieved medical -- low-birth weight, you know,
3 reducing medical low-birth weight, is that because
4 it's a social-support program.

5 And openly, you know, we serve a large number
6 of minority mothers who could be second-time
7 mothers, or first-time mothers, but, we include
8 about the one-quarter of the clients who are 18 and
9 under.

10 With this particular population,
11 African-American women are most likely have adverse
12 birth outcomes.

13 And during this home-visitation program, we
14 actually link them to services. Link them to
15 (unintelligible) services, woman-and-infant
16 services, food stamp.

17 And this is all very poor mothers. You know,
18 they all under 200 percent of poverty level.

19 And poor expectant mothers, and there we link
20 the services, and that's how we know that they
21 actually could achieve a better health outcomes.

22 And are they -- we have data showing that
23 they actually -- I mean, New York State provide
24 really good medical program, Medicaid program, for
25 poor mothers. But, still, there are mothers who are

1 not linked to primary-care providers, but
2 home-visitors are able to do that.

3 This is the reasons that we really believe
4 that the Healthy Family New York have enough
5 evidence really to support that investment by
6 New York State.

7 SENATOR AVELLA: Thank you.

8 Questions?

9 SENATOR SQUADRON: Just briefly, two.

10 So you've done this research, and you've read
11 the Nurse-Family Partnership research?

12 ROSE GREENE: Yes.

13 SENATOR SQUADRON: In your view, is one
14 program valuable and the other not? Are both
15 valuable?

16 ROSE GREENE: They're both valuable.

17 SENATOR SQUADRON: They're both valuable.

18 They don't cost exactly the same amount of
19 money.

20 ROSE GREENE: Right.

21 SENATOR SQUADRON: If you were investing,
22 would you invest 90 percent in one program and
23 10 percent in the other?

24 That's what we do currently in the state, and
25 I just want to know -- look, we need more money for

1 all of this.

2 Is your view, they're both valuable programs
3 and both deserve significant State investment? Or
4 does one of these programs deserve 90 percent of the
5 State investment?

6 EUNJU LEE: I think both programs deserve
7 investment because they serve a different
8 population. Each has a different outcomes. And
9 it's also really addressing different aspects of the
10 client life.

11 So I do think that it's not -- you know, both
12 are evidence-based programs, but, still, it has a
13 different aspect of a program.

14 So I'm not, you know, a legislator, but
15 I can't really say that.

16 But I would say both deserve really your
17 attention.

18 SENATOR SQUADRON: Based on the evidence
19 you've seen from your research, and what's
20 published, would you recommend that more families
21 get served by these programs, both of them?

22 ROSE GREENE: Oh, definitely.

23 I was just going to say, Healthy Families
24 New York does serve a broader population because
25 there are eligibility criteria, first-time moms,

1 for -- yeah, okay.

2 SENATOR SQUADRON: The argument we have is
3 not with you-all.

4 The budget office all the time is, Why would
5 we ever fund any program any more expensive than the
6 other?

7 And I think that you answered that very well.

8 I -- we just wanted to have that out here.

9 Final question, and please bear with me,
10 because this is in your service, believe me:

11 I noticed that the one piece of, sort of, you
12 know, when you look at randomized controlled trials,
13 that we haven't seen some of this research because
14 it hasn't been published and peer-reviewed.

15 Why is that?

16 ROSE GREENE: We have, in the testimony,
17 I listed a number of --

18 SENATOR SQUADRON: The pieces that haven't,
19 why is it?

20 I'm asking you, if you would please tell me.

21 ROSE GREENE: There was -- the leadership of
22 those studies were at OCFS, and that --

23 SENATOR SQUADRON: They haven't paid for it?

24 ROSE GREENE: Right.

25 SENATOR SQUADRON: Okay. So I just want

1 to -- let's just be really clear about that.

2 There's extraordinary research that you've
3 done here, the kind of research that Nurse-Family
4 Partnership has, and has been able to have
5 peer-reviewed, which adds a level of weight to it.

6 I've had extensive conversations with you,
7 both here and elsewhere.

8 You obviously have done serious research, and
9 have taken very seriously, the quality of it.

10 The only reason it hasn't been published and
11 peer-reviewed; meaning, it can't be carried forward
12 at the next level, is because it won't get funded by
13 SUNY or OCFS?

14 That is -- (unintelligible) --

15 ROSE GREENE: Well, I don't want to say that.

16 I think we have to have conversations --

17 SENATOR SQUADRON: We need to make sure that
18 SUNY and OCFS provide the dollars for these
19 researchers, so 15 years of good research,
20 extraordinary research, when you really get it in
21 detail, in a packet, has the opportunity to be
22 published.

23 So thank you for the work you've been doing.

24 Hopefully, we will not fail you --

25 SENATOR AVELLA: Did you want to add to that?

1 ROSE GREENE: I don't want to -- we get
2 significant funding for our research from OCFS. And
3 I don't want you to go out to Sheila Poole and say,
4 Oh, my God.

5 It's a complicated situation about the
6 research. But I think, with your backing to publish
7 more, we can advance more research out there.

8 SENATOR SQUADRON: You'd be happy to publish
9 your other research?

10 ROSE GREENE: Yeah, we would be -- yes, we
11 would be happy to publish with the current
12 resources.

13 EUNJU LEE: I just want to add, that a
14 Healthy Family New York is the one model, the
15 Healthy Family America.

16 There are a lot of researchers, actually,
17 from other state done that, you know, the -- you
18 know, providing the child-welfare outcomes.

19 So it's not just a Healthy Family New York
20 program that has impact, but Healthy Family America
21 program in Arizona, another one.

22 In other states have really good findings.
23 Indiana have good findings.

24 So I would say that there are enough of, you
25 know, evidence.

1 Otherwise, scientific community would not
2 back up the Healthy Family American model.

3 SENATOR SQUADRON: That's a great point.

4 Well, you've done great work here, at SUNY
5 Albany, no less, at a SUNY school.

6 EUNJU LEE: Yes, thank you.

7 SENATOR SQUADRON: And as a New York State
8 legislator, I would like to see that work published.

9 ROSE GREENE: Okay. Thank you.

10 EUNJU LEE: Thank you.

11 SENATOR CARLUCCI: Thank you.

12 All right. Next we'll hear from
13 Ken Stephens, the senior attorney at Legal Aid
14 Society of New York;

15 And Saima Akhtar, senior attorney at the
16 Empire Justice Center.

17 And if you could, we have your testimony.

18 We've met before at our other hearings.

19 So, I thank you for coming.

20 KEN STEPHENS: I will keep it very brief,
21 Senators and Assemblyman.

22 I mean, this is like a dream-team of
23 legislators.

24 And, I have to admit it was a little
25 depressing not to hear OTDA come out with anything

1 positive in terms of a robust approach to the most
2 vulnerable New Yorkers.

3 Sometimes our Governor, as you all know, has
4 been very sensitive to these issues.

5 When he -- I was at the agency that became
6 the justice center, and without getting into
7 everything that has happened there since, in
8 promoting that, the Governor was really articulate.
9 He expanded a government agency on a scale that had
10 not been done in years.

11 And his recent advance of a phased-in
12 approach to low-wage work, by raising the minimum
13 wage over a period of years, could, could, set the
14 stage for a parallel development that we desperately
15 need.

16 Senator Savino before hit the nail right on
17 the head.

18 It was -- I don't even have to come here
19 anymore because you all have adopted, you know, the
20 most sensible positions, and you hardly need me to
21 say it, but, when she put her finger on it and said:
22 That that budget letter is coming out, either this
23 week, or it's already out, that from -- the call
24 letter. And when OTDA gets told, you have a flat
25 budget, all creativity, everything, shuts down.

1 You can't talk to them about anything, other
2 than they might nod and say yes.

3 But there can't be any serious discussion of
4 deep reform until the Governor gets the message
5 that, just as he has allocated additional funding in
6 the areas of health, in education, because it's
7 fundamental for New York, he needs to do the same
8 thing for the social services safety net.

9 We need to start there; otherwise, I'm afraid
10 that, even, like, Senator Squadron, you said, like,
11 we're surrounded by insurmountable opportunities.

12 How much more evidence do you need that
13 investing today can save money tomorrow?

14 You have to break that logjam that has
15 existed for so long.

16 And, Senator Avella, I just have to give, you
17 know, a lot of credit to you, and Senator Savino, as
18 well as Assemblyman Hevesi, for getting us the
19 bipartisan support on the conciliation bill.

20 We showed the Governor that it can be done;
21 that you can even reach across the aisle, and you
22 can be creative as we were, and we can continue to
23 engage the Governor.

24 I think Senator Savino, unfortunately, is
25 right, that he hasn't signed that bill yet. And it

1 looks like we're going to need to have some serious
2 discussions about what can be done.

3 And we should do that, because, you know, at
4 the end of the day, it's the politics of getting
5 things done.

6 And that's what I appreciate so much about
7 the four of you, and Senator Savino, and
8 Senator Montgomery, and, although I don't know her
9 quite so well yet, Assemblywoman Davila, who has
10 been very active in working with our office and
11 attacking problems in her district.

12 So, I'm going to leave it at that.

13 I've sent to the staff people, both our
14 testimony, as well as some, just --

15 One second.

16 -- some recent science that came out this
17 summer.

18 And, Senator Squadron, you might already be
19 aware of this, and I know Assemblyman Hevesi's been
20 on it:

21 Researchers, including one woman who is now
22 at Columbia, have done a nationwide study over
23 seven years, doing brain imaging of young children
24 in poverty.

25 And we now have documented evidence that

1 poverty is retarding brain development, which is
2 leading directly to academic achievement, and then
3 it's leading directly to vocational achievement.

4 So the science -- I mean, the science is
5 there, there's no secret.

6 I mean, poverty hurts, it cuts people's lives
7 while they live it, it makes their lives shorter.

8 And, you know, I'm sure that we'll have
9 the -- you'll be hearing something from the Pope
10 soon when he comes to New York.

