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

FORUM DISCUSSION

A ROUNDTABLE DISCUSSION ON
THE CURRENT AND FUTURE ISSUES AND CONCERNS OF HUMAN
SERVICES ADMINISTRATORS, ADVOCATES AND CLIENTS

Legislative Office Building
181 State Street, Room 711-A
Albany, New York

December 14, 2011
10:00 a.m. to 2:00 p.m.

PRESIDING:

Senator Patrick M. Gallivan
Chairman
Senate Standing Committee on Social Services

Senator Diane J. Savino
Chairman
Senate Standing Committee on Children and Families

ALSO IN ATTENDANCE:

Lisa Tracy
Representative from Senator Hugh T. Farley's Office

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SENATOR GALLIVAN: I'm Senator Pat Gallivan. I chair the Senate Committee on Social Services.

Senator Diane Savino chairs a committee on Children and Families.

And, our committees and the issues that we face are so closely tied together, we are having a series of these forums, or hearings, to gather information.

And, we know that we face fiscal problems in the state. We know the strains on budgets. And what we're really trying to focus on, through the series of these hearings, are some of the other things where we can be helpful, as it relates to legislation, and then use all of the information that we gather to help form our legislative agendas as we move forward into the next year.

So, we do have a schedule of speakers. We appreciate the fact that people took the time to be here today and present us with information.

We will -- I don't know that everybody will use the allotted time, so that, if you're here, and we'll try to go in order.

Does -- I'm sorry I didn't look.

Does everybody have a schedule?

SENATOR SAVINO: They're in the back.

SENATOR GALLIVAN: I think there's -- I think they're in the back.

Brian -- or -- are they -- is there a schedule in the back, on the table?

UNIDENTIFIED SPEAKER: Yes.

SENATOR GALLIVAN: Okay.

That's the order that we will go in; and, of course, we'll call you up individually. But, if we have the opportunity to move things a little along, if people are sitting here doing nothing, then we'll do that.

But, thanks for being here.

And before we get started, let me ask Senator --

First, thanks, Senator Savino, for making the trip up from Staten Island today. And, for traveling across the state as we're doing this.

And, ask her to make some comments.

SENATOR SAVINO: Thank you, Senator Gallivan.

So, I want to thank Senator Gallivan because, two weeks ago, we were in New York City. He traveled down to meet with some of the same human-service providers in the city of New York and the Downstate region.

And as he said, our two committees overlap in so many ways, on so many issues.

And for those of you who are in the room, who are here to testify, we don't need to tell you how difficult it has been in the past couple of budget cycles for you to meet the demand of your agencies, and to meet the demands that the State has placed upon you, and, at the same time, meet the rising demand for human services in our economy right now.

This year, we're kind of in a different position as we go into the budget process.

The work that we did last week, with respect to the new tax bill, has kind of set the parameters for budgeting. The budget's going to kind of write itself now.

And that's a good thing, and it's also a bad thing.

So, it's become even more important that we speak, and we outline what we think is important, as we go forward, so that we don't have the same fight this year that we had last year and the year before around, human services, and Title 20 money, and foster-care money, and child welfare, and, you know, aid to families.

We also want to have the opportunity to look at: What are some of the regulatory burdens that the State places on human services that makes it harder, that gobbles up some of those precious resources that you have, that should be going to direct service as opposed to administrative costs?

So, we're in a unique position.

And I'm very happy to, you know, work with Senator Gallivan on these issues, and to work with all of you, going forward.

So, all of that being said, we're going begin with our first panel presenter -- or, testifier, Harris Overlander, who is the CEO of Trinity Alliance of the Capital Region.

Come on down.

SENATOR GALLIVAN: Welcome.

SENATOR SAVINO: Good morning.

HARRIS OVERLANDER: Thank you for the opportunity to speak before you.

You should have packets that we are presenting, and, everything that I'm about to say is presented in those packets.

So, my name is Harris Overlander. I am the CEO of Trinity Alliance of the Capital Region.

Trinity Alliance has been operating as a

multi-faceted settlement-house model, social-welfare and community-based center within the south end of Albany for the past 100 years.

We serve the entire family, and all ages, with a variety of health, education, and social-welfare programs, and a variety of community-center programs.

Through our provision of cradle-to-grave services, approximately eleven to twelve thousand individuals and families utilize our programs annually.

The Trinity Family and Neighborhood Resource Center was opened in 2005 as a neighborhood initiative funded by the Community Optional Preventive Services funding mechanism.

The COPS funding formula entails a 68 percent share funded through the New York State Office of Children and Family Services, supplemented by a 32 percent share from the local county.

In this case, Albany County.

The model of the FNRC, as a front-end preventive delivery system, has been a national initiative also promoted by the United Way.

The FNRC brings together the individual programs and services of the agency under a

seamless service delivery system, allowing for front-end, immediate assessment of the presenting problem, identification of ancillary needs, designation of appropriate intervention, and rapid provision of crisis-intervention services; followed by, program-specific enrollment, referral to supportive resources, or engagement in preventative services.

These individuals and families coming to access specific services are overburdened and fragile; and, often, the high-end users of health-care services, the mental-health system, or experienced penetration into the juvenile-justice, foster-care, or criminal-justice systems.

Many that we see are able to resolve their issues before they turn to these other services or are mandated by them, as we focus our leveraged resources to meet their needs.

They are funneled through an array of our program offerings and services, acutely diminishing their burden on the broader and far more expensive network of services in our county.

These consumers are encouraged to utilize the programs that reach all members of the family, from infants to seniors.

On any given day, over 150 members -- community members will be engaged in various community center-type programming.

As the resources provided through COPS allow the infusion of resources into the agency, it creates a network of community-based interventions designed to strengthen families, individuals, and the neighborhood.

The FNRC also delivers crisis and intervention services, family education, and health-and-wellness programs.

The FNRC reinforces and strengthens the overall ability of families to cope and progress while it delivers neighborhood-building technical supports and empowers neighborhood volunteers who are building their community.

Such community-empowerment efforts have included the recent petition drive that led to the CDTA, introducing a much-publicized inner-city Number 100 bus line to service the south end Arbor Hill and West Hill neighborhoods after a 20-year struggle.

COPS funding provides $168,000 to Trinity for FNRC operations, supplemented by an additional direct program funding of $52,000 from the

United Way of the Capital Region.

Trinity has also leveraged funds to draw in new direct-service programs, funded at millions of dollars, serving Albany County residents, as a direct result of the comprehensive value-added supports and services offered by the FNRC.

The existence of the FNRC has generated in-kind contributions of approximately $45,000, including items such as, furniture, food supplies, children's holiday gifts, but most significantly, volunteer services, from computer instruction, to children's music lessons, all of which directly benefit the families that we serve.

Last year, our VITA tax service returned $370,000 in earned-income tax credits to low-income patrons. These funds go directly back into strengthening the community.

Trinity Alliance, along with the Albany Housing Authority, recently successfully competed for a $5 million HUD grant to build the Capital South Campus Center, which will house Hudson Valley Community College, Schenectady County Community College, and others, just three-quarters of a mile from here, on Morton Avenue, because we were able to demonstrate

to HUD that we offered the comprehensive community-based services and programs they sought out as a requisite for this grant.

This past week, "The New York Times" ran an article entitled "To Fix Health, Help The Poor," by Elizabeth Bradley and Lauren Taylor.

In part, it says:

"America is one of only three industrialized countries to spend the majority of its health and social-services budget on health care itself. For every dollar we spend on health care, we spend an additional 90 cents on social services.

"In our peer countries, for every dollar spent on health care, an additional two dollars is spent on social services.

"So, not only are we spending less, we are allocating our resources disproportionately on high-end health care."

The article went on to say, quote:

"In a recent national study conducted by the Robert Wood Johnson Foundation, four out of five physicians agreed that unmet social needs led directly to worse health-care outcomes."

If New York State is serious about trying to get a handle on the ever-escalating medical costs,

incarceration rates, the rate of out-of-home foster care, and incarceration, as I said, then we should be looking at the front-end objective of achieving a healthier society by addressing these subpar social conditions.

COPS represents a fundamental policy decision to allow those on the ground to implement the best strategies to create comprehensive innovative pathways out of economic poverty. It represents an unfettered front-end investment in human capital through social-, educational-, neighborhood-, and workforce-development strategies that our neighborhood, almost micro, block-by-block focused.

I urge you to adopt, and keep this funding mechanism as a way of cutting across funding and program silos, that, when implemented and fully funded, are truly allowing us to rebuild decimated inner-city neighborhoods and lives.

Thank you.

SENATOR SAVINO: Any questions?

SENATOR GALLIVAN: I don't.

SENATOR SAVINO: I just have one question.

Last year, was the COPS Program part of that plan to scrap and replace it with the PIP?

HARRIS OVERLANDER: Yes.

SENATOR SAVINO: Okay, so we need to be aware that that's another potential.

We were able to reject that in a lot of -- that was because of the result of advocacy on the parts of some of the people in this room.

And, I think we should be vigilant about that.

I only have one question about the program.

How are your client -- how do people come to you?

Are they self-referred, or are they mandated, or are they -- is -- are they in preventive-service programs?

Or is it all of the above?

HARRIS OVERLANDER: Well, just going back to the funding, this was a $35 million program 3 years ago. It became a $29 million program after Governor Paterson eliminated it from his budget.

Trinity was credited with the statewide advocacy effort that led to a rescission of that decision, and a restoration to 29 million.

And then it became a $9 million Program last year.

SENATOR SAVINO: I see.

HARRIS OVERLANDER: That's number one.

Number two, as to how they come: We just completed our annual customer-satisfaction survey.

The majority of people who come to our service are self-referred through word of mouth.

And, to me, that bespeaks the fact that we're penetrating into these communities; that people recognize that these are valued services, and that people are talking about it.

This has been consistent for the last six years.

I've been there for seven.

We instituted a satisfaction survey six years ago.

SENATOR SAVINO: And do you -- do you keep track of how many families are serviced --

HARRIS OVERLANDER: Yes.

SENATOR SAVINO: -- in different categories?

So, have you seen a huge increase at the same time as it -- a huge decrease in funding?

HARRIS OVERLANDER: What I would say is, there's two things going on at the same time.