11 And, you know, we have these opportunities to
12 push the agenda.

13 Homelessness is critical, but it's just
14 really the canary in the coal mine.

15 It's telling you that we've been living in a
16 society, where, unfortunately, we haven't lived up
17 to the constitutional mandate in New York, which is
18 to take care of the needy.

19 Thanks so much.

20 SAIMA AKHTAR: Ken, that was poetic.

21 SENATOR AVELLA: That was really good.

22 Right?

23 SAIMA AKHTAR: I'm Saima Akhtar. I'm a staff
24 attorney -- a senior staff attorney at the
25 Empire Justice Center.

1 I don't know that I've met all of you.

2 I've certainly heard excellent things from my
3 colleagues Don Friedman, Susan Antos, Kristin Brown,
4 who were all sorry they couldn't be here today.

5 It's nice to see you again, Assembly Member.

6 ASSEMBLYMAN HEVESI: Good to see you too.

7 SAIMA AKHTAR: I am probably just going to be
8 a little bit more of brass-tacks about this than Ken
9 was.

10 Certainly, one of the things I know that he's
11 already talked about, our colleagues have talked
12 about, is the need for a meaningful increase in the
13 shelter allowance for welfare recipients.

14 We're talking about how people can't live.
15 They need a living wage for those who are working.

16 For those who are not able to find work, who
17 are forced into the social services system, it needs
18 to be a meaningful safety net, for obvious reasons.

19 People need to be able to afford a place to
20 live.

21 I mean, we're in the appalling situation,
22 where we're talking about people who are too poor to
23 live in a building.

24 That is, literally, the state of affairs
25 right now.

1 The shelter allowances being as low as they
2 are contributes, in an ongoing sense, as I'm sure
3 you're all well aware, to a truly ridiculous cycle
4 of higher shelter payments. Right?

5 It's authorized under the regulations for the
6 counties, and the agency, to a lesser extent, to be
7 paying grotesque amounts of money to house a
8 homeless family. Indeed, they're obligated to house
9 a homeless family at an extremely high cost.

10 They are not authorized to pay a marginally
11 higher rate for ongoing housing.

12 So, for example, in our offices on
13 Long Island, we can see a family of four,
14 potentially, in an emergency housing setting that's
15 going to cost the county, and, you know, by proxy,
16 part of that bill is getting passed on to OTDA and
17 the State, nine to ten thousand a month for
18 emergency housing.

19 However, because of the way the statutes and
20 the regs are written, the shelter allowance doesn't
21 authorize a payment that's actually a fair-market
22 rent on Long Island, which would still be a fraction
23 of that. You know, say, 20 percent of what we're
24 paying in emergency housing, we could be paying to
25 put them into permanent housing where they had a

1 place to live, some fraction of that.

2 From our standpoint, the add that I want to
3 attack onto that is something that I think doesn't
4 often get paid attention to, which is what's called
5 the "fuel-for-heating allowance," and this is
6 detailed in our testimony.

7 I think it's probably not, sort of, a
8 well-known part of it, because, very often, I think
9 in urban areas, heat gets included with rent; and
10 so, when rental subsidies and rental allowances are
11 adjusted, it necessarily covers sort of the market
12 fluctuations in the heating costs.

13 What we see outside of New York City
14 particularly, in a lot of the upstate and rural
15 areas, is that utility costs are almost always
16 separate from rent, and so an adjustment in the rent
17 does not actually make it an affordable living
18 situation. There's a two-part adjustment there.

19 The fuel-for-heating allowances in
20 New York State have not been change since
21 Ronald Reagan was President.

22 In the meantime, I'm sure you've all noticed
23 that the cost of gas has fluctuated -- the cost of
24 heating, natural gas, has fluctuated.

25 The cost of propane, kerosene, and all of the

1 other things people heat with in outlying areas have
2 been adjusted.

3 And we would ask that the agency be compelled
4 to take a look at what the rate is, and make it a
5 meaningful rate, so that people aren't, you know,
6 living, frankly, in substandard conditions. Right?

7 What we have happening in places where heat
8 is not included, is that either people are,
9 essentially, in a situation where they're
10 constructively evicted because they're unable to
11 adequately heat their home, so maybe the DSS will
12 auto-pay their rent.

13 But if the heat gets turned off, you can't
14 live there anyway. And if it's in -- you know, if
15 it's Syracuse in January. Or, potentially, they're
16 put into the ongoing recruitment scenario, because
17 of their utility shut-offs.

18 And last, but not least, I just wanted to put
19 in a pitch.

20 Certainly, you brought it up in your
21 questioning of Commissioner Poole.

22 There is concern for preserving child-care
23 subsidies at this point in time.

24 The CCDBG, the child-care block-grant
25 reauthorization), has a number additional mandates.

1 She alluded to them being unfunded.

2 It sounds like, certainly, they're asking for
3 extended time to implement.

4 Winning Beginning New York and Empire Justice
5 Center has been working on this.

6 There is concern that there could,
7 potentially, be a loss of 13,000 subsidies to
8 households in the state because of the costs
9 associated with this; potentially, remediable with
10 an additional \$90 million.

11 This is detailed in our testimony, and,
12 certainly, we'd be happy to take questions on it as
13 well.

14 SENATOR CARLUCCI: Questions?

15 SENATOR SQUADRON: Thank you for bringing in
16 topics of issues we have not focused on as much,
17 but, obviously, are so critical.

18 And, thank you, as always, for being the
19 conscious that we can't turn away from.

20 SENATOR AVELLA: Thank you all for your hard
21 work. We very much appreciate it.

22 ASSEMBLYMAN HEVESI: I just want say, you
23 guys are fantastic.

24 I know you like to compliment us.

25 Ken, you do that a lot.

1 But, I would not be half of what I am, the
2 ability to advocate, with the knowledge that you
3 provide me, and you as well. You're part of an
4 inner team that I really rely on.

5 We will continue to take your views and
6 advocate for them.

7 And you guys are great, and I just want to
8 say it publicly.

9 Thank you.

10 SAIMA AKHTAR: Thank you all.

11 KEN STEPHENS: Thank you all, very much. We
12 appreciate it.

13 SENATOR CARLUCCI: We look forward to working
14 with you.

15 Next we'll hear from Gregory Brender, the
16 co-director of policy and advocacy at UNH;

17 And Nina Piros, associate executive director
18 of early childhood division, University Settlement.

19 Good afternoon.

20 NINA PIROS: Good afternoon.

21 I'm Nina Piros, University Settlement.

22 It is 1:30, and I'm sure we are all very
23 hungry, so I'm going to be brief.

24 SENATOR SQUADRON: And I would point out,
25 this is a great neighborhood to get lunch in

1 afterwards.

2 NINA PIROS: If you have time.

3 University Settlement provides a whole range
4 of services from prenatally, through both
5 Healthy Families grant, a federal grant through the
6 Office of Head Start.

7 We recently did secure another federal grant,
8 which is the Child-Care Partnership.

9 And, we have partnered with our own family
10 child-care program to enhance services there.

11 And then a whole range of other services that
12 we offer, including parenting services.

13 One of the things that I think I find very
14 frustrating, being in the early childhood world, is
15 how segmented our systems are, our fragmented they
16 are.

17 And it's hard for us, but imagine the
18 difficulty families have, and we all know those
19 difficulties.

20 We have -- I've sat here all morning, and
21 I have heard a lot of great stuff about the work
22 that is being done throughout government and
23 community-based organizations. And we know we have
24 very different pieces of the puzzle, but we have not
25 figured out how to put the puzzle together.

1 And I think that is, what, at times, just
2 strikes me a little bit insane.

3 We have a lot of duplication.

4 Just sitting here, I heard from various
5 systems, and many obstacles for families on how to
6 access those services.

7 I feel like we slice and dice our different
8 agencies and different services, and there are such
9 disparities in funding, that prevents
10 community-based organizations like us to really
11 address the comprehensive needs of families.

12 My main focus in the early childhood
13 education is really the parent-child relationship,
14 because, as you all know, it's vital to positive
15 outcomes for children; yet, there are very, very few
16 systems that really focus on the parent-child
17 relationship.

18 We heard about the home-visiting programs
19 here, but, what about child care?

20 You know, we know that our child-care system
21 is not funded to really provide comprehensive
22 parenting services.

23 And, in fact, many families in the child-care
24 system that are coming out of poverty, or have --
25 you know, like the family that we saw today,

1 graduated from Healthy Families.

2 One of the things that would eventually
3 happen to this family, and that we see happening in
4 our families, is that they lose subsidized child
5 care because they got an increase in salary or a
6 promotion at work, and then face the challenge of
7 paying market-rate child-care costs that is not
8 affordable to even upper middle-class, or even
9 middle-class, New Yorkers, because we're talking
10 about a cost that is anywhere from twenty to
11 thirty thousand dollars a year for high-quality
12 programs.

13 We also have -- we also know that there are
14 many programs, and there are very successful
15 collaborations. And that, at times, many mandates
16 are not funded, creates challenges for programs.

17 Someone mentioned earlier, EarlyLearn.

18 I think EarlyLearn, the concept of
19 EarlyLearn, is sound and evidence-based, and it's
20 very much based on our own Head Start requirements,
21 but the funding is not there to really fully address
22 the needs of all children and all families.

23 I strongly believe that, in order for us to
24 be successful at all levels, we really need to
25 address mental-health needs, and mental-health needs

1 are part of every day.

2 Families are stressed about making it to work
3 on time, and adolescents are having developmental
4 challenges. Parents become overwhelmed.

5 But, our systems our systems are not
6 available to really address those mental-health
7 needs of families.

8 I think that University Settlement, like many
9 other settlement houses, like Henry Street
10 Settlement, and other community-based organizations,
11 have figured out a way of integrating those services
12 by really pulling from all our funding sources and
13 figuring out how do we integrate.

14 The largest system is not integrated. Maybe
15 we can integrate our services, and have been very
16 successful at doing that, and have families entering
17 at different points and accessing all services, from
18 prenatal-care services, to older-adult services,
19 youth services, and the whole range of services.

20 So, I am hopeful that, with your support,
21 your commitment, our work, that those services can
22 become more integrated, and the mental-health
23 services in particular, especially since the impact
24 it has on the parent-child relationship, and on
25 brain development, it's really integral to

1 everything that we do.

2 Thank you.

3 GREGORY BRENDER: Thank you.

4 I'm here on behalf of United Neighborhood
5 Houses, which is New York City's federation of
6 settlement houses and community centers.

7 As Senator Squadron knows, the largest number
8 of settlement houses is in his district here on the
9 lower east side, so it's even more than a great
10 place to get lunch.

11 And, we also have Queens Community House,
12 serving Assemblyman Hevesi's and Senator Avella's
13 district.

14 Senator Carlucci, I'm sorry we're not up to
15 Rockland, but, we are a member --

16 SENATOR CARLUCCI: How many would you say
17 that there are?

18 GREGORY BRENDER: There's 38 member agencies,
19 with 525 sites throughout the city.

20 SENATOR SQUADRON: Six in my district --
21 seven in my district.

22 GREGORY BRENDER: Six -- seven? Yes.

23 SENATOR CARLUCCI: I've got none.

24 SENATOR SQUADRON: We're in one of them,
25 right here.

1 Senator Avella has three, that I can think of
2 off the top of my head.

3 GREGORY BRENDER: I think Queens Community
4 House.

5 SENATOR SQUADRON: American Planning
6 Council --

7 GREGORY BRENDER: They're in -- they're in
8 Flushing, but I don't know which part of Flushing.

9 Well, I will get you the exact space.

10 But, we are members of Winning Beginning as
11 well, which is a statewide coalition, and we support
12 the (unintelligible) Winning Beginning put together.

13 I wanted to really focus on the child-care
14 block grant, and both the opportunity and challenges
15 that we're facing.

16 We see the child-care block grant through
17 settlement houses as an ideal way to serve young
18 children and families, because you have a
19 multiplicity of services under a single roof.

20 You have the ability to identify a need in a
21 child-care program, and refer someone to a
22 mental-health service that may be provided in the
23 same building, or, refer them to other family
24 supports, and, that way, you can address problems
25 early.

1 And, I won't read it all, but in my written
2 testimony I have a longer narrative about how some
3 of that's worked for one family actually here on the
4 lower east side.

5 It was three settlement houses, including
6 Nina's University Settlement, as well as
7 Hudson Guild in Chelsea, and East Side House on --
8 in the South Bronx, in Mott Haven, that first
9 developed a mixed-funding model that combined pre-K,
10 Head Start, and -- actually, at that point, just
11 Head Start and child care.

12 And now, with the goals of EarlyLearn, the
13 city's early care and education programs seeks to
14 have a unified program that brings the best of each:
15 the longer day from child-care programs and the
16 educational standards from pre-K, as well as the
17 more comprehensive supports and curriculum that you
18 have in the Head Start program.

19 This would be an ideal that we aim for.

20 And, to achieve the promises that we've had
21 for pre-K for a lot of the low-income working
22 families, you really need child-care funding.

23 Pre-K programs end in the school day. And if
24 you have a 9-to-5 job or similar work hours, you
25 simply cannot drop off and pick up your kids in the

1 pre-K hours.

2 So, we're thrilled that there are 65,000
3 pre-K seats opening -- or, that opened this Tuesday
4 after Labor Day, but we understand, both, for those
5 4-year-olds whose parents need a longer working day,
6 as well as for children younger than 4-year-olds,
7 child care, an investment in what's EarlyLearn here
8 in the city, and other child-care programs
9 throughout the state, is really the only solution
10 that meets both the educational needs of the
11 children and the working parents.

12 And as you've brought up, we're looking, most
13 likely, at a budget that actually provides less
14 money for child-care subsidies to New York City and
15 to the other social service districts that are
16 providing child care, not more, despite the -- you
17 know, we're only serving 22 percent of eligible
18 children, even after the last two years where many
19 counties have actually reduced eligibility
20 standards.

21 But, nonetheless, and it's not necessarily
22 the State's fault, this is the fed's fault, but,
23 we're looking at the situation, because the new
24 federal requirements will cost an estimated
25 \$90 million, that you have 13,000 subsidies that are

1 at risk, on average.

2 So we urge the State to move forward to -- we
3 will -- we're happy to work with you on finding
4 solutions, but we need to ensure that the State can
5 make the investment, to ensure that subsidies are
6 not lost, and, that we move forward and start to
7 actually have more children covered by subsidies of
8 the nearly 78 percent of eligible children who are
9 not being served, that they can start getting into
10 child-care programs.

11 SENATOR CARLUCCI: Do you have a number on
12 that, what that investment would be?

13 GREGORY BRENDER: Yes, and it's at the end of
14 the testimony, and it's also the one in the
15 Winning Beginning ask.

16 It's 190 million.

17 It would be 90 million to cover the costs of
18 the new federal requirements, and the other
19 100 million is to expand by 13,000 seats.

20 SENATOR CARLUCCI: So 190, just to not lose
21 that 13 --

22 GREGORY BRENDER: No, that would include
23 expanding.

24 That would be 90 million to, basically, just
25 cover the costs of the federal and not have losses

1 to the social service districts.

2 SENATOR CARLUCCI: So if it was a \$90 million
3 investment, you're talking about just maintaining
4 the status quo?

5 GREGORY BRENDER: Absolutely, yeah.

6 SENATOR CARLUCCI: Okay. 190, what would we
7 increase it to?

8 GREGORY BRENDER: That is an additional
9 13,000.

10 SENATOR CARLUCCI: So an additional 13,000?

11 GREGORY BRENDER: Yes.

12 SENATOR CARLUCCI: And how many are there
13 now?

14 GREGORY BRENDER: There are, I think --
15 I think about -- I can get you that number. I'm
16 not --

17 SENATOR CARLUCCI: Yeah, okay.

18 GREGORY BRENDER: Yeah.

19 SENATOR CARLUCCI: All right. Thank you.
20 Any questions?

21 SENATOR SQUADRON: Yeah, just briefly.

22 I love what you do because, rather than say,
23 here's the service that the community needs, you
24 look at what the community needs, and then provide
25 the service.

1 And that kind of comprehensive way of looking
2 at helping communities is really powerful; so, thank
3 you both for that.

4 And then the other thing is, you know,
5 I think that -- we've talked a lot about
6 evidence-based home visiting.

7 One reason for that is, it's just so
8 appalling how little of it we fund right now. It's
9 such a gap.

10 Thank you for bringing in the fact that, when
11 you talk about EarlyLearn, (unintelligible) in the
12 surveys earlier, when you talked about child-care
13 subsidies, especially ones from high-quality
14 providers that do bring the parents in, and
15 associated services, I just want to confirm: Is the
16 issue, when you look at sort of the gaps in prenatal
17 to pre-K services, that we don't know what to do?
18 Or that we know what to do, but we don't provide the
19 resources necessary to get it done?

20 Which of those two is it?

21 NINA PIROS: I think we know what to do, and
22 many of us are doing it at a smaller scale than we
23 would like to.

24 Resources are limited; and, therefore, we
25 cannot serve everyone that needs those services.

1 And I think that's where the challenge is.

2 And, also, those hard-to-reach families that
3 don't get to our doors. And, turning families away
4 because we are at capacity.

5 SENATOR SQUADRON: You turn families away
6 from good programs at University Settlement?

7 NINA PIROS: Yes.

8 SENATOR SQUADRON: Thank you.

9 NINA PIROS: Maintain a waiting list.

10 SENATOR SQUADRON: Same thing.

11 Thank you so much, both of you.

12 GREGORY BRENDER: Thank you.

13 ASSEMBLYMAN HEVESI: Actually, sorry.

14 Sorry, just one -- it's not a questions.

15 It's just an open invitation to my colleagues and
16 everybody here.

17 I wanted to make you aware, the Assembly has
18 a child-care workgroup. That workgroup is going to
19 be holding three roundtables in the coming month.
20 One of them is going to be specifically focused on
21 the reauthorization of the block grant.

22 GREGORY BRENDER: Oh, great.

23 ASSEMBLYMAN HEVESI: So that should be at the
24 end of October.

25 I just wanted everybody to know to keep an

1 eye out for it. If you need any more information,
2 just reach out.

3 And, of course, to my colleagues, we would
4 love to have you there.

5 Thank you.

6 SENATOR CARLUCCI: Thank you so much for your
7 testimony.

8 GREGORY BRENDER: Thank you.

9 NINA PIROS: Thank you.

10 SENATOR AVELLA: We have with us now,
11 Tracie Robinson, policy analyst at the
12 Human Services Council;

13 Dacia Reed, senior public policy associate at
14 the Children's Defense Fund;

15 Sarah Fajardo, policy coordinator at the
16 Coalition for Asian-American Children and Families;

17 And Betty Holcomb, director of policy at the
18 Center for Children's Initiatives.

19 Thank you for joining us.

20 TRACIE ROBINSON: Good afternoon.

21 Thank you for having us here.

22 I'm Tracie Robinson. I'm the policy analyst
23 at the Human Services Council, and I appreciate the
24 opportunity to testify today.

25 I won't go into information on the background

1 on our organization. We need to keep it short.

2 So I want to tell you what I'm focusing on
3 today, which is, basically, funding of the
4 human-services sector.

5 As both service providers and employers,
6 human-services organizations are an economic engine
7 for the state, but as you know, our sector faces
8 many administrative and fiscal challenges that
9 impair its ability to meet the growing demand for
10 services, particularly in the area of early
11 childhood services.

12 I will briefly discuss a few of the
13 challenges that affect the entire sector, and then,
14 obviously, turn it over to my colleagues on the
15 panel who can provide much greater detail with
16 respect to early childhood services.