And I -- you know, I mean, it would require further analysis; but, on the one hand, there's much

greater desperation and extent of need.

And, for instance: Our food pantry, for the first -- we have the largest food pantry in Albany, in Arbor Hill, in the south end. This, I believe it was October, was the first time in seven years that we ran out of food.

SENATOR SAVINO: Uh-huh.

HARRIS OVERLANDER: But, on the other hand, I see a lot of discouragement. And people have just -- there's such desperation, and people are kind of discouraged.

And, uhm -- so, it's a mixed bag.

I think that people that come in are kind of on their last legs in a lot of cases. They're really desperate, they're looking for any kind of help. They're down to their last dollar. They're worried about, you know, closing, you know, "NiMo" -- or, not the -- or, the utility company, closing off their utilities, and so on.

SENATOR SAVINO: Wow.

Thank you, Harris.

SENATOR GALLIVAN: Let me -- as you're approaching your 100-year anniversary?

HARRIS OVERLANDER: Yes, sir.

SENATOR GALLIVAN: So, you've served many,

many families and people over the years.

I'm curious, with all the people that you've served and, you know, you've talked about your observations -- more individuals, more desperate -- it's amazing the variety of services that you provide, I mean, across many different service areas.

Have you tracked outcomes at all with the people that -- specifically, with the people that you've served over the years?

HARRIS OVERLANDER: Yeah, absolutely.

SENATOR GALLIVAN: You can speak to them?

In any area.

I -- obviously, I'm interested in all areas, but --

HARRIS OVERLANDER: The "LEAP" Program is, the Life Employment and Advancement Program.

It was set up as -- it was funded through the New York State Division of Probation and Correctional Alternatives; now, I believe, merged under DCJS.

It was one of five demonstration projects around the state.

My understanding is, it's the -- it's one of three that are left, that started from that first --

that year of funding. It's been the most successful.

We have an incredible --

And, honestly, I don't have the figures. I can certainly correspond with you.

-- but, success rate, as reflected by the fact that we're able to -- we're actually overperforming, and not able to -- we're topping out on the contract, basically.

We -- our graduates are entering Hudson Valley Community College, Schenectady Community College. These are people on parole, who have gone through every service before -- before, as young people.

As adults, came out of the prison system. They're referred by federal probation, and New York State Parole, and the Albany County Probation Department.

And it's a program that's in high demand because of our success rate.

We offer a jobs' club, parenting, financial literacy, anger management.

These, by the way, are all services leveraged through the FNRC, through COPS, that go together with the LEAP program, that enhanced the LEAP

program.

We offer ReadySetWork, and, Thinking For A Change, which is a nationally-based, evidence-based practice, helping people to turn their thinking, from criminal-thinking to more pro-social-thinking patterns.

SENATOR GALLIVAN: Could you -- I just glanced at what you provided.

And, if it's not already in here, could you provide us with any of the outcomes that you've tracked?

HARRIS OVERLANDER: Yes, absolutely.

SENATOR GALLIVAN: Because, you're in Albany and you're close enough to get it to us.

HARRIS OVERLANDER: I will do that.

SENATOR GALLIVAN: Okay, appreciate it.

HARRIS OVERLANDER: I -- just -- I -- it just occurred to me; we have a -- we have an arrangement with our -- the supplier of our cleaning supplies has a -- his shop has a classroom in the back of his building. And he, basically, takes students from, literally, all over the world, for $1,800 tuition, for an 18-hour course, that teaches them the latest-and-greatest in cleaning techniques.

So he really, basically, fell in love with what we do. And -- at our 99th celebratory gala.

And, he came to me the next day, and said, "I want to offer you that classroom at cost."

So, we took 25 of our graduates -- of our participants in the LEAP program, as an example, and he said, basically: If they graduate, I will get them jobs, I will get them better jobs, because I know all the cleaning outfits in Albany.

And, indeed, 25 of 25 of our referrals -- referees graduated; and, indeed, they all accomplished his goal.

So that's an example of an outcome that we're able to achieve by leveraging the public-private/private-and-business community, to make a difference in these people's lives.

SENATOR GALLIVAN: And when we're talking, that particular program, because it had to do with an -- incarcerated young adults, I would be interested, if you have it, and -- the recidivism rate as it compares to a normal population without.

HARRIS OVERLANDER: I will certainly provide that to you for our jail transition and our LEAP program.

SENATOR GALLIVAN: Okay, thank you.

HARRIS OVERLANDER: Thank you.

SENATOR SAVINO: Thank you.

Next, Maclain Berhaup --

Is Maclain here?

-- the statewide advocacy director for Supportive Housing Network of New York.

Thank you.

MACLAIN BERHAUP: Good morning.

SENATOR SAVINO: Good morning.

MACLAIN BERHAUP: My name is Maclain Berhaup, and I'm the state advocacy director of the Supportive Housing Network of New York.

The network represents over 200 non-for-profit providers and developers who operate over 43,000 supportive-housing units throughout New York State.

Supportive housing; permanent, affordable housing link to on-site services is the proven cost-effective and humane way to provide stable homes to individuals and families who have difficult finding and maintaining housing.

The people we house and serve -- people of mental illness, HIV/AIDS, substance abuse, and other barriers to independence -- are typically frequent

users of expensive emergency services, like shelters, hospitals, prisons, and psychiatric centers.

Because placement into supportive housing has been proven to reduce use of these services, the housing saves taxpayers money, often far more than what was spend building, operating, and providing services in the housing.

This has been proven time and time again by dozens of peer-reviewed academic studies.

I'm here today to discuss the recent budget cuts that the on-site support services and supportive housing have endured over the past two years, and to ask for the Senate's support in restoring the funding to the OTDA New York State Supportive Housing Program.

NYSHP is the mainstay of supportive housing. It pays for critical on-site services that make it possible to house multiply disabled and vulnerable individuals, families and children, in permanent, affordable apartments.

NYSHP funds the housing-based support services for over 16,000 formerly homeless and at-risk single adults, families, and children, and youth throughout New York State.

NYSHP supports three different service-funding streams: services for single adults, families and children, and young adults.

The largest part of this funding is allocated for support services for single adults.

For the past 30 years, every administration has steadily invested State capital dollars to build new supportive-housing units; then provided these necessary funding streams to pay for the essential services and operating costs when they open.

They did this because they understood that an investment in supportive housing saves them money.

Supportive housing has helped us close thousands of inpatient psychiatric beds, and has made a significant measurable dent in the number of disabled individuals living on our streets.

However, in the 2010-11 budget, the State cut services for single adults by 13 percent. And because of the deficit-reduction plan, and various negotiations with the City of New York, supportive-housing residents in the city received a 17.2 percent cut. This led to immediate layoffs of over 100 low-wage caseworkers, many of whom have lifted themselves out of homelessness themselves with these jobs.

It is greatly diminished how much support services these tenants now receive from the remaining caseworkers.

Equally chilling, not a single new building that opened in 2010 received an SRO support-services contract. These buildings, 15 in all, received over $300 million in public and private capital investment, not -- only to lose their small service contract that makes all that investment work.

Non-profits use this funding to meet the needs of their population and neighborhood.

Here are few examples of how non-profits have budgeted their SRO funding before they were told they were losing it:

A beautiful, new, mixed-income supportive-housing residence in Harlem opened last year, housing 64 low-income families from the community, and 50 formerly homeless individuals. This building lost their [unintelligible] security funding.

In Brooklyn, a wonderful new supportive-housing residence for the frail elderly was just opened. For this building not receiving an SRO contract means eliminating their daytime security staff and half of their overnight security.

This year, in Rochester, the Eastman Commons - Dewey Avenue supportive-housing program is slated to open in May of 2012. This project began as a local initiative, supported by a commitment from the Rochester Monroe County Homeless Services Network to fund the operations. New York State Housing and Community Renewal contributed over $11 million in capital funding and tax credits, and the OTDA - HHAP program completed the capital funding with $3 million.

Now, just the lack of $90,000 in NYSHP jeopardizes this 80-unit project, by eliminating services for its chronically homeless residents.

Today, OTDA support services funding is at the same level it was in 2010, at 17 million, which is $6.6 million short of what is actually needed.

The result is, thousands of units operating without this funding, and non-profits struggling to provide safe, secure housing with adequate services to the tenants. Most of these units are occupied by people living with a disability; again, mentally ill, HIV/AIDS, substance abuse, or mobility impairment. Many have more than one disability.

More than a dozen national sites have measured how important supportive housing is for

people with these disabilities.

For example:

Without this critical housing and services, the study shows that individuals with HIV/AIDS would quadruple their use of hospital care, or double their use of nursing-home care;

Individuals with mental illness would double their use of psychiatric centers, double their use of emergency room care, and double their use of inpatient hospital care.

So, if only 2 percent of the currently housed individuals revert to homelessness, the State savings from the cuts are wiped out.

The other piece of NYSHP's supportive services for families and young adults is the only statewide support -- supportive-housing service funding for formerly homeless families and at-risk youth. This funding currently pays for counseling, job placement, and service linkages for families.

It was, historically, a $5 million program that was cut to $2.5 million in late 2010. This erosion of funding for families means that New York State is losing family supportive-housing units, such as, [unintelligible], we have record

family homelessness.

In the recently announced awards, 557 units that had been funded in past rounds were not funded this year.

Non-profits, like, Chances and Changes, and PathStone, in Livingston County, and, Neighbors of Watertown in Jefferson County, have been awarded family supportive-service funding as part of an agreement to take over a struggling HHAP building serving survivers of domestic violence.

These organizations stepped up to the plate, only to be similarly defunded in 2011 due to budgetary cuts passed in April.

Any savings from cutting these program has been completely canceled out by the resulting increase in the use of more costly emergency services by families that have been served by this program.

The annual cost of providing homeless families with shelter is just over $38,000 in New York City, and over $23,000 in Albany; far more than it cost to provide families with the dignity of their own home.

If just 4 percent of those families currently housed by this program became homeless as a result

of the cuts, the increased costs in emergency shelter alone would eliminate any savings achieved by the reduction.

And, you know, just one example that we like to give, from a woman named Rachel, here, who's a single mother with two children, in Albany. And it really is a nice example of the cost savings that go along with the great services that are offered to her.