17 In my written testimony, I mentioned various
18 issues, including the devastating effects of chronic
19 underfunding of programs;

20 The recruitment and retention crisis caused
21 by the five-year denial of cost-of-living
22 adjustments for our workforce;

23 The impact of the impending minimum-wage law,
24 and why additional funding for our sector will be
25 critical to the implementation of that law;

1 The non-profit infrastructure
2 capital-investment program established in this
3 year's budget, which we're really excited about, and
4 we would love to continue working with you to grow
5 that fund, and make sure that it's reoccurring;

6 And the stigma around indirect costs, or,
7 overhead, which is really suffocating our sector.

8 So, our sector has sustained, roughly,
9 \$1 billion in funding cuts since 2009, and at the
10 same time, the cost of living, the cost of doing
11 business, and the number of people living in poverty
12 in the state have all increased, and the numbers for
13 children living in poverty are really staggering.

14 Starving the sector is a short-sighted
15 solution.

16 The government seems to think that it's
17 saving money by cutting funding for human-services
18 programs, but the reality, is that these programs
19 actually serve (sic) the state millions of dollars
20 every year.

21 I won't go into the details. I have
22 footnotes and citations in written testimony.

23 But the return on investment for programs,
24 such as, supportive housing, and alternatives to
25 education -- to incarceration, for example, is well

1 documented.

2 When it comes to early childhood, we know
3 that funding early childhood services is a
4 long-term -- it's a long-term strategy to ensure
5 that we have sustainable communities.

6 When organizations are not paid the full cost
7 of the services they provide, their capacity to meet
8 the growing demand is severely limited, and
9 sometimes the quality and scope of their services
10 are reduced, and when that happens it actually
11 touches on equity; equity, in terms of access to
12 services, equity in terms of the quality of services
13 and the distribution of services across the state.

14 In this environment, human-services
15 providers, including those specializing in early
16 childhood, can't expand their services, they can't
17 undertake meaningful performance management, they
18 can't engage in planning for sustainability, because
19 they're simply too busy, trying to figure out how
20 they're going to deliver services, comply with
21 regulations, and raise extra funds to make up the
22 difference that they're not getting from their
23 government and philanthropic funders. And they're
24 doing all of this on a shoestring budget.

25 And as you know, late payment, which has been

1 well documented by the state comptroller, further
2 destabilizes the sector.

3 So what does this mean for early childhood
4 services?

5 In some cases -- and I'm sure you've heard
6 this ad nauseam today -- in some cases, it means
7 fragmented service delivery, no continuity of care
8 due to high staff turnover, outdated service
9 facilities, and a general climate of uncertainty.

10 People don't know how long their programs
11 will last, how long people will be employed, how
12 long they'll be able to serve the populations they
13 serve.

14 And what does this mean for the state's
15 economy?

16 It actually means a growing class of working
17 poor, because early childhood workers now find
18 themselves in the same precarious financial
19 circumstances as the populations that they're
20 serving.

21 So by making smart equitable investments in
22 the human-services sector, you can help ensure that
23 services are being delivered effectively and
24 efficiently where they're need, so the State can
25 carry out its constitutional mandate, which is to

1 provide aid, care, and support for the needy.

2 So, if there are no questions for me, I know
3 we're in a rush here, I will turn it over to my
4 colleagues.

5 SENATOR AVELLA: I think you said -- I'm
6 missing page 5 of your testimony.

7 I see it's page 1, 2, 3, 4, but there's no
8 page 5.

9 TRACIE ROBINSON: Oh.

10 SENATOR AVELLA: Well, you can figure it out
11 later.

12 TRACIE ROBINSON: I must have given you a bad
13 copy. I'm sorry.

14 May I?

15 SENATOR CARLUCCI: We'll take questions at
16 the end, I guess.

17 TRACIE ROBINSON: Sorry about that.

18 SENATOR AVELLA: No, it's all right.

19 BETTY HOLCOMB: My name is Betty Holcomb.
20 I'm with the Center for Children's Initiatives here
21 in New York City.

22 We are a child-care resource and referral
23 agency, so we're talking with families every day,
24 and working with the professionals in the field.

25 And, we're also in -- helping to lead the

1 Winning Beginning New York coalition, and the
2 Ready for Kindergarten Coalition.

3 And we're so happy that you have taken the
4 focus you have for this particular hearing, because
5 we know that this is the most urgent need in our
6 field, to be sure that babies, toddlers, and their
7 families are appropriately supported.

8 So, I have four major recommendations in
9 this.

10 The first one is, I'm sure repeating what
11 everyone has said today, which is, this sector of
12 child care, generally, and, Head Start, pre-K, the
13 whole -- all of these funding streams are
14 dramatically under-resourced.

15 And the situation with infants and toddlers
16 is now -- has been a persistent shortage over the
17 last decade in New York.

18 Ten years ago, the Administration for
19 Children's and Families said they were going to make
20 a priority to age down and serve more babies and
21 toddlers.

22 But with the great recession and the flat
23 funding and cut funding in federal and state venues,
24 we are in much worse shape than we were 10 years
25 ago. And, we don't have enough care, families can't

1 afford it.

2 I've given you some data.

3 I have lots of footnotes I didn't put in, but
4 I'm happy to give you, you know, song and verse.

5 But, I mean, the basic situation is, even if
6 you have money, there isn't enough capacity to serve
7 everybody who needs it.

8 Babies and toddlers, there's one regulated
9 spot for every five families who need it in the
10 city. And when you get into certain parts of the
11 city, like The Bronx, where the poverty level is
12 very high, that shortage grows even larger.

13 And we think of it as, you know, there's
14 about 100,000 children in each cohort, birth to 5's.
15 There's probably about 300,000 babies and toddlers
16 in the city who need service.

17 And, we're only serving about 10 percent of
18 them right now, and we're not doing a particularly
19 good job of it.

20 The fact that you're holding this hearing
21 right now is especially important because, even at
22 the federal level, officials in Congress and
23 advocates have recognized that we need to expand
24 infant/toddler services.

25 And there's even in the reauthorization of

1 the child-care-and-development block grant, a new,
2 broader infant/toddler set-aside, that we thought
3 was a wonderful idea. But you're probably all aware
4 that, right now, there is no money to support that.

5 The appropriations, not only doesn't cover
6 that, but it leaves New York State with a
7 \$90 million shortfall.

8 And our state coalition and the Ready for K
9 campaign are both asking that we find \$190 million
10 more for child care, or, we're going to lose
11 21,000 children, at least.

12 That's a very, very conservative estimate on
13 the seats we will lose, because the new law has
14 other requirements as well, that we have to do, we
15 can't afford not to do, because it's inspections and
16 other new requirements.

17 So, we're likely to have a much worse
18 situation if we don't act in the state to increase
19 the investment.

20 SENATOR CARLUCCI: So to keep the status quo,
21 what would the investment be?

22 BETTY HOLCOMB: To keep the status quo, if
23 Congress had funded the federal block grant, it
24 would have been 90 million, and I can give you the
25 background on that, because -- in the first year.

1 And that's mostly just health and safety. And that
2 translates into at least 21,000, maybe, more kids.

3 SENATOR CARLUCCI: Okay. 21,000.

4 Okay.

5 BETTY HOLCOMB: Starting, where we are now,
6 the status quo is, we're only serving 22 percent of
7 the eligible families right now, and even fewer of
8 the babies and toddlers.

9 SENATOR CARLUCCI: So an additional
10 90 million to keep the status quo, right now?

11 BETTY HOLCOMB: Well, the 90 million is to
12 fund the new requirements that are coming in --

13 SENATOR CARLUCCI: Right.

14 BETTY HOLCOMB: -- which includes, primarily,
15 the health and safety requirements, the new
16 inspections.

17 We have to do annual inspections now of
18 every type of care, which we don't do now in
19 New York State.

20 New York, Illinois, and California are the
21 states who have the most at stake now with these new
22 rules and without the appropriations.

23 ASSEMBLYMAN HEVESI: So just, very quickly,
24 the 90 million is recurring; right?

25 BETTY HOLCOMB: Yes, it's recurring.

1 ASSEMBLYMAN HEVESI: It's not a one shot?

2 BETTY HOLCOMB: It's recurring.

3 And as this new law goes into effect, it does
4 other things, all of which we think are good and are
5 long overdue.

6 ASSEMBLYMAN HEVESI: It's underfunded.

7 BETTY HOLCOMB: But that will be more
8 funding.

9 So this is very conservative.

10 ASSEMBLYMAN HEVESI: Does the 90 million stay
11 flat, or does it the grow?

12 BETTY HOLCOMB: It will probably grow.

13 We're waiting on the Office of Children and
14 Families Services.

15 This is a very preliminary estimate that
16 they've given us, and this, basically, is just a
17 look at, in the next year, when we have to do new
18 inspections, fingerprinting, things like that.

19 And that's important, because the things
20 you're thinking about in this hearing, babies and
21 toddlers, most of them are in home-based child care,
22 and a lot of it is informal care.

23 So these new health and safety regulations
24 could stand to improve that, but, we don't have the
25 federal dollars.

1 ASSEMBLYMAN HEVESI: I understand.

2 Okay. Thanks.

3 BETTY HOLCOMB: The other thing to think
4 about, in terms of the impact of the block grant,
5 and we hope you'll join us, we're messaging, we have
6 sign-ons, we're doing social media, and everything,
7 to the federal delegations. But we would hope that
8 you would all join us in reaching out to our federal
9 delegation. We're doing it as advocates this month.

10 But, as you know, with appropriations still
11 in sequester for domestic programs, we're just going
12 to continue on a very poor trajectory.

13 SENATOR CARLUCCI: I think it will be very
14 important that we can advocate to our federal
15 partners in government, to make sure that we're
16 working together, and how they complement each
17 other.

18 And coming from, you're on the front lines,
19 you know, educating us as well, and how we can work
20 together, that would be extremely helpful.

21 BETTY HOLCOMB: Yeah. And we do a lot of
22 work, by the way, with Jane Brown up in Rockland,
23 who I know you're doing lots of great things with.