She arrived at Support Ministries in 2004, with HIV/AIDS. She just spent eight weeks at the Albany Medical Center, where she cost New York State, conservatively, $755 a day.

Meanwhile, Rachel's two daughters were sent to separate foster homes, costing the State over $2,400.

Because of her illness Rachel, wasn't allowed to leave the hospital. She languished at Albany Med for an extra six weeks, costing the State an additional $31,000 -- $31,710.

Rachel's family's public cost for eight weeks, while homeless, was an astonishing $34,000.

However, everything changed when Support Ministries intervened. They offered Rachel

an apartment for her family in Albany. State and federal housing covered her rent, at $600 a month, while the State paid for critical support services through, what used to be the SHFYA program, that's now NYSHP, at a cost of $3,300.

Support Ministries helped Rachel get food stamps and public assistance, which she used for two months, costing the State just over $400, before the organization helped her find full-time employment.

Within just a year of coming to Support Ministries, Rachel became 100 percent self-reliant. Her health stabilized and her children entered school.

Today, six years later: Rachel is still working. Her oldest daughter has graduated from high school, and the other remains on track to do so. Rachel hasn't been hospitalized for HIV since.

So, Rachel's family public costs, for eight weeks, while homeless, was $34,000.

Her public cost for one year in supportive housing was just under $11,000.

Her public costs after one year in supportive housing is zero.

I feel like I could go on and on about the

cost savings, but, you know, I think another -- another important point to mention, is that, you know, this jeop- -- the cuts jeopardize over $500 million in state and local capital investment that have been made in the capital buildings.

For example: In Rochester, the Eastman Commons - Dewey Avenue program, you know, that jeopardizes, because of $90,000, over $11 million in capital.

So, you know, I think it's the right thing to do, but it's also the right thing to do, because it saves the state money.

And, you know, we are here to advocate today, that, you know, we would like to see the program back to the level that it needs to be at, which is at 28 million.

Currently, it's just a little over 20 million; so, $8 million short.

SENATOR SAVINO: Any questions?

I just have one question, Maclain.

I know that, uhm -- it's very difficult to site and operate supportive housing in a lot of communities, particularly for people who are mentally ill. You know, have you to go through the whole zoning issue and approval process, locally.

That's hard enough.

But, we -- we have a sense of how many people could be serviced if we could create enough of a supportive housing?

Do you have any idea how many?

MACLAIN BERHAUP: How many units?

SENATOR SAVINO: How many individuals, or families, who are currently, either, living in a shelter because there is no supportive housing in their area?

And I know that --

MACLAIN BERHAUP: Right.

SENATOR SAVINO: -- there's this struggle to how to provide them?

Do we have a sense of how many people could be served?

MACLAIN BERHAUP: We don't.

I mean, we know that 60,000 people, on any given night, in state are homeless.

SENATOR SAVINO: But they're economically homeless, as opposed to --

MACLAIN BERHAUP: Right, right.

SENATOR SAVINO: -- as opposed to people homeless --

MACLAIN BERHAUP: With -- right.

SENATOR SAVINO: -- with particular social-service needs.

MACLAIN BERHAUP: Right.

Sure, sure.

SENATOR SAVINO: Right.

MACLAIN BERHAUP: Sure.

As part of the Medicaid Redesign Team efforts that have been going on over the last several months, we've been involved with the Affordable Housing Workgroup, on that team. And one of our recommendations, was that the State do a statewide need, to determine how many units were needed, because we don't know that.

You know, we do know that there have been, since the early '90s, over 43,000 units built of supportive housing throughout the state, but we don't know, you know, how many more units are needed.

SENATOR SAVINO: So that $28 million that's been reduced to 20 million, reflects the people who are currently being served?

MACLAIN BERHAUP: That's currently, yes.

SENATOR SAVINO: Not future capacity?

MACLAIN BERHAUP: Currently being served. Right.

Yeah.

SENATOR SAVINO: Thank you.

MACLAIN BERHAUP: Sure.

Thanks.

SENATOR SAVINO: Next is Kate Breslin, president & CEO of the Schuyler Center for Analysis and Advocacy.

Good morning.

KATE BRESLIN: Hi. Thank you for having me.

Good morning.

Our organization, the Schuyler Center for Analysis and Advocacy, was founded in 1872. And, we are a statewide non-profit policy analysis and advocacy organization, working to shape policies, to improve health, welfare, and human services for all New Yorkers, especially those who are poor or vulnerable.

So, I'm in a little bit of a different situation than some of my colleagues here today. We're not -- we do not provide direct services. We, uhm -- we work very closely with our friends out in the field throughout the state who do provide direct services, because, what they're experiencing helps to inform what we're thinking about, and what we come to you with.

And I want to thank you for having us here today, and for having this dialogue.

As you're aware, the demand for services has really grown in the last several years at the same time that programs have been cut.

So, the kinds of things that we're hearing from the, kind of, multi-issue, multi -- funded from a whole different bunch of different places, community-based organizations, is -- are things, like: They're getting killed with a million paper cuts.

And, that -- that -- especially those that are funded by several different agencies, there's not always a consistent, or an overarching, approach to thinking about what's really happening to those agencies.

And, then, some of those agencies are telling us that their staff, that they've had to lay off, have now become their clients.

So, you know, that, for me, frames some of the way we're -- some of the way we think about this. And what -- it very much frames the way we come to you, to say: Please think about these things, kind of, from a systemic perspective.

From a, what are the many different things

that a family or a child needs to support them in a community?

So, that's -- that's kind of the framing for where we come from.

We are very much focused on issues relating to poverty. And, we know that it's taking its toll right now, while parents are struggling, thinking about whether they're going be able to pay for food or rent or -- or heat.

Their children are at high risk for cognitive delays, behavioral-developmental delays, because of the stress of the families, and because of the needs that aren't being met.

So, we know that children who grow up in poverty are more likely to have a lower educational attainment, and a harder time finding a job in the future.

So, we really feel like that's not good for us, and it's -- it's not good for us as communities, and it's not good for us as a state.

And you'll see in my testimony -- I won't read the testimony -- there's a lot of budget stuff in there. And I -- I tried to take to heart your request that we not focus too much on budgetary issues, but, we know that there is a -- there's

growing poverty in our state, and that the statewide numbers really mask the severe, severe poverty in our cities. New York City; and even worse, in our Upstate cities.

So, that's kind of the frame that I come from.

And, then, I also want to echo Harris Overlander, who spoke before me, about, kind of our -- the understanding that all these unmet social needs contribute to the higher health-care costs, and other costs, down the line.

So, as I said, I -- I -- I've tried to focus on -- on some non-budgetary issues; although, I think everything -- everything that we come to the Legislature for usually has some budget impact.

We strongly believe that we need to take a systemic approach that crosses committees, agencies, and areas of expertise. And it really drills down on, what children, families, and entire communities need.

And, we need to put our state back on track, and provide a path out of poverty for the working poor and their children.

So, a couple of things that the non-partisan Brookings Institution recommends for combating

poverty are initiatives that are underway here in New York.

These are also initiatives that move forward in improving the economy, either, because they build a stronger workforce, or because they help strengthen adults' abilities to go to school or work.

And the two that I'll talk about are: high-quality early childhood education; and, maternal and infant and early childhood home-visiting.

And, we know that high-quality subsidized child-care benefits both children and working parents.

And, study after study by developmental specialists, and there's research coming out every day, shows that early childhood education is one of the most effective investments we can make in children, and, in their economic future.

And research shows that high-quality programs benefit all children; but, especially, are important for children in low-income families who experience higher rates of difficulty in school.

We also know that, if we start thinking about

third-grade reading in first grade, it's too late. We need to invest very early in kids.

So, we urge you to look at finding ways to increase the number of licensed and regulated child-care slots in the state; so, increase the availability of licensed and regulated care, and ultimately improve quality.

And we have, kind of -- we work with a coalition called "Winning Beginning NY," around ways to improve quality.

And, one of the first steps is licensed and regulated care.

And another is, explore -- explore how to set consistent and statewide standards for child-care subsidies.

So, New York is one of the few places where there's a lot of county-level discretion about how subsidies are provided.

The other thing that you'll see in our agenda, is that we -- we strongly believe New York needs to invest more resources in early childhood settings, just to get -- just to get more slots.

As we -- I mean, there are reports coming out today, I think it was in the, uhm -- on the front page of "The New York Times," about the loss of

slots for subsidized child care.

And, then, we also wanted to talk about maternal-infant and early childhood home-visiting programs. They promote sound prenatal care, healthy development of kids.

And, also, the programs that we are supportive of, also show -- they show great outcomes that strengthen families.

That, some of the programs that are underway in New York State: Improve adults' work effort. They improve children's educational attainment. They improve their health and development.

And we strongly believe that New York should invest in developing a strong and well-organized system of home visiting. Right now, we have a patchwork of programs that kind of get funded here and there.

And, a couple of the things that we should do, are: Include home-visiting services for Medicaid-eligible individuals.

Which is a recommendation of the Medicaid Redesign Team, that they approved yesterday; and, so, that will now go to the Governor.

So, we -- that's one that, although I think it will have a budget impact, we think it's not -- we are hoping that it won't be a huge lift for legislators, because our hope was that, since it's moved through the Medicaid Redesign Team process, it will happen. Or, it will get into the budget, we hope.

And, uhm -- and, also, maintain the funding for the Healthy Families New York program, which is another evidence-based home-visiting program, had been proposed for a cut last year, got restored. And, we think that funding should be maintained.

And maintaining it also allows us to bring down federal funds.

And, then, I wanted to comment on a couple of things that I think you will be thinking about: reauthorization of the Child Welfare Financing Law.

One of our big priorities, and I think there's strong consensus about this, is, uhm, maintaining the open-ended preventive services.

So, those are the types of things that focus on families and children before they enter the system; and, so, keeping people from entering the system.

And, we strongly support maintaining those

funds as open-ended to counties, so that, you know, if they're willing to invest in them, the State will -- will invest the money too.

And, then, I also wanted to alert you to an issue around foster care.

And, as you know, the 23,000 kids in foster care are some of the most vulnerable children in our society.

And data show that they have poor health, poor education outcomes, high rates of mental-health problems, high rates of chronic conditions, and high rates of developmental delays.

And, that, we don't do a great job making sure that they get the health care that they need.