24 We appreciate everybody on the panel, and
25 that you're having this hearing.

1 As we advocate for these resources, as the
2 other people on this panel, and I don't want to go
3 too long, you know, the issues around the workforce
4 and increasingly framed as pay equity, are just
5 desperate for the people who are working with
6 children under the age of 4; so, the very children
7 that you're looking at at this hearing, and thinking
8 about those services.

9 And, at CCI, we think you could look to the
10 city and state pre-K initiatives, and other pre-K
11 initiatives around the state, as kind of a model for
12 what we need to do; that, increasingly, in pre-K, we
13 paid attention to the need to increase and get
14 towards salary parity with teachers in the public
15 school.

16 So, both, in the city, and also in Rochester,
17 as the pre-K funding for full-day was increased,
18 we've seen efforts to improve the compensation, and
19 give things like signing and retention bonuses, for
20 teachers who are working in these programs.

21 That's not happening for infants and toddlers
22 yet.

23 And, of course, if you're trying to run a
24 program, I'm sure you heard about this already, but
25 it creates extraordinary tensions within programs,

1 and, it's just not right, and we aren't going to get
2 the results we want.

3 In New Jersey, they have now done lots of
4 things, like, create funds to help people go to
5 school, to support them as they pursue their degrees
6 and get qualified to enter the field, and stay in
7 the field.

8 So I think, overall, this investment has to
9 take into account the kind of rates that are going
10 to support paying people, so they aren't themselves
11 applying for food stamps and Medicaid. And, of
12 course, we have a very high turnover rate.

13 And the third recommendation is that the
14 State should look toward developing a qualified
15 workforce for the future.

16 As we all are hearing such fervor about early
17 childhood education, and a lot of us have been
18 cheerleading it, we don't really have the workforce
19 trained. And we should take on initiatives to make
20 that happen, to support people as other states have,
21 both, the people in the field to get their
22 credentials, and bring new people in, and then have
23 the rates so that they support people.

24 Finally, we want to promote the type of
25 services that really work, which we know are

1 comprehensive.

2 Early Head Start is a really good model.

3 All the research shows that it's got built
4 into it all the things we want to see that support
5 the child's whole development; so, nutrition,
6 health, mental health, parent engagement, family
7 support, and social services when they're needed.

8 And we really want to move toward that.

9 And we want to also make sure that the rest
10 of the sector that supports children and family and
11 social services are engaged in supporting children
12 in these programs.

13 We can do a lot more, I know, in
14 Rockland County.

15 There are family resource centers.

16 And around the state there are other examples
17 of creating stronger linkages, so we're really
18 building a continuum of robust services that support
19 children, year by year.

20 But these first three years are really the
21 ones that are the most important.

22 I'll stop.

23 I'm glad to fill any of you in on any
24 questions about the research here.

25 SENATOR CARLUCCI: Great. Thank you.

1 DACIA REED: Hi, my name is Dacia Reed.
2 I serve as the senior public policy associate at the
3 Children's Defense Fund of New York.

4 I'm actually here today for my colleague
5 Patty Bankhart (ph.), who serves as our director of
6 research, and our early childhood expert, and is
7 also currently on her honeymoon.

8 So, I might be able to save us some time,
9 because I might not be able to answer many of your
10 questions.

11 But if you want to talk about Raise the Age
12 at any point, I am there, and I'd love to talk about
13 it.

14 [Laughter.]

15 DACIA REED: But for the matter at hand,
16 I wanted to just let you know that the
17 Children's Defense Fund is very grateful to the four
18 of you for convening this hearing today, and want to
19 call your attention to, kind of, two issues.

20 The first has been reiterated, I'm sure, by
21 many, but most of the focus on gaps in services for
22 the early childhood education.

23 Despite recent significant investments in
24 universal pre-K in New York City, still more than
25 60 percent of the state's 4-year-olds do not have a

1 seat in a full-day of pre-K, including 51,000
2 children from low-income communities across the
3 state.

4 Fewer than 25 percent of all eligible
5 low-income children receive a child-care subsidy,
6 and only 21 percent of children under the age of 6
7 receive the developmental screening in the state of
8 New York.

9 Despite eligibility and need, capacity
10 remains insufficient. And investments in programs
11 and services like these during the early years of a
12 child's life help to dismantle something we talk a
13 lot about at the Children's Defense Fund, which is
14 the Cradle-to-Prison (unintelligible).

15 So we join with our partners, and I know that
16 Patty will be in Albany this fall to meet,
17 hopefully, with you guys, to talk more about funding
18 streams to create sufficient capacity that's
19 adequate, but also equitable, across the state.

20 Secondly, and kind of more fully, I want to
21 jump into another topic in regard to early childhood
22 systems, coordination, and governance.

23 And we know that kind of a robust,
24 coordinated approach to serving children from
25 prenatal years through age 8 is associated with

1 improved child outcome.

2 However, despite the benefits of service
3 coordination, New York continues to deliver early
4 childhood programs and services through somewhat of
5 a fractured early childhood system.

6 New York's early childhood system is overseen
7 currently by three separate agencies -- OCFS, SED,
8 and DOH -- with a myriad of funding streams,
9 including four separate funding streams for pre-K,
10 and six for home-visiting programs.

11 And what this translates into is programs
12 being left competing for different funding streams,
13 and facing kind of the onerousness of different
14 duplicative regulatory and reporting requirements
15 and quality of standards that vary.

16 For parents it creates logistical hurdles and
17 barriers to accessing and retaining services.

18 So as New York State continues to demonstrate
19 leadership in funding early childhood education, CDF
20 encourages careful attention to early childhood
21 spending, coordination, and governance.

22 And we know that other states have
23 implemented governance models that allow for a more
24 coordinated approach to early childhood services.
25 These include creating one state agency that

1 oversees all early childhood programming,
2 consolidating early childhoods programs into a
3 single existing agency, coordinating early childhood
4 programs through one office or unit in the
5 Governor's Office at the executive level; but then,
6 also, local coordination with some type of state
7 oversight, in really providing that capacity at a
8 local level.

9 So our conversations with other states that
10 have implemented more centralized models reveal the
11 following:

12 Each of these government's models provided
13 the benefit of seeing the early childhood system as
14 a whole, has created more, you know, responsibility
15 and accountability for looking at the whole early
16 childhood system.

17 Also, consolidation allowed for more
18 flexibility with funding, at times blending or
19 braiding different funding streams, to support more
20 service provisions.

21 Each governance model increased visibility of
22 early childhood services, and out connection with
23 parents and families, and created the
24 (unintelligible) agency, or consolidated programs
25 under one existing agency, helped to align program

1 requirements and quality standard requirements.

2 So we held interviews with other early
3 childhood advocates in New York State to get their
4 insights on needed improvements, in terms of
5 coordination and governance in the early childhood
6 services.

7 And based on those, CDF New York has a series
8 of recommendations and goals that I know Patty will
9 be up speaking with you guys about during the
10 session.

11 First, is establishing a single point of
12 accountable for early childhood programs across
13 systems.

14 Second, is building state and local
15 partnerships that would allow for local-level
16 councils to be empowered to coordinate the provision
17 of services at the local level.

18 Federal aligning funding streams,
19 particularly for programs with multiple funding
20 streams, such as State-funded pre-K.

21 Next, is creating an integrated early
22 childhood data system with a simpler way for
23 programs to report program outcomes.

24 And, finally, creating a single point of
25 access for early childhood programs to make

1 navigation of those programs simpler for parents.

2 So, thank you for your time.

3 I know I covered a lot, but definitely will
4 be back in touch.

5 SARAH FAJARDO: Good afternoon.

6 I want to echo the thanks from my fellow
7 panelists for holding this important hearing. We're
8 really grateful for your time and attention to this
9 important issue.

10 My name is Sarah Fajardo. I work for the
11 Coalition for Asian-American Children and Families
12 as a policy manager there.

13 For nearly 30 years, CACF has been the
14 nation's only Pan-Asian children's rights
15 organization, and we work to improve the health and
16 well-being of Asian-Pacific Americans in
17 New York City, but also New York State.

18 We're a coalition of over 40 direct-service
19 providers who work with Asian-American communities
20 in New York.

21 So I just wanted to highlight a couple of the
22 major concerns and kind of challenges facing the
23 Asian-Pacific American community, both in the city
24 and the state.

25 Asian-Pacific Americans are, by percentage,

1 the fastest-growing community in New York City, and
2 New York State's APA population increased 35 percent
3 from 2000 to 2010.

4 This rapid population growth is across an
5 incredibly diverse population, so we have folks who
6 speak over 40 Asian languages and dialects in the
7 city and state.

8 Accompanying this population growth are also
9 high rates of poverty and linguistic isolation,
10 which are big challenges to our community members in
11 accessing important services.

12 And, finally, Asian-Pacific Americans have
13 limited visibility in many of our state systems.

14 Often, when New York State agencies issue
15 reports, Asian-Pacific Americans are not mentioned.
16 Data on APAs are suppressed.

17 Folks are categorized as simply "Asian,"
18 "Other," or grouped as "White," to compare with
19 other communities of color.

20 So this lack of specified disaggregated data
21 fails to highlight the needs that are actually
22 present within the Asian-Pacific American community.

23 So we do a lot of work, trying to disrupt
24 this idea of Asian-Pacific Americans as the model
25 minority, folks who don't need services or help,

1 which is simply not the case.

2 So CACF we would like to support the
3 recommendations advanced by my colleagues here to
4 expand resources for early childhood education
5 programming, especially for culturally-competent and
6 linguistically-accessible resources.

7 Language access is a big barrier.

8 It's actually getting families connected to
9 those services that are already available.

10 And we've -- we do support the development of
11 an early childhood education workforce that is
12 multi-lingual and culturally-competent.

13 And I have some specific dollar asks in my
14 written testimony.

15 Additionally, we would ask that funding be
16 allocated to help providers address outreach and the
17 need for professional development for service
18 providers to serve our community members.

19 And CACF has been working with
20 Assembly Member Kim and Senator Stavisky on a state
21 bill -- two state bills, to collect better data
22 about our communities, because, without the data,
23 it's really hard to target services for our
24 communities, and make a good argument that we do
25 need extra dollars allocated to meet our community's

1 needs.

2 And, finally, we would propose that the State
3 include requirements for cultural competency and
4 linguistic accessibility in state RPFs for early
5 childhood services, to actually ensure that, you
6 know, the services include the needs of our
7 community and the APAs are served adequately.

8 Thank you.

9 SENATOR CARLUCCI: Good. Thank you.

10 Did you want to add something?

11 BETTY HOLCOMB: I just wanted to add one more
12 thing to your list, about what might help with the
13 birth-to-three, is when we talk about data, it's
14 very hard to find the birth-to-three data
15 disaggregated.

16 It's only recently that we've sort of begun
17 to really look at what birth-to-five as being some
18 separate stages of development.

19 But a few years back, CCI worked with Docs
20 for Tots, and New York Zero-to-Three, to put
21 together a report on infant/toddler services in
22 New York City by ZIP Code.

23 And it's just appallingly hard to find things
24 broken out so that you can understand where those
25 children are.

1 We've done that in some of our guidebooks to
2 the services in New York City as much as we can.

3 But, statewide, that's an important question
4 for us to pay attention to.

5 SENATOR AVELLA: Well, thank you for your
6 testimony.

7 Assemblyman.

8 ASSEMBLYMAN HEVESI: Thank you all.

9 I'm going to be pretty brief.

10 But when you talk about developmental
11 screening, are you talking about recap (ph.)?

12 Are there other types of screens that we're
13 talking about?

14 If you can answer that.

15 DACIA REED: I don't know.

16 I'd have to ask Patty, who wrote my talking
17 points.

18 ASSEMBLYMAN HEVESI: That's fine. If you can
19 get back to me on what works, I know we don't
20 screen -- what was the number you guys said?

21 You said it was 21 percent of the population?

22 DACIA REED: Yes.

23 ASSEMBLYMAN HEVESI: Okay. Well, that's a
24 big problem, because you -- then later on, you're
25 trying to teach, or, even later on in life, trying

1 to get people to do jobs that they're just not going
2 to be capable of doing. They don't have the
3 executive function to do it.

4 So the screenings that work will be helpful
5 to me.

6 BETTY HOLCOMB: So both the State Department
7 of Education, also the Early Childhood Advisory
8 Council, have developed a lot of protocols for that,
9 and tools, and so we can share back to you.

10 ASSEMBLYMAN HEVESI: That would be great.

11 And then just one last question, if I can.

12 Sorry.

13 SENATOR AVELLA: No, go ahead.

14 ASSEMBLYMAN HEVESI: So the single point of
15 access jumped out at me.

16 As you know, the City did a single point of
17 access with the HIV community.

18 I am actually carrying a bill, to introduce a
19 point of access for that community in the state.

20 But I would like to look at a model for
21 EarlyLearn, to see if that fits, and have a
22 conversation about that.

23 SENATOR AVELLA: Yeah, absolutely.

24 (Unintelligible.)

25 ASSEMBLYMAN HEVESI: So you should have just

1 said no.

2 [Laughter.]

3 SENATOR AVELLA: Or maybe we can do something
4 together.

5 ASSEMBLYMAN HEVESI: I would love that.

6 DACIA REED: And I think we have a meeting
7 set up at the beginning of October, so I'll make
8 sure Patty's there.

9 SENATOR AVELLA: Senator Squadron.

10 SENATOR SQUADRON: And actually related to
11 that, and this is, I guess, a stupid question, and
12 please answer it in the simple form I am asking,
13 because (unintelligible) stupid question.

14 I notice we use the term "early child care,"
15 "early education," "EarlyLearn," "early child
16 services."

17 Just list for me specifically the programs
18 you're talking about.

19 Just the programs, list them. I just want to
20 know what we're talking about.

21 BETTY HOLCOMB: The funding for them is the
22 way it gets -- the reason it gets complicated is,
23 you know, if you want to talk about subsidized child
24 care, the child-care and development block covers
25 care --

1 SENATOR SQUADRON: Right, so I'll get
2 started.

3 So, Head Start --

4 BETTY HOLCOMB: -- for birth to 12.

5 And then Head Start is only for three and
6 five -- I mean, four and --

7 SENATOR SQUADRON: I know.

8 So --

9 BETTY HOLCOMB: And then there's --

10 SENATOR SQUADRON: Pre-natal to pre-K.

11 We've got a bunch of the prenatal stuff.

12 BETTY HOLCOMB: There's home visiting, that
13 sort of gets included, and early Head Start includes
14 that.

15 SENATOR SQUADRON: Great.

16 BETTY HOLCOMB: And there's early
17 intervention, which is education funding.

18 SENATOR SQUADRON: Great.

19 BETTY HOLCOMB: And there's also special
20 education, of course, and, you know, other things
21 that come into play.

22 And I think one of the things that makes
23 getting to the goals that we all share about
24 coordination, is each of those has its own history,
25 because every ten years we decide it's the best

1 thing. Right?

2 So some social services funding.

3 Some is education funding.

4 And there are pros and cons of all of those,
5 even if you talk about single point of access.

6 Like, right now, we have pre-K, with
7 education money, so any family can get access.

8 And, actually, immigrant families realize
9 this, and now we're doing that for 3-year-olds.

10 Every other form of early childhood service
11 is needs-based.

12 SENATOR SQUADRON: So I know it's
13 complicated.

14 That's kind of why I'm asking the simplified
15 version of the question, and I appreciate just --
16 I appreciate the complexity.

17 And I appreciate that somebody told me.

18 Just so I understand: If home visiting,
19 Head Start, early Head Start, early intervention,
20 special-education needs, child-care subsidy, pre-K,
21 obviously, big headline-getter, and any -- what's
22 being missed in those seven things I just said?

23 And, again, I have to admit, I've never
24 gotten my head fully around this.

25 I think I -- I've served for eight years

1 using euphemisms.

2 I have this great panel here, and if I can
3 just get past the euphemisms, as briefly as possible
4 in the next minute or two, it would be really
5 helpful to me (unintelligible).

6 So, I appreciate it.

7 BETTY HOLCOMB: Well, that's why we say
8 "early care and learning."

9 [Laughter.]

10 SENATOR SQUADRON: So I'm glad to know that
11 I'm not the only one --

12 BETTY HOLCOMB: Eight agencies that programs
13 answer to in the city (unintelligible) --

14 SENATOR SQUADRON: So just from any of the
15 four of you, in those seven that I just listed, was
16 there anything being missed?

17 I know some of it was redundant.

18 Was anything being missed?

19 And I know we have another panel to come in
20 and fill in, but, that sort of jumps to mind?

21 Anyone?

22 Okay, good.

23 Well, that's a starting point, anyway.

24 We're not closing the list off, by any means.
25 I'm just trying to gather it.

1 So, we'll start with those seven. And you,
2 or the single person watching at home, I'd love to
3 continue to sort of understand, in this category,
4 the universe of what programs we're talking about.

5 So thank you very much for that. I really
6 appreciate it.

7 BETTY HOLCOMB: I can send you some things
8 too.

9 SENATOR SQUADRON: Thank you.

10 SENATOR AVELLA: Well, send it to the entire
11 panel.

12 ASSEMBLYMAN HEVESI: One last question?

13 Cultural competency and RFPs, what are we
14 doing about that?

15 SARAH FAJARDO: At the state level?

16 ASSEMBLYMAN HEVESI: Yes.

17 Is there anything we could work together on?

18 SARAH FAJARDO: So the language that I've
19 seen in state RFPs have -- you know, there have
20 been mentions of cultural competency and linguistic
21 accessibility as an important criteria.

22 But actually allocating points in the point
23 system to those factors, I haven't -- I haven't seen
24 it.

25 Perhaps it's happened, but --

1 ASSEMBLYMAN HEVESI: Can we have a
2 conversation about that post to hearing at some
3 point?

4 SARAH FAJARDO: Absolutely.

5 ASSEMBLYMAN HEVESI: Thank you very much.

6 SENATOR SQUADRON: That's an important one.

7 SENATOR AVELLA: Yeah, that's a good one.

8 Thank you.

9 The last panel, Stephanie Gendell, the
10 associate executive director of policy and
11 government relations at the Citizens' Community for
12 Children;

13 Randi Levine, policy coordinator and early
14 childhood education project director for Advocates
15 for Children.

16 STEPHANIE GENDELL: We appreciate you saving
17 the best for last.

18 SENATOR AVELLA: We appreciate you staying.

19 STEPHANIE GENDELL: I'm Stephanie Gendell.

20 I'm the associate executive director at
21 Citizens' Committee for Children. It's a
22 multi-issue child-advocacy organization.

23 And I'm definitely not going to read my
24 testimony to you, but we really appreciate you
25 holding this hearing, and you paying special

1 attention to the needs of the youngest New Yorkers.

2 It's not an overstatement to say that what
3 happens to children between prenatal and pre-K
4 changes the whole life outcome, their entire life
5 outcomes.

6 As has been said earlier, we know what places
7 these young children at risk, and we know how to
8 mitigate those risks, but what we don't seem to know
9 how to do is support the services that we know make
10 a difference for these young children.

11 In my testimony, it's divided, essentially,
12 into two parts: one is about the data, and one is
13 our recommendations.

14 And I'm definitely not going to read the data
15 to you.

16 But when you look in the data, you can see in
17 the numbers, the sheer volume of children that we're
18 talking about, and all of the risk factors that
19 we're facing.

20 And just to put a little context around it,
21 there are 4.2 million children in New York State,
22 and about a million of them are living in poverty.

23 And in New York City, there's 1.8 million
24 children that live here, and that is more than
25 double the number of children that live in the next

1 largest city of Los Angeles. And it's about half
2 the children in New York State, and about 500,000 of
3 them are living in poverty.

4 And then one other piece of data that I'll
5 just mention is that, just to note that there were
6 almost 19,000 children in New York City who spent
7 one night in a homeless shelter last year, and there
8 were, roughly, 1800 babies born into the shelter
9 system.