And, so, a law that you passed last year will move all of those kids to Medicaid-managed care in the next few years. And, those kids could really benefit from well-managed care, but we really believe it has to be very thoughtfully done, and really carefully done, because it's such a vulnerable population.

So, I'm not -- I'm not suggesting that there's necessarily legislation out there, but we urge you, you know, having passed the law that

moves them to Medicaid-managed care, that you're attentive to making sure that that really -- that it works for these vulnerable kids.

And then, finally, we know that many working families, and formerly working families, have lost health-care coverage as they've lost jobs or as their employers have scaled back on coverage.

And I understand that this is not a Health Committee meeting, but we also know that it's really important that children and families have access to health-care coverage.

And, frankly, we have some good news: Poverty has gone -- poverty has gone up, the number of uninsured have gone up, but we've -- New York has managed to not see an increase in the number of uninsured kids.

And that's because we've been good about investing in Medicaid and Child Health Plus, and making sure that kids, at least, have coverage.

So, it's important, though, that families that aren't -- might not be eligible for that coverage, and parents that might not be eligible for that coverage, we know that kids are more likely to get care if their parents are covered too.

So, we have the opportunity this year to

implement a health-insurance exchange, through the federal law.

And I understand that, last year, we were really close. And, we know that this is an issue that affects kids and families, particularly those who are just over the income levels for Medicaid and Child Health Plus.

So, we urge you to pass a health-insurance exchange so that middle-income families are able to access health-insurance coverage.

And, that's all.

There's a lot more in my testimony.

SENATOR GALLIVAN: I'm not sure I'm able to frame the question the right way, but, when we were -- we're talking about child care.

And, in that particular area, you encouraged us to -- encouraged the State to set certain standards -- eligibility rates, payment standards -- and the State to get involved so it's consistent --

KATE BRESLIN: Yeah.

SENATOR GALLIVAN: -- across the state, all 62 counties.

And, then, under -- where, child welfare, the open-ended prevention services, there's so much of

a -- what I have been getting, through this Committee, and the people coming forward, is, people at the local level wanting to make the local decisions because they say they know what's best for their community.

Are those two things at odds with each?

On one hand, setting state standards, as you're encouraging us; and, then, in an area that's not the direct same, but it's closely related, to be hands-off?

KATE BRESLIN: Fair enough.

I think that the -- that I would say that the -- the difference is, that, uhm -- you know, the word that's coming to mind is "arbitrary" -- and I don't know that that -- that might be too strong -- that, when it comes to setting child-care policy, that -- that there should be clear and consistent standards, but maybe not necessarily the same.

So, that, uhm --

SENATOR GALLIVAN: Can you give me an example?

KATE BRESLIN: Yeah, and I have to be honest, the child care -- the intricacies of child-care financing is not my area of expertise.

But, that a person who lives on the

boundary of one county, let's say --

You know, that's kind of the example I think of.

-- might be eligible for child care at a certain income level. But if they were to walk across the street, into another county, they -- they would be eligible if they -- even if they -- or would not be eligible, even if they made a $1,000 more.

So, it's -- so it's arb- -- it's somewhat arbitrary in how people are eligible.

SENATOR GALLIVAN: So, maybe, would -- would this be a way for me to understand it, and look at it?

What you're asking is, to -- the standards would set, essentially, minimum standards.

Counties, then, could go beyond that if they wanted to provide additional services beyond the same standards that everybody has to meet to be eligible for?

KATE BRESLIN: Yeah.

And I think one of the big differences, and it's interesting that you -- the example you chose, one of the big differences is, how those programs are funded so open-ended.

Open-ended funding is for child preventive -- for preventive services is different than how child care's funded, which is, the counties are told they get a certain amount of money.

And, so, even if they wanted to fund more, they don't get the help.

SENATOR GALLIVAN: Right. Understood.

Thank you.

SENATOR SAVINO: Thank you.

On Monday, the Committee on Children and Families had a hearing on child care; the challenges in child care down in New York City.

And this was an issue that came up over and over from many of the child-care providers, particularly outside of the city of New York.

The City of New York is more concerned about the implementation of this new Early Learn model, which merges the funding of Head Start.

Yeah, I see your face.

Exactly. No problem.

But their -- we heard this consistently during the course of the day, that there isn't a -- inconsistency in how counties handle child-care eligibility, and how much money parents can be required to contribute.

So, you're right: If you live in, this town, you may be eligible for full subsidy. And if you live in, that town, you have to contribute $200 a week.

So, there doesn't seem to be any sense.

So, the easiest way, I think, to explain it would be, if we were to develop some sort of a prevailing-wage mechanism.

You're taking into consideration area standards, and what the -- you know, the cost of living is in a particular part of the state compared to another.

But, it is something that we will work on.

But I want to take you to something that you mentioned about the Medicaid managed care for children in foster care.

You might be the only person who doesn't think it's a bad thing.

And, when I was a case -- when I started as a caseworker 20 years ago, when kids would come into foster care, even if it was just temporary, we'd immediately, you know, issue them a Medicaid card, which, most of time, was useless. It didn't work anywhere.

And because children didn't have a medical

home a lot of time, we would have to take them to emergency rooms, and try and, you know, get them cleared, if we were going to place them.

And, every time you moved a kid, you had to get another physical.

And, so, you were constantly trying to find services.

One of the good things, I think, that's come about in the past 10 years in child welfare, especially in the city, is, the agencies have developed their own comprehensive medical services for these children.

And it's critically important so it follows them everywhere they go.

They've registered a lot of concern about the idea of moving to managed care, because it's going to disrupt the services that they put in place that seem to work really well. You know, we now have a medical home for so many of these kids.

So, I'm a little concerned about moving away from what finally works for children. And, so much is unknown about this managed-care model for them.

KATE BRESLIN: And I -- I share that concern.

And I think -- you know, I -- kind of in the

health-advocacy world, there are folks who are kicking and screaming, and saying "no, no, no" to managed care.

And I happen to be kind of in the group that feels, like, that train has kind of left the station.

So, you know, there's now a law that says we're going to move those kids to managed -- not managed care. Not -- now, it doesn't mean you can't change it, but, that the way -- the way things are moving, is to move toward managed care.

So, frankly, our decision has been to say: Okay, let's figure out how to make it work better, and let's figure out how to use it as an opportunity to shine the light on what does work.

And, so, for example: I know that a lot of the agencies have developed their own internal capacity.

We have no records on the number of visits that any of those kids have had.

SENATOR SAVINO: Well, wouldn't that be easy to track?

I mean, children who are placed in foster care are required to have a certain amount of medical visits, you know, that the State

requires, that the federal government requires.

So, those records should be readily available.

You know, you're -- they have to have their annual physical, they have to have their --

KATE BRESLIN: Right. They should --

SENATOR SAVINO: -- Vaccinations updated.

I mean, there is a whole host of requirements that the agencies are -- have to provide for these kids.

KATE BRESLIN: They should be.

SENATOR SAVINO: And you're saying that you can't obtain that information?

KATE BRESLIN: Yes.

SENATOR SAVINO: Are they -- is there a reason?

Are they saying -- are they using confidentiality rules, or, they don't want to release the data?

KATE BRESLIN: I think what -- one of the challenges, and this kind come backs to where we started, which is, some of the toughest issues are the ones that cross agencies, and that -- you know, that kind of try and get at what are -- what's the issue for this kid? Rather than, how does this

agency or that agency deal with it?

And, so, for foster kids, um -- for the health-care of foster kids, they're intersecting with the policies of a lot of different State agencies.

So, they're in the care of the Office of Children and Family Services. The Department of Health is responsible for Medicaid. The Office of Mental Health is responsible for mental-health-care facilities.

And -- and, frankly, I think that our challenge is, to -- to figure out how to make sure that the data is actually following the kid, so that we do get the right -- that -- the right data.

I mean, and I don't -- I'm -- this is not meant to criticize any particular agencies. It's more to say, we need to really develop an approach.

And we have the opportunity, with electronic health records, to really do that in a -- in a good way, in a way that we're -- it's, really, just not happening.

SENATOR SAVINO: Maybe.

But, again, I would be -- I'm a little concerned about moving to this model without, you know, really exploring it.

On the maternal-infant and early childhood home-visiting, I would -- is there -- do we have any evidence-based data to show that, with medically fragile children, or families who are, you know, at high risk of neglect, are we able to intervene and prevent placement?

Or, do we have information about that?

KATE BRESLIN: We do.

And -- so, in particular, two of the programs for which there's pretty strong evidence in New York State, are:

The Healthy Families New York program, which operates through the Office of Child and Family Services, and they've done an evaluation.

And I'm happy to share that with you.

And, it has some pretty clear outcomes, including, around things related to child welfare;

And, the Nurse-Family Partnership, which is funded through -- partially funded through the Department of Health, and also has some pretty clear outcomes.

One -- we're -- one of the challenges is, all the different programs have different outcome measures, so, they each measure different things.

But they do -- the one -- these two, in

particular -- and there are others out there as well -- but these are the two biggies in New York, that have pretty clear outcomes' measures.

SENATOR SAVINO: And I would think it's important.

And you're right; the amount of money that we spend on preventive services is directly related to the savings we'll have on the protective side, especially in the child-welfare arena.

I want to thank you, Kate, for your testimony --

KATE BRESLIN: Thanks.

SENATOR SAVINO: -- and some of the suggestions.

We will definitely be looking at them as we go forward.

Thank you.

KATE BRESLIN: Thank you.

SENATOR SAVINO: Next, Shelly Hertz [sic], the executive director for policy for the Coalition for the Homeless.

SHELLY NORTZ: Hello.

Thank you for inviting me to testify.

My name is Shelly Nortz.

It's wrong on the --

SENATOR SAVINO: Oh, they spelled it wrong.

SHELLY NORTZ: -- on the page.

SENATOR SAVINO: Sorry.

SHELLY NORTZ: That's okay.

And I represent, for the last 25 years, the Coalition for the Homeless, which is the original Coalition for the Homeless, based in Manhattan.

We serve 3,500 homeless people a day through a dozen programs. And, we also serve as the court-appointed monitor of the Municipal Shelter System in the city.

We operate housing. We do not operate shelters because we're the monitor of the system.

We feed a thousand people a night on the streets of Manhattan and the Bronx.