10 So we know that there are just a tremendous
11 number of children in the state, in the city, who
12 are born into high-risk situations, and we know how
13 to help them.

14 And so I'm just going to run through some of
15 our recommendations, and I won't go into detail
16 about the ones that have already been spoken about.

17 But to start with, we feel that improving the
18 economic security of pregnant and parenting --
19 parents would help, so we support raising the
20 minimum wage, living wage.

21 We've been supporting a proposal to allow
22 families to be able to split a portion of their tax
23 refund or their tax credit, and put a portion in a
24 529 college-savings account.

25 And we've also then wanted the savings in a

1 529 to be removed from the asset-limit test, or to
2 eliminate the asset test altogether.

3 We know from looking at the data that, if you
4 go to college, it improves your median income. And
5 we know that just a little bit of savings gives a
6 young person a college identity, and so they don't
7 need to have a tremendous amount saved. But just a
8 little makes someone think they're going to college
9 and improves their likelihood of going to college.

10 We also want to ensure pregnant women have
11 access to prenatal care.

12 We are grateful to the Chairman for
13 co-sponsoring the bill to make pregnancy a
14 qualifying event (unintelligible) for the state
15 health exchange, and we hope that bill will be
16 signed into law, and we will be more than happy to
17 do what we can to help move it along.

18 We believe New York needs to pass paid family
19 leave. This is an economic issue.

20 Those who don't have this through their
21 employer are typically low-income families, and so
22 those parents need to either go to work or miss
23 12 weeks of pay.

24 Many of them can't afford that. It impacts
25 their bonding with their children, it impacts the

1 likelihood of breastfeeding, and it impacts the
2 health care, the well-child visits, immunizations of
3 their children.

4 As has been discussed a lot, we want to
5 maintain and expand access to home-visiting
6 programs.

7 We support anything Senator Squadron wants to
8 do to make home visiting universal.

9 We support all of that.

10 SENATOR AVELLA: (Unintelligible.)

11 [Laughter.]

12 STEPHANIE GENDELL: We agree.

13 And we've also been interested in more
14 home-visiting programs for families in the shelter
15 system, because we know they're a good group to
16 target, and that there are 1800 babies born there.

17 And, also, allowing some of the hours of home
18 visiting to count towards the work requirement for
19 families on public assistance.

20 With regard to early education, I'll just add
21 that we need -- we may have every 4-year-old having
22 access in New York City, but outside New York City
23 that is not the case for pre-kindergarten.

24 We need to actually expand pre-K outside
25 New York City.

1 The estimate of the \$90 million shortfall for
2 child care, my understanding of that is that that's
3 the minimum amount of the shortfall. It just
4 includes the health and safety standards, and that
5 there are other assets that they haven't been able
6 to come up with an estimate for.

7 And I'm very concerned that they will try to
8 resolve that through cutting subsidies to children,
9 increasing -- some of it they might charge the
10 providers to have inspections, because part of it's
11 inspections. But these are low-income family
12 providers that we're talking about, or, that they
13 may increase parent fees, none of which would be a
14 step in the right direction.

15 We actually need to increase the capacity.

16 We're part of the Campaign for Children.

17 In a few weeks, we're going to be issuing a
18 report that's going to show that, in New York City,
19 only 14 percent of income-eligible infants and
20 toddlers are served in the city's child-care system.

21 And so we need to do much more to be able to
22 serve infants and toddlers in child care.

23 On the housing side, we support the calls for
24 supportive housing, for at least 35,000 new units.

25 We hope that some of those units can be

1 preserved as set-asides for families, and also for
2 youth aging out of foster care.

3 And also on housing, we've been advocating
4 for an increase to the child-welfare housing
5 subsidy.

6 It is currently \$300 a month for up to
7 three years. It has been that since the 1980s.

8 \$300 does not stabilize a housing situation.

9 If you adjust that for inflation, it's about
10 \$602, so we'll take 600.

11 And on the child-welfare side, which I would
12 say is the -- of the package of seven, child welfare
13 and mental health are sort of the last part of that
14 bundle.

15 In addition to child-welfare preventative
16 services, if the State opens up a case -- the county
17 opens up a case to get payment from the State, at
18 62 percent, even though it's in statute at
19 65 percent, and then -- but the family has to agree
20 and open up a case.

21 Aside from home-visiting programs, we don't
22 really have what I would call "primary preventive
23 services," where you target communities, or it could
24 be a school, or it could be a homeless shelter,
25 where you've seen a high number of reports about

1 something, and so you target with an intervention
2 that anybody can attend without opening up the case.

3 We could use more of that.

4 We used to have a funding stream called
5 "COPS," that was open-ended.

6 We now have only \$12 million left in COPS.

7 The problem with COPS is, for starters, the
8 "O" in COPS is community "optional" preventive
9 services.

10 So, it needs a new name so that it doesn't
11 get cut.

12 But, it used to allow counties to be
13 creative, and target. And so some counties have
14 actually done home-visiting programs with that
15 limited money. And in New York City, we've used it
16 for -- on the juvenile justice side, but it used to
17 be open-ended, or at least not capped at
18 \$12 million.

19 And then, lastly, on the mental-health side,
20 we need more behavioral-health services for
21 children, zero to five, which I realize is sort of
22 outside the scope of this Committee. But we have
23 very little behavioral-health services available for
24 very young children.

25 And then I'm sure Randi's going to do a much

1 better job about talking about EI than I will, but
2 we would support whatever Randi says about EI.

3 [Laughter.]

4 RANDI LEVINE: Just a quick mention of that,
5 actually.

6 Thank you for the opportunity to speak with
7 you today, and for holding a hearing on this
8 important topic.

9 My name is Randi Levine, and I'm the policy
10 coordinator and early childhood education project
11 director at Advocates for Children of New York.

12 For more than 40 years, Advocates for
13 Children has worked to promote access to the best
14 education New York can provide for all students,
15 especially students from low-income backgrounds and
16 students of color.

17 Every year we work with thousands of families
18 in New York City to help them navigate the education
19 system, and use the information we learn on the
20 ground to help promote systemic change.

21 We're also a proud member of the
22 Winning Beginning New York Coalition on the state
23 level, as well as the Campaign for Children in
24 New York City.

25 As an education advocacy organization, we

1 know that the first five years of children's lives
2 have a profound impact on their education and
3 future.

4 And we know the significant academic gap that
5 already exists when children enter kindergarten,
6 between children who come from lower-income families
7 and have not had access to early childhood education
8 programs, as compared with children who have had
9 these opportunities.

10 We have research in our written testimony.

11 I won't go through it, because I know you've
12 heard today about the tremendous impact that early
13 childhood education programs have on children's
14 academic success, as well as a host of other factors
15 in their lives and their family's lives.

16 I do want to acknowledge, since we're here in
17 New York City, that the beginning of this school
18 year marked an important milestone, as we were able
19 to offer full-day pre-K to every 4-year-old in
20 New York City for the first time.

21 And, we appreciate the State Legislature's
22 investment and support of that program, in
23 partnership with the City, that allowed that to
24 happen.

25 At the same time, we know that there is a lot

1 more work to be done.

2 You've already heard a lot today about home
3 visiting, but we just want to reiterate that
4 home-visiting programs, such as a Nurse-Family
5 Partnership have demonstrated impressive results in
6 helping young children develop, and prepare for
7 school. And it's time to make a substantial
8 investment to expand those programs.

9 I want to talk a little bit about child care,
10 and I know that child care has also come up several
11 times today, but I think we're feeling such urgency,
12 that I want to repeat it.

13 Due to limited funding, only 22 percent of
14 income-eligible children have access to subsidized
15 child care in New York State.

16 A few panels ago, you asked my colleague
17 Gregory Brender how many children we're currently
18 serving. And it's 130,000, which is 22 percent of
19 those who are income-eligible.

20 For many families with low-incomes,
21 subsidized child care provides the only opportunity
22 to access early childhood education for their
23 children.

24 We're pleased that the recent federal
25 reauthorization of the child-care and development

1 block grant included new quality standards; however,
2 as you've heard, it will cost an estimated
3 \$90 million for New York State to implement the new
4 health and safety standards alone.

5 This \$90 million cost does not include a
6 number of the other new federal requirements.

7 Given the significant unmet need that already
8 exists, we want to ensure that the State does not
9 fund these new requirements by decreasing the number
10 of children accessing child care, or making it
11 harder for families to access it, through things
12 like increased fees.

13 Rather, the state and the federal government
14 need to work together to provide increased funding
15 for these new requirements, and provide additional
16 funding to increase the number of children who have
17 access to child-care subsidies.

18 And as you've heard, Winning Beginning
19 New York is asking, in addition to the \$90 million
20 for the health and safety standards and any other
21 costs associated with implementing, for at least
22 \$100 million in new funding to provide subsidies to
23 an increased 13,000 children.

24 While New York City now has universal pre-K
25 for 4-year-old children, we want to ensure that the

1 State continues to move toward full access for
2 3- and 4-year-olds across the state, and to ensure
3 that the various pre-K programs are funded in a
4 coherent manner and provide high quality.

5 As you consider expanding, coordinating, and
6 strengthening the continuum of early childhood
7 education programs that Senator Squadron outlined,
8 we urge you, for all of these, to think about how to
9 ensure that programs have the support they need to
10 enroll and serve those children who are often left
11 behind: young children with delays and disabilities,
12 including with mental-health or behavioral
13 challenges, young children of immigrant parents, and
14 young children living in temporary housing or foster
15 care.

16 Just last week, Advocates for Children
17 received a call from a frantic parent whose
18 subsidized child-care program had told her that she
19 had to remove her son from the program because of
20 his disability, depriving the child of an
21 educational opportunity, and causing a crisis for
22 this low-income single-working parent.

23 Well, early intervention and pre-school
24 special-education services are available for young
25 children with delays or disabilities.

1 We have to strengthen these programs as well,
2 and there needs to be better coordination between
3 these services and other early childhood education
4 programs, so that early childhood programs have the
5 support they need to serve all children.