We provide eviction-prevention services.

We have a walk-in crisis service that, in the last several years, has been substantially funded with OTDA funding, but, that has pretty much been eliminated with the loss of the Emergency Homeless Needs Program that was funded with TANF money, and also with General Fund money.

I brought with me our most recent briefing paper on New York City policy with respect to housing for homeless families with children, and

single adults, and the loss of the Advantage Program, and kind of the background on that, that has led us to the greatest record level of homelessness ever in New York City: 41,000 men, women, and children in shelter every night.

Another 6,000 or so are in shelter throughout the rest of the state.

I've just received data from OTDA, and I'm in the process of analyzing that.

You may have noticed a report that came out yesterday, out of a national group, that says there are 142,000 homeless children in New York State in 2010.

That number, undoubtedly, includes families with children who are living in doubled-up housing situations.

So, it goes beyond the shelter data that we customarily refer to.

But, nevertheless, those numbers are now being tracked by the education system, under federal law, so we have a much better grasp of the degree to which families are at risk of entering the shelter system as a result of their being homeless and doubled-up, and kind of, potentially, in the shelter system.

Our organization has lost about a million dollars in the last few years, on an annual basis, in State aid, principally for the Emergency Homeless Needs Program that was funded through a combination of TANF and General Fund money.

At its greatest appropriation level, there was a $2 million TANF appropriation for the program. It was never annualized at that program level. One year, the second million was extended into a second year. So, it was really operating at a million dollars a year.

But, that program pays for the meals that we serve on the streets of New York City. It pays for eviction-prevention and crisis-intervention services for those 50 to 75 individuals that walk into our office every weekday, looking for help, either, overcoming a denial of shelter; or looking to prevent an eviction; or looking for things, like, financial assistance, to help them obtain a partner -- domestic-partnership documentation, or a marriage license, or work boots.

So, the loss of that funding is really -- it's, roughly, 10 percent of our budget. And I

can't impress upon you how important it is to have a safety net to the safety net in New York City, given the breadth of all of the other budget cuts.

Senator Savino, you mentioned, specifically, the question of regulatory burdens, and things that could be done to make things better for our field.

And, we've been asking, for several years now, for the repeal of a regulation at OTDA which limits temporary housing assistance, and creates a set of obstacles to accessing and retaining temporary housing assistance from local districts.

It actually commands social-service districts to deny shelter, or cease providing shelter, to individuals and families who fail to complete a long list of administrative requirements.

In October, that caused 300 households outside of New York City to lose their benefits.

We don't have that volume quite yet in city.

And, in some communities, that means the person has no shelter, and they're sleeping outside.

In some communities that may have a city mission that doesn't receive reimbursement for social services -- from social-services districts, they may be sleeping on a mat on the floor at the

mission.

But, in many cases, the non-profit shelters that are helping these individuals throughout Upstate New York continue to shelter the person; but, now, they're having to privately raise money.

So, all it does is cost shift to the local shelters and services providers. It doesn't really address the problem of homelessness; it doesn't address the problem for the person.

And, very often, every single one of the cases that's come through my office, where there's been a termination in New York City, the person has had a disability. The disability has been documented in the case record of the department.

And, we win the Fair Hearing because you're not supposed to terminate temporary housing assistance for a person with a disability whose disability caused their noncompliance.

And, in every case, we were able to show that.

So, I think repeal of this regulation would go a long way to some regulatory relief for the non-profit shelters outside the city, and to helping disabled homeless people in the city.

Another regulatory issue that is also

legislated, but, for some reason, the Office of Temporary and Disability Assistance, and its contractors, haven't been included, is the -- the issue of employing licensed social workers by human-service agencies, which now requires an application to the Education Department for a waiver of the corporate-practice restrictions in order to allow us to employ social workers.

Yes, it's -- it is not permissible, under current law, after social work was licensed as a profession, for my organization to employ a social worker -- a licensed social worker without the permission of the Education Department.

And the waiver procedure that they've established exceeds the statutory requirements in such a way, that, I either have to ask my CEO to sign a paper, that commits to not employing other professions that are also regulated by State Ed, or to lie; because, if we apply for a waiver from State Ed, to be allowed to employ social workers, the form asks us to state that we don't employ any other professionals.

The Health Department regulates our summer camp for homeless children. And they tell us to have a health director who can be a nurse or a

doctor.

We employ a nurse.

SENATOR SAVINO: I --

SHELLY NORTZ: I agree.

SENATOR SAVINO: I'm confused.

What's the -- why would State Ed -- why would they require you to have a waiver, though, to hire a social worker to work in a social-service program?

SHELLY NORTZ: Because it's a profession. And all professions in New York are not allowed to be employed by a not-for-profit or a for-profit business without this waiver.

And that's a statutory requirement that has then gone even further.

And there -- you may remember -- there was a bill that you passed this year, that extends the deadline for applying for the waiver, until February, because there was a lot of push-back about it from our field, among many others.

But, one of the things I learned in studying the issue -- and this is a Higher Education Committee issue. I understand it's not your Committee's issue, but it is, to the extent that it also affects OCFS and OTDA contractors and programs.

The agencies that have been involved in this, from the State perspective, in a big way, have been the agencies that operate themselves, or have contractors that provide licensed services, to people with mental illness and developmental disabilities and in health-care settings.

And, those agencies have received a statutory waiver so that they don't have to comply with the corporate-practice restrictions on employing social workers until July of 2013.

But, OTDA isn't included in that list.

So, that's an issue for those of us that employ social workers, for obvious reasons.

So, it's a tension between, wanting to have a licensed profession, but a corporate-practice restriction -- or, yes, a corporate-practice restriction that is relatively arcane, in my opinion. Lots of not-for-profits employ lots of professionals, but this is all kicking in because of social work.

So, I can explain it to you in more full detail. I don't want to use up all of my time talking about social work, but, it's a problem, and it can be solved through a combination of statutory and regulatory changes that would --

SENATOR GALLIVAN: Can I just ask one question about that?

SHELLY NORTZ: Yes, sir.

SENATOR GALLIVAN: Is that something newly in place, or that's been in place for a long time?

SHELLY NORTZ: Well, the scope of practice for social workers has been in place since 2002, I believe. Licensure for social workers.

The waiver program was initially adopted in 2010, through a chapter, and a chapter amendment. It had a deadline that hit in 2011.

We pushed the deadline back, statutorily, with a very simple bill, because of the fact that it was -- it wasn't end even well advertised to the field; that, social workers were notified by social-work schools, but employers were not.

And the vast majority of not-for-profits weren't notified about this.

SENATOR GALLIVAN: But the root goes back to 2002?

SHELLY NORTZ: The social work --

SENATOR SAVINO: Yes.

KATE BRESLIN: As licensure, goes back to 2002.

And all -- and the corporate-practice

restriction on employing professionals -- doctors, nurses, CPAs, architects; the whole nine yards -- goes back to the origins in the early 1900s, from what I understand, with respect to physicians.

But, as each profession becomes regulated as a profession by the Education Department, they fall under that corporate-practice restriction.

And, it's just arcane, in my opinion. It's not a way to operate in the modern era, when we have fairly sophisticated business models, both in the non-profit and for-profit sectors.

One of the documents that I shared with you speaks to solutions.

And I just want to let you know that everything in "blue" on these pages is actually a hyperlink to the actual document.

So, if you go to our website at CoalitionForTheHomeless.org, you can read about solutions to address the broad issue of homelessness.

And, with record homelessness, these solutions are things that should be considered as a part of policy by the Administration and by the Legislature.

Certainly, fundamentally, affordable housing assistance reduces family homelessness.

The research is very clear on that. And it's one of the reasons that we are so troubled by the Bloomberg Administration's policy now of five years, that, not only denies referral of homeless people to public housing in Section 8, it's the only county -- or, the only place in the state that actually does not affirmatively refer homeless people to public housing and Section 8, as a matter of policy.

But, also, the New York City Public Housing Authority no longer prioritizes households that are homeless for admission to their waiting list.

And, again, that's really, kind of, completely counterintuitive to what actually works to solve homelessness. And, it's refuted by the research, which is linked to in this document.

The next major policy recommendation, is that permanent supportive housing for people living with mental illness and other special needs solves homelessness for them.

We know that from the New York/New York I, II and III Agreements.

We are very pleased, as Maclain mentioned,

that there is consideration of a New York/New York IV Agreement; as well as the notion of the State partnering with other jurisdictions outside New York City that may want to build permanent supportive housing for people with mental illness and developmental disabilities and other types of disabilities.

It actually saves money, because the people who are very expensive users of Medicaid reduce their use of Medicaid, in particular.

The Housing First approach reduces street homelessness.

Very clear, that if you help a very seriously chronically homeless person living on the street, first, and foremost, by helping them into an apartment, to which you deliver services, it really interrupts that cycle.

And -- and people who are then brought into that kind of environment tend to have -- begin the process of stabilizing psychiatrically, and stabilizing with their addictions.

Even wet supportive housing -- housing where people with active addictions are admitted but not allowed to use substances on site -- actually results in people finding recovery and reducing

their use of substances; and, therefore, their use of things like emergency room, et cetera.

And, then, permanent affordable housing is something that we're just lacking.

And, we just recommend doing greater volume of it, targeted to lower-income people than has been the policy, both in the city and statewide. We need to do more of it, we need to do better with it, at a time of record homelessness.

Senator Gallivan, you asked about success rates of programs earlier, with someone else.

And I'll just mention: That our programs to prevent eviction, highly successful. 95 percent of the people that we do eviction-prevention casework with, end up not coming back into the shelter system, and not coming back in with an emergency housing need, coming to our organization.

Very important.

But, we've had a 40 percent cutback in federal emergency food-and-shelter money that helps to pay for that.

We've had an 85 percent cutback in the TANF emergency homeless needs that helps to pay for that.

So, we're preventing many fewer evictions, and that directly contributes to the trend lines on

the charts that you're seeing there.

Our community -- our Client Advocacy Program provides case management and legal services, to help disabled homeless people obtain social security benefits, and housing placements suitable to their needs.

That program obtains those benefits much quicker than the government programs that have customarily helped people with social security.

We have long recommended that it be replicated. It was originally first created in a funding stream that the State Legislature supported. It went out as an RFP.