6 In any conversation that follows from this
7 hearing about increasing investments in early
8 childhood education programs, we urge you to ask:

9 How children with delays and disabilities,
10 children of immigrant parents, children living in
11 temporary housing, children in foster care, will
12 access these programs.

13 How legislation can help ensure that these
14 children are served well, and how legislation can
15 help eliminate barriers to their full inclusion.

16 Advocates for Children would be pleased to
17 partner with you in thinking through these issues,
18 to ensure that the children who need these programs
19 most can access and benefit from them.

20 Thank you for the opportunity to speak with
21 you, and I'm happy to answer any questions.

22 SENATOR AVELLA: Well, thank you both.

23 Questions?

24 SENATOR SQUADRON: Thank you very much.

25 And -- you know, so, behavioral health, we

1 left out.

2 That was really helpful.

3 Anything else that I missed, sort of, as
4 we're actually trying to create a list of what we're
5 talking about when we talk about prenatal and pre-K?

6 RANDI LEVINE: I know in the city, in child
7 welfare, they have targeted preventive services that
8 are created specifically for the toddler.

9 SENATOR SQUADRON: Yes, that was a great
10 point. Thank you for that.

11 And thank you, both of you, for your
12 testimony, and what you provided us, a list of
13 prescriptions is very helpful, as in the context.

14 Let me just ask a question.

15 22 percent are served.

16 What do the other 78 percent do?

17 RANDI LEVINE: That's a great question.

18 SENATOR SQUADRON: Any idea?

19 RANDI LEVINE: We have --

20 STEPHANIE GENDELL: We know the reverse.

21 So when Bloomberg was going to cut
22 47,000 child-care and after-school slots, we
23 surveyed the parents who were going to lose child
24 care, and asked them what they would do if they lost
25 child care, and whether or not they relied on child

1 care to be able to go to work or to go school.

2 So 96 percent of them said they relied on it,
3 to be able to work or go to school.

4 And then the answers to what they would do,
5 I don't remember the percentages, but it was a mix
6 of quitting their job, finding a relative, or,
7 leaving their child home alone, which is more on the
8 after-school side.

9 But even some of the early childhood said
10 that.

11 But the answers were concerning.

12 We could share that report with you.

13 SENATOR SQUADRON: That would be great.

14 RANDI LEVINE: And in terms of our
15 on-the-ground work in Advocates for Children, we get
16 calls from families who are desperate to find a free
17 or low-cost early childhood education program
18 because the parent does want to return to work or
19 school, and is the one, at this point, taking care
20 of the child.

21 We also get calls where there was a -- an
22 informal child-care arrangement with a relative,
23 where that's not viable anymore.

24 SENATOR SQUADRON: And do we know anything
25 about kids who -- about those 22 percent of kids,

1 and sort of how they do in school, or how their
2 families do over time, as compared to the overall
3 eligible population?

4 STEPHANIE GENDELL: We know the research
5 outside of New York shows that they do better.

6 I don't know if we've done a study of how --

7 SENATOR SQUADRON: Well, the research outside
8 of New York would be great to --

9 RANDI LEVINE: Yeah, I mean, certainly these
10 child-care programs do have quality standards.

11 And as we said, the federal reauthorization
12 increases those quality standards.

13 And we know that there is --

14 SENATOR SQUADRON: (Unintelligible) see the
15 impact of those, because not all federal standards
16 have an impact, unfortunately, as we know.

17 So I would just love to see that impact.

18 That's great.

19 And then, finally, one way to deal with the
20 hardest to access or engage communities is -- as you
21 speak about, is step one, any way, is universal
22 access, isn't it? That helps a lot; right?

23 UNIDENTIFIED SPEAKER: It does.

24 SENATOR SQUADRON: Then you have to do
25 aggressive outreach.

1 RANDI LEVINE: That does, exactly.

2 I think that's --

3 SENATOR SQUADRON: So once you're something
4 less than universal, then those folks who have the
5 most ability to access the programs tend to. Isn't
6 that what we find?

7 RANDI LEVINE: I think that that's true.

8 I think that what we've learned from the
9 recent expansion of universal pre-K is that, by
10 making it universal, we have ensured that there's a
11 right for every single child, regardless of
12 circumstance, to attend, but that there also needs
13 to be some focus on:

14 How are we going to do that outreach to
15 families in shelters? to children in foster care?

16 How are we going to ensure, through
17 legislation, as well as otherwise, that these
18 children are able to access the program, and are
19 well-served once they get there?

20 SENATOR SQUADRON: Okay. Thank you.

21 It's an important point to raise at the
22 close.

23 Thank you. I really appreciate
24 (unintelligible).

25 I know we're not done, but, thank you.

1 SENATOR AVELLA: Okay.

2 Assemblyman Hevesi.

3 ASSEMBLYMAN HEVESI: So I should know the
4 answer to this question, but maybe you can help me.

5 Included in the \$90 million, the health and
6 safety requirements, that's just for regulated care;
7 right?

8 STEPHANIE GENDELL: It's actually for the --
9 it's for the people who get subsidies, who are -- we
10 call them now: the informal family, friend, or
11 neighbor care.

12 They're going to become slightly regulated,
13 and part of the cost -- a large part of the cost is
14 that there will have to be checks, both
15 clearances -- the child-abuse/neglect clearances,
16 fingerprints, and also something going to their
17 home, which, statewide, you know, especially
18 upstate, that's expensive.

19 And in New York City, it's a lot of people --

20 ASSEMBLYMAN HEVESI: That's one of the big
21 problems, and why you had two levels of care. You
22 have regulated and unregulated because not everybody
23 can afford regulated care.

24 So this is pulling people out of the
25 unregulated pool into --

1 STEPHANIE GENDELL: No, they would still be
2 considered informal care, and still family, friend
3 or neighbor care. It would still be the same cost.
4 It would be -- usually these are vouchers. It's a
5 voucher as opposed to contracts.

6 It would cost the City more to license them,
7 but it wouldn't cost the parent more.

8 There's the potential that some of these
9 family, friends, or neighbors aren't going to want
10 to do child care because they don't want to have the
11 checks.

12 ASSEMBLYMAN HEVESI: Background checks, or
13 whatever, so they drop off?

14 STEPHANIE GENDELL: Yeah.

15 ASSEMBLYMAN HEVESI: Okay. There's a danger.
16 And then just one other topic, if I can.

17 You mentioned access to services for kids in
18 foster care and, you know, homeless shelters.

19 You know, if I had my -- if I had my way,
20 we'd phase out all the homeless shelters and we'd be
21 in supportive housing.

22 But until that happens, is that a gap in our
23 services, a huge gap, for kids who are in these kind
24 of temporary housings, and something we should focus
25 on?

1 STEPHANIE GENDELL: I think the City has two
2 really interesting new programs that are just
3 starting, particularly for young children.

4 One is through working with the Department of
5 Health. They have their, what they call, "newborn
6 home visiting," which is like two to three visits,
7 and they're targeting the babies born in shelter.

8 That's not the full-package home visiting,
9 but it's something.

10 And they are also starting, the city council
11 is funding a new initiative of, sort of, trauma,
12 risk, working with families with young children, but
13 we haven't really seen the impact of that.

14 But I think those are good places to start,
15 and these are particularly vulnerable children.

16 ASSEMBLYMAN HEVESI: Statewide? Because the
17 homelessness crisis particularly is a statewide
18 problem?

19 STEPHANIE GENDELL: Yeah.

20 ASSEMBLYMAN HEVESI: Anything --

21 STEPHANIE GENDELL: I mean, I would think we
22 would want the same types of services statewide,
23 especially if we show that they work.

24 I don't know of any pilots like that outside
25 the city.

1 RANDI LEVINE: And we've seen the City take
2 some important steps.

3 And with the rollout of pre-K, for example,
4 this year's city hall formed a task force to figure
5 out how we're going to do appropriate outreach and
6 ensure that children in homeless shelters, that
7 their families apply to pre-K and enroll them in
8 pre-K.

9 I think there is more we can do at the state
10 level, including in legislation.

11 For example, there are a number of state-law
12 provisions around students in temporary housing, but
13 they start when students enter kindergarten.

14 And so, certainly, there's more work we can
15 do to age down some of those rights and protections
16 to younger children.

17 ASSEMBLYMAN HEVESI: Great.

18 Can you follow up with us?

19 SENATOR SQUADRON: Yes, please.

20 ASSEMBLYMAN HEVESI: I mean, great, let's
21 follow up on that one.

22 Okay. Thank you.

23 SENATOR AVELLA: Thank you both.

24 I want to thank everybody who came to testify
25 today, and, of course, on behalf of my colleague who

1 is chairing this Committee, Senator Carlucci.

2 I want to thank my colleagues in government,
3 especially Assemblyman Hevesi and Senator Squadron,
4 for staying for the entire hearing.

5 But we do appreciate all the testimonies that
6 we heard today, and, obviously, we will be taking
7 that into account, not only for budget requests, but
8 also for possible legislation.

9 And I do urge everybody that has testified
10 today to stay in touch with all of us, because these
11 are issues that are very important to the
12 Legislature, to you, to all New Yorkers. And the
13 more that we can do for these families in need, the
14 better.

15 Any closing statements?

16 Senator Squadron.

17 SENATOR SQUADRON: Thank you very much.

18 It was a fantastic hearing, and great to have
19 (unintelligible) conversation with my colleagues at
20 the level that we did.

21 And thank you, both Chairs.

22 SENATOR AVELLA: Thank you both.

23 And the reason I stayed, just for the record,
24 is you put my name on the sign.

25 [Laughter.]

1 SENATOR AVELLA: So I felt like I was trapped
2 from the beginning.

3 It worked.

4 Anyway, thank you, everybody.

5 I appreciate it.

6 (Whereupon, at approximately 2:19 p.m.,
7 the joint public hearing held before the New York
8 State Senate Standing Committee on Social Services
9 and the Senate Standing Committee on Children and
10 Families concluded, and adjourned.)

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