It should be something that's offered statewide, to help disabled homeless people obtain the benefits that help them to get into housing and leave shelter.

And, Senator Gallivan, you also asked the question about the number -- the need for supportive housing, of Maclain.

And I'll just say, that the last of the New York/New York agreements was 9,000 units. It was about $1.2 billion dollars spread out over 10 years. It probably should have been spread out more over 5 years.

But I would say, you could easily do that volume again, for New York City alone, and probably several thousand additional units for the rest of the state, and still have unmet need at the end of the day.

SENATOR GALLIVAN: Thank you.

SENATOR SAVINO: Thank you.

Wow.

I have a couple of questions, Shelly.

I -- I'm stunned by the increase in the homeless population in New York City. And, I've been around long enough now to have seen the system kind of completely come full circle.

20 years ago, you had -- you would go to the local Public Assistance Office at night, and that was, you know, the emergency assistance unit for families seeking shelter. And then they narrowed it, and everybody had to go to the Bronx.

You know, and really the goal was, if you make it hard enough, people just won't come back.

And I think some of that is still happening now.

On the -- on the number of families who are denied on -- you know, when they first apply, what I'm curious about is -- because I've heard the same

statistics. You guys win every Fair Hearing. You know, DHS has never sustained a Fair Hearing decision on their behalf.

Never.

That -- I don't think they can even produce evidence that one decision they made on the first time out, they were actually able to sustain.

So, that shows that they're really just trying to prevent people from accessing.

But, on average, how many nights does a family then get displaced without being serviced?

I'm trying to figure out, like, is it -- if it's two -- on average, two or three nights before, you know, you're able to get that Fair Hearing, and have a decision in your favor?

Or --

SHELLY NORTZ: I think the procedure has changed since you --

SENATOR SAVINO: How do they do it now?

SHELLY NORTZ: -- so it -- I think some of the litigation put an end to that "sleeping on the floor," or being put out the door and not allowed to reapply for days on end.

There was a period, and we actually worked with a local church, to help accommodate people when

that was happening.

But, now, the procedure is, you may be denied on the spot, or you may be denied after a 10-day conditional placement --

SENATOR SAVINO: 10 days.

SHELLY NORTZ: -- but, you may also reapply.

SENATOR SAVINO: Uh-huh?

SHELLY NORTZ: And, so, the Fair Hearing process doesn't necessarily result in a family having to go stay on the subway in the city.

Outside the city, most definitely, people lose access to shelter in some communities.

I had a call about a young man, yesterday, in Schenectady County. There's no shelter bed available in that -- in county.

He's on parole. He's not allowed to leave county. He's on the streets, kicked out of a drug treatment program because his unemployment makes him ineligible for Medicaid, so there's no money to pay the drug-treatment program.

Terrible bind.

Last thing I knew, he was on the street.

SENATOR SAVINO: Uh-huh.

SHELLY NORTZ: And, he was sanctioned by the social-service district, so he's not allowed to --

he's not allowed to have a hotel/motel placement from them.

So, this happens.

In the city, not so much. And, certainly, less so with families.

I have had reports, anecdotally, over the last couple of years, very disturbing, of families actually spending the night on the subway after they got turned away.

And usually what's happened there, is they haven't gotten in touch with us, or with Legal Aid, soon enough to be able to have us do the advocacy to get them a place.

But City policy is, if you come in to apply for shelter, you get placement if you're in before midnight.

SENATOR SAVINO: Uh-huh.

One of the other issues that I've been concerned about is the rise of homelessness among single males. That's been a chronic problem. And a lot of them are, also, mentally ill.

You know, in my district in Bay Ridge, we had a real problem with a group of men living underneath this big apartment complex, the Bay Ridge Towers.

As you know, it's very dangerous. The

Buckeye Pipeline runs right through there. There's a train yard.

It was always a problem to kind of move them out and get them into shelter; but that's an been historic.

And what I've always been curious, is: What happened to the old SROs, or the rooming houses?

You know, has gentrification of a lot of the parts of New York City affected that?

Because, there was a time where you had low-income housing for single men who didn't necessarily need an expensive shelter, or what they couldn't afford is a studio apartment.

Has there been any discussion about going back to that type of housing for people in this position?

SHELLY NORTZ: Well, certainly, gentrification was rampant in the 1980s.

We were actually party to litigation that sought a moratorium on the conversion of SROs to things like, parking lots, and condominiums, that failed at the court of, appeals if I recall correctly.

But, in any case, there was a great effort, I think, really, heavily pointing to the Koch period,

and, subsequently, through the various mayors, to -- both, through affordable-housing development plans, and through the Supportive Housing New York/New York I, II, and III Agreements.

A lot of that money went into restoring and preserving the old SROs that remained in the stock in city, and turning them into supportive SROs.

But -- and that's why I say, we could easily double what we did with New York/New York III, and still have unmet need at the end of the day.

The truth is, that a lot of those folks that you're talking about are, both, seriously mentally ill and, sometimes, chemically dependent.

It's why we say, here, that a Housing First approach, which can be done, either, on a single-site basis in an SRO; or, as Sam Sambaras [ph.] does, on a scattered-site basis, move the person directly off the streets when they're in that condition, and then deliver, what's called an "Act Team" in the Mental Health's budget, where, a team of psychiatrists, social workers, maybe psychiatric nurses, makes sure that the person gets access to psychiatric service and crisis intervention. It's a rent subsidy with a service wraparound.

I think the stock of SROs is pretty much consumed, with the exception of a few of those illegal hotels, which I think, eventually, may end up getting converted as well, as supportive housing goes. But a lot of the supportive-housing that's being built now is being built as new construction on vacant lots or City-owned lots. Or even in closed school buildings.

SENATOR SAVINO: And on the subject of rent subsidy, the elimination of the Advantage Program, have you guys been able to determine how many families are at risk for displacement?

SHELLY NORTZ: Well, the -- so here's what happens with Advantage: The City paid November Advantage rents again. There is not a lifting yet of the order to pay rents, even though the appellate division sided with the City in the lawsuit, and said that it's a benefit program, not a contract.

So, we eventually expect that the current recipients of Advantage are going to end up losing Advantage assistance.

There are no new families obtaining Advantage.

SENATOR SAVINO: No.

SHELLY NORTZ: And I think, something like, 49 percent of the families entering the shelter system now, have been previously homeless, which is the highest rate we've ever seen.

And it's because Advantage is structurally flawed. It's a two-year, time-limited rental-assistance program that doesn't provide a glide path at all to public housing or Section 8.

So, now, the question is, every month, there is a number of households that are expiring their Advantage under the one- or two-year time limit.

And if -- when they face eviction, they may qualify for something called "FEPS"; Family Eviction Prevention Subsidy, or something close to that.

And, that is a court-ordered subsidy that is going to take over, in lieu of Advantage, for some of those families if they're facing eviction.

And there's details about the rules of that game on our website.

SENATOR SAVINO: Uh-huh.

SHELLY NORTZ: So, many of the families are going to go into FEPS, which is -- not got a time limit on it. And -- so -- or, it's got a 5-year time limit on it.

SENATOR SAVINO: What's the dollar amount that FEPs will provide?

SHELLY NORTZ: So FEPS rent levels are -- rent-subsidy levels are lower than Advantage.

SENATOR SAVINO: Uh-huh.

SHELLY NORTZ: But, we've had a conversation with the State. There seems to be a willingness for the level in FEPS, if we get to this point where we're going to have an influx into FEPS, for -- to -- to have it brought up to the level of Advantage.

SENATOR SAVINO: And is this -- if you're a family on public assistance, is this in addition to the shelter allowance?

SHELLY NORTZ: Yes. This is a -- a kind of court-ordered rent-supplement program.

Advantage is an administratively ordered rent-supplement program that is proposed by jurisdictions.

But, as far as I know, New York City's the only one that ever put a time limit of one or two years on their rent-supplement program.

The other jurisdictions aren't limiting it that way, and they're not having the same problem.

SENATOR SAVINO: They had a similar program

in the Child Welfare System for families whose only barrier to return to placement was homelessness, because homelessness is not a parental-deprivation factor. And we can't --

SHELLY NORTZ: We still have it.

SENATOR SAVINO: -- so we -- they created this housing-subsidy program, which was, three years or $3,600, whichever came first.

Well, you could blow through $3,600 in two months, renting an apartment in New York City.

It's not -- the Advantage Program is very similar, in that, it's, really, almost set up to fail.

SHELLY NORTZ: Yes.

SENATOR SAVINO: The other -- the concern I have, though, I'll tell you, is, because it is a program that's almost set up to fail, it's going to continue to discourage landlords to be willing to provide housing to families who are at risk; because landlords, at the end of the day, have to pay their mortgage, and they have to pay their property taxes, and they have to pay all of the other things.

And if the money's not coming in, the next time around, when a family comes in, that's just, you know, getting themselves back on their feet,

they're going to say no.

This is a -- this is going to create a real problem for families, going forward, because, as you pointed out, we're no longer opening up public housing, because there's just no apartments available. And, Section 8 has, essentially, dried up.

SHELLY NORTZ: Well, there is a turnover in public housing in New York City.

And, we're recommending that one in three units be set aside for homeless households, to help us bring this shelter census down.

I agree with you about discouraged landlords.

As a matter of fact, they're party to the litigation on the Advantage issue.

And, at this point, I think what I would recommend, from a State-policy perspective, is a serious consideration about investing in longer-term rental assistance, to help bring the shelter census down, and permanently house the families.

It's -- you know, there is, as you say, very little Section 8 coming out of Washington right now. I think it should be on everyone's legislative agenda to get Washington back in the housing

business. It's always been difficult since we've had less effort coming out of Washington on permanent affordable housing and rental assistance.

SENATOR SAVINO: Uh-huh.

SHELLY NORTZ: As to the foster-care program, it still exists.

I agree, that, uhm -- it's actually two types of subsidies: One to prevent placement, and one to reunite.

Our bridge building is an 85/85 project that serves, in a permanent housing fashion, formerly homeless family with children; and, typically, is reuniting the parents with the children who have been in foster care.

The Rental Assistance Program serves those families in our program; but, it is $300 a month.

And it would be much better if it were $600 a month.

SENATOR SAVINO: Thank you.

SENATOR GALLIVAN: Thank you.

SHELLY NORTZ: Thank you very much.

SENATOR SAVINO: Marsha Basloe, Early Care and Learning Council.

[Comment from the audience.]

SENATOR SAVINO: I beg your pardon?

SENATOR GALLIVAN: She's not here yet.

SENATOR SAVINO: Oh, she's not here yet? Okay.

Next is, Gerard Wallace, the director of the New York State Kinship Navigator, Catholic Family Center in Rochester.

Come on down! [Laughter.]

GERARD WALLACE: Good morning, Senator Gallivan, Senator Savvy.

I appreciate, very much, the chance to be here today, and to talk about Kinship Care.

I'm Gerard Wallace. I'm the attorney director of the New York State Kinship Navigator.

This is the only statewide program serving the kinship community, administered by OCFS, and operated by Catholic Family Center in Rochester.

I'm also the chair of the New York State Kincare Coalition, which is sponsored by AARP, which is a coalition of over 60 organizations that have a long-term interest in our population.

And, on the aside, for fun, I run a national Grandparent Committee that works in 37 or more states, to try and assist kinship families.

My first, and most important, emphasis is to make sure that we recognize that kinship care

applies to both foster-care and to non-foster kinship caregivers.

Oftentimes, kinship care is a euphemism for kinship foster care; and, yet, that population is, actually, significantly smaller than those kinship caregivers outside that system.

I'm just going to briefly run through this testimony, and point out some of the highlights.

And the first thing to do is the usual statistical dance.

According to 2009, American Community survey, 141,000-plus grandparents are responsible for grandchildren in New York State.

"141,000."

This does not include the estimated 35 to 40 percent of aunts and uncles, adult siblings, other relatives, and even family friends, who provide a resource for their kinship -- for kinship children.

In contrast, the foster-care system, and I have been able to find two sets of figures for this presentation, the first comes from the "Legal Services Journal," December 2011 Edition, in which it says, that:

"Approximately 6,000 children are in kinship

foster care, placed with their relatives. Most of them in New York City, 87 percent."

That means 13 percent, according to him, outside the city.

Other figures, which are attached to the testimony, which came from OC -- Office of Children and Family Services' database, for the year 2010; and they list, by county:

The number of children in licensed, pending, and emergency foster care;

And, the number of children in relative, licensed, pending, and emergency foster care.

The numbers are summarized below, if I can find it.

And, 8,063 kinship foster placements in New York City, and 1,664 around the rest of the state.

The figure is not summarized here, but there are, according to these stats, about 33,000 placements during the year 2010, of which, roughly, 22,000 were in New York City; and, roughly, 11,000 were more Upstate.

To put it more simply:

35 percent of the kinship placements in the state are, uhm -- 35 percent of all the foster care

in the state is outside of New York City.

And, yet, according to these stats, somewhere between 17 and 8 percent of the placements with kin are outside the city.

In other words: If you summarize it up, there is, for some reason, very few children, proportionally, being placed with kinship families outside of New York City, compared to New York City.

Okay?

And, also, the second summary factors, is that we have an enormous population of kin who are -- don't even -- are not foster parents. They take care for children on their own.

So, that's the description of the population.

The realities of kinship care, are that, children come into, either, what we call "the private system," or the public foster-care system, for many of the same reasons: abuse, neglect, abandonment, mental-health issues, drug abuse, alcohol abuse, incarceration, and death.

There are, sometimes, more benign causes; but, in general, in my experience, having talked to over 8,000 kinship caregivers in the past 15 years, the causes mirror those which could place a child in foster care.

Okay?

And these children have special challenges: bereavement, trauma, stress, loss, disabilities due to drugs at birth, to abuse and neglect.

And the caregivers themselves have special challenges. They tend to be older. The average age is 56; with a population over 60, of 20 percent or more.

They're disproportionately poor. And, of course, you can just imagine what this causes; what the circumstances are that these families face.

They face barriers in benefits, services, and custodial rights.

For instance, I'll give you a story.

Typical story: Maternal aunt -- mother is -- grandmother is deceased.

Maternal great-aunt, she gets a call from CPS, that her niece is -- was caught in a drug house, and is going to be arrested. And would she be a resource for the children.

And, "Yes, of course," she says, "I want to do this."

And, CPS brings over two children -- one, two, or three; ages 3 to 10, typically, and says, "Here's the kids." And walks out the door.

The aunt, or the grandmother, whoever the relative may be, wakes up the next day, and says:

Oh, my God. My life is turned upside down. I have to get these kids in school. I need to get them medical care.

How do I get child care?

What do I do about financial assistance?

Where is the mother?

Do I have the right to take care of these kids?

And the call is made to the local child-welfare agency, who says, essentially: It ain't their job.

The child has been placed informally, pursuant to regulations. It's called "an alternative living arrangement." It's perfectly legal.

And, now, the grandmother, or aunt, is completely on their own.

As the director of the Navigator, I can attest to you that I hear this story constantly.

Previously, when I was at Hunter College, we heard it all the time.

I spoke to Keith Morganheim yesterday, at Neighborhood Legal Services in Erie County, in

Buffalo.

And, Keith and I reviewed some of the circumstances similar to this. And he agreed, at the end of the call, that he would consider that there were more of these alternative living arrangements done, plus some other alternatives to foster care, than there are children in his county in foster care.

It's just an enormous issue for us, in terms of serving our clients, because we just -- you know, ACS is a little bit different in New York City.

SENATOR SAVINO: Uh-huh.

GERARD WALLACE: And I remember when the numbers were much higher --

SENATOR SAVINO: They got sued for this. Remember Eugene F.?

GERARD WALLACE: Yes.

But, the -- well, this is before the removal.

Note the difference: They have not made the removal; so, therefore, because there's no removal, there's a lot of largesse in what they want to do.

Regulations allow them to do it.

SENATOR SAVINO: Parsing words there.

They've taken from a biological mother, and

they have removed those children. They may not have gone to court and gotten a remand --

GERARD WALLACE: There's no -- yes, there's no court order --

SENATOR SAVINO: -- and haven't begun the process, but they removed those children.

GERARD WALLACE: The regs say, that if there's no court order or no voluntary surrender, this is perfectly legal.

And the reg is quoted in here.

Okay?

SENATOR SAVINO: I saw that. That may be a regulation we might want to take another look at.

GERARD WALLACE: I would appreciate that.

There's -- this is an issue, and I've jumped right into it, but, again, I've alluded to many other issues that confront these families.

Why I've given you this compendium of data, is that, we've had three New York State Kinship Summits, dating back, 2005, 2008, and last year, and we've made recommendations.

And following up, in this testimony, are the recommendations that apply to social services.

There's a strike-through in those that we've had enacted or implemented. And, there are many

others that could use with some attention.

So, I'm hoping that the staffer might look at these documents and see the range of issues that these families face.

Some of the things we've gotten done were back in 2000. We had the Standby Guardianship Statute amended, to include legal custodians and caretakers who can't find relatives -- find the parents.

In 2003, we had, really, one of our most significant wins. We amended 1017 to include:

A search for all grandparents;

To mandate that they -- any contacted relative be told their options, and to be warned, that if they don't act, the child may be, eventually, adopted by a foster family.

That provision actually morphed into Senator Clinton's Kinship Caregivers Support Bill, which she and Senator Snow sponsored in 2005; and later became federal law in the Fostering Connections Act, which was enacted -- signed into law in 2008, and contains a notification provision that even adds, 30 days to do the search, and due diligence in finding relatives.

The other part of that law, in 2003, which relates to the testimony also, is an amendment to Domestic Relations Law 72, which was the Grandparent Visitation Statute, which added a new extraordinary circumstance, at least in statute, that said:

That if a child has been residing with a grandparent for two or more years, the -- a court could not just automatically knee-jerk return that child to an absent parent.

It demanded a best-interest analysis before they could be returned.

That law, which I worked very hard to get both of those laws back then, was, singularly, for grandparents.

And we have, since then, been recommending in these reports, that it be expanded to include the other 30 to 35 percent of relatives who were providing this kind of care.

You know, all the Kin-GAP provisions talk about relatives, very broadly, including even some non-blood relatives.

And, down the road, once they have gotten relative-guardianship payment, and been cut loose from the foster-care system, they enter our

population and become part of that private kinship community. And they, too, because there's been no termination of parental rights, will have to deal with errant parents who want to regain custody of their children.

This is one of the laws that protects grandparents in that instance, and it certainly should protect all other relatives.

In the attachments, there's a suggested statutory language to amend DRL 72.

The reports are too compendious to talk about here.

Our second recommendation -- our first recommendation, is to please look at them for relevant information, and possibilities for enactment or regulation.

We think that 70 -- DRL 72 needs to be amended. That's been consistently reported in our summits.

The issue that I alluded to earlier, that really has pained me personally, for 15 years of kinship care, is diversion.

"Diversion" is -- the proof of the pudding is the statistical evidence that Upstate New York does very, very little kinship care in certain counties.

One county, for instance, Monroe County; Monroe County has over 655 children placed with non-relatives, and 10 placed with kin.

"10."

You can see it in the data there.

In contrast, Nassau County, which is similar, Downstate, in practice, which has about 680 children, has placed 173 with kin.

10 versus 173, with a similar population.

The stories are all anecdotal. We've heard them for 15 years.

And one of our recommendations is, that, these diversion practices need to be looked at more thoroughly by the Legislature.

There is some reporting going on, pursuant to the enactment of Kin-GAP, but it's pretty minimal.

The practice that I alluded to before, is prior to removals, and there may be some technicality there. But, certainly, the practice is: The call in the middle of the night, and the resultant assumption of care, and the loss of the opportunity for the benefits of foster care, Kin-GAP, and, eventually, those stipends.

The second practice, which is post removal, is that, pursuant to Family Court Act 1017, there

are three options that must be presented.

And, OCFS and two ADMs has written publications that they indicate must be given to the caregiver.

The three options are:

You can take the child personally, and we can turn this into an Article 6, and you can have private custody;

You can take the child directly, pursuant to the Article 10. This is called "N Docket"; or, "direct-custody placements."

We have asked -- this -- this direct-custody placement, in the enactment of Kin-GAP, they're finally going report on the number. And you will be getting a report April 1st, partially, on number of children placed pursuant to that option.

We hear, anecdotally, and there is some evidence in one of the codings, that, last year, there may have been as many as 3,800 voluntary placements.

We call them "foster care on the cheap."

You get all the regular -- all the supervision, all the efforts at reunification, but the caregiver does not get the payment. And, they're at risk of removals, and the scrutiny.

And, along this route, there are lots of persuasions done by local departments, to have families choose one of these two options, rather than continue to work on becoming a foster parent.

One of the other persuasive techniques is: Oh, we won't use the emergency placement because it's optional.

Germaine [ph.] -- there's a case in Matter of Germaine on that, as cited in the document.

"We won't place with them until you accomplish the training. The training will take four months to get done, and you're going to have to travel. Until then, the child's got to be with strangers."

You know, what would any relative say?

"Give me the child."

So, we think this is an area that needs scrutiny. And, there's a little that has begun, pursuant to Kin-GAP, but much more needs to be done.

If we're actually placing more children via alternative living arrangements, via voluntary placements, and private custody, pursuant to Article 10, than there are children in foster care, I'm not even saying that that may not be appropriate

in most instances, but, how are we assessing what is the right place for these kids?

Clearly, we don't want to break the bank. But, clearly, these willy-nilly county de facto policies that, oftentimes, are based on dollars rather than the well-being of children, are, uhm -- it's a tough call.

Some scrutiny needs to be done of it; and that's our recommendation.

We also think that, 1017, the most-amended of all Article 10 statutes in the universe, needs to be continued to be amended.

Some of the other cases cited here are:

Debra V. Johnson [ph.], an older case in Albany County;

And, a recent case called, In The Matter of Dionana [ph.].

Debra V. Johnson is about the Albany practice. An Albany CPS worker who actually told kin, "There's no such thing as kinship foster care in Albany County."

And, Dionana, is about ways in which the search is not reported, and not really diligent, and doesn't uncover kin, and then doesn't really inform them of what their options are.

I'd recommend that a staffer take a look at those cases. They'll give you more fully flush-out some of the practices here.

Lastly, I'd like to say that I'm not alone in this opinion. Having been in kinship care for a long time, I can go back to Carl McCall's 1995 report on kinship foster care, in which he complained, "I can't find it, I tried."

But, I remember reading it back then: "I'll try a little harder."

Okay?

I wrote on this in 1998. I've been the co-chair of three summits. Another conference at Albany Law School.

Recently retired Jamie Greenberg, who was director of policy at OCFS, has written an article, this summer, in "Legal Services Law Journal," that concludes, with complaints about these practices.

And, Professor Sobe [ph.], in his commentary to 1028-A in the Family Court Act, talks about the ruses, quoting him, that Upstate counties use to prevent kin from becoming foster parents.

Incidentally, 1028 is another statute that we got enacted a number of years ago.

I could talk about one other subject here, and it's not really on point. I didn't really come to talk about it, because I felt we were here about non-funding issues.

But, the budget cuts last year slashed to the bone, and eliminated, an enormous amount of services for this informal kinship community in the state.

At its height two years ago, we had 2.75 million. Unfortunately, a good part of that was TANF money.

The, uhm -- now we're down, last year, the Legislature put in about $385,000. And, OCFS itself kicked in 400,000.

What was the result of that cut, was that, luckily, the Navigator is an independent funding stream in the Governor's budget last year, in the aid to localites. And, we're hoping it's going be there again this year.

But, the other programs funded with 2.75 million, were 21 programs serving 32 counties.

The cutbacks left eight of them funded, as of June 1 last year. Those 8 served only 11 counties.

And of those 11 counties, it's really worth

noting, a majority of them are rural counties, or almost the majority.

Oneida, Herkimer, Schoharie, Columbia, Greene, and Duchess, are funded out of those eight.

The only other counties funded by the remaining kinship program, 390,000 from the Legislature, and 400,000 from OCFS, were Westchester, the Bronx, Queens, Brooklyn, and Nassau, County.

There no longer is a program in Suffolk, Richmond, New York County itself, Albany, Monroe, Buffalo, Binghamton; and, about 21 other counties no longer have programming.

So, the need to do -- to shine a spotlight on this population, and to work to improve their access to existing services, and to cure some of their barriers to success, is now even more important than ever. We do not have the opportunity to intervene the scale that we had before, to advise and to advocate, and families are increasingly left on their own.

Lastly, in the latest report that I gave you, the one, the 200 -- the "2011, Kinship Care in New York: Keeping Families Together," Appendix H, and I, are a cost-benefit analysis of the value of

kinship services compared to -- the cost value -- the cost value of kinship services compared to foster-care services.

And, roughly speaking, for even the most expensive -- inexpensive kind of foster care, regular foster care, and even assuming that every kid in kinship care is getting a child-only grant, there still is a fifteen to sixteen thousand dollar difference per child, and what it costs to put a child in foster care, as opposed to, keeping them with kin, and provide them with some assistance case management.

This is the most marginalized of populations.

I worked on the national level. I worked in other states, too. And it is incredible how much focus there are -- is on kinship foster care, and how little focus there is on this larger population.

So, I would hope, today, that I kind of raised up the issue successfully, and that you would look into the many issues, the many concerns, and problems facing the population.

Thank you.

SENATOR SAVINO: Thank you.

I've got a whole lot.

[Laughter.]

Uhm, it seems like the rest of state is living in 1985, when it comes to dealing with children who are removed, and dropped off with a relative.

I'm very happy to see New York City doesn't do this, and I didn't think that they did.

I mean, I came into the system as a kinship caseworker.

GERARD WALLACE: Right.

SENATOR SAVINO: So I'm, you know, kind of baffled as to how the rest of the state is looking at this.

So, you respond -- obviously, there must be an initial complaint that's filed, that triggers a visit by a CPS worker.

And, so, they make that decision that, at this point in time: This child's life is at risk -- you know, at risk to life and their health if I leave them here.

So, they've begun that process or removing that child.

GERARD WALLACE: That's right.

SENATOR SAVINO: And then they go and find a relative.

GERARD WALLACE: Pursuant to the regulations.

The second case that I ever came across, in 1996, when I first did this, was in Rensselaer. And it was a woman who had a daycare center, and was a social worker, who got a call from Rensselaer County CPS.

And I think, and if I -- it was a newborn, and they wanted to remove the child from the mother because of drug addiction.

Enormous amount of it falls on the mother because the fathers aren't there to begin with.

So, it's the mother that you hear about when these situations occur.

And, she ran down, took that child, and woke up the next day, and, bingo, she was told, you know: It's not my job.

SENATOR SAVINO: Well, and that's what happened, you know, in New York City for a long time, until, you know, Rose Firestein [ph.] and --

I wonder where she is now. She's somewhere.

-- and several other attorneys brought the infamous Eugene F. case, which established kinship foster care in New York State.

That changed the practice. And, in fact, most judges, um -- once you removed a child, and, you had to go into court, and you had to, you know, get a remand, and prove that you had made reasonable efforts to prevent placement, unless the child was at risk to -- you know, imminent risk to life and to health, most of the judges began saying: Find a relative; find them now.

You know, and we understood what that meant. It was within the third degree of consanguinity: find a grandparent, et cetera. And you would do that.

And, then, you would place the children, and ask them if they were willing to take the child, as a foster parent; begin the process of approving them.

GERARD WALLACE: Very quickly.

SENATOR SAVINO: Right.

And you would -- you know, you would assign -- listen, things didn't work as fast as we liked, but there was a process.

So that process, apparently, doesn't exist outside the city of New York.

GERARD WALLACE: I -- you know, I verified what you're saying is correct.

I spoke to Wallace C. [ph.] the other day, Albany Guardian Society -- I mean, Catholic Guardian Society in New York City.

And, he described just what you're talking. I was trying to verify the existence of the practices.

And, you know, the numbers back it up.

Going further, New York City uses MiniMap, or, Caring For Your Own, available even on I-Link, which is OCFS's online training system, to permit relatives to move through the training quickly.

They even have an agreement, so that the child welfare agencies in the city, interchangeably, offer this. So, that, if you're in Brooklyn, and you can get to one place, and it's offered to them now, even though this it's not the agency who's going to be in charge of the child, you can go there and get it -- accomplish the training.

Nothing like that goes on Upstate.

I mean, I'm not saying there aren't good counties Upstate. Orange County's a good one.

But these practices are intractable.

The reporting on it, I think Professor Sobe's comment of "ruses" sums it up wonderfully.

And, the other week, Susan Antos [ph.] gave

testimony to the New York State Bar Task Force on Family Court, which is something new going on.

And, Sobe was on that panel. And he, you know, expressed his complaints about, you know, the ongoing practices.

SENATOR SAVINO: And, look, this is not to say that foster care should be the only option available.

GERARD WALLACE: I don't think so either, yeah.

SENATOR SAVINO: In fact, once, you know -- just because you're a grandmother who is a kinship foster mother, doesn't mean that you have autonomy. And you have to answer to the agency, and you have to answer to the court system.

And, in fact, the agency can come and remove the children from you, and place them somewhere else.

So, there's value to having the idea of kinship --

GERARD WALLACE: Independence.

SENATOR SAVINO: -- kinship independence.

What I would be concerned about, though, is that, if we're going back to, you know, what we did in the 1980s, where we just simply would drop a

child off, and say, "You're on your own," that's a real problem.

There's no protection for that grandparent, aunt, uncle, older sibling -- whatever the relationship is -- from -- there's no protection from the parent coming forward, and saying: That's my child.

You know?

So, if we would -- if we could --

GERARD WALLACE: [Unintelligible.]

SENATOR SAVINO: -- if we could establish a mechanism that would make it easier for relatives who want to care for their family members, but don't necessarily want to become foster parents, don't want the children to go through the system and place them at risk, but, would give them access to the services that these children probably need, that would certainly be preferrable.

But, it doesn't sound like that's happening either.

GERARD WALLACE: I don't -- certainly, voluntary placements.

If you get a removal, and you go into a direct-custody placement, you're getting the services. So, it's more akin to what we want to get

without the stipend.

But, the private custody arrangements, the call in the night, you know, those people are pretty -- they're reliant on the kinship-services programs that have just been, you know, so dramatically cut back.

I did speak, in the past -- about a year and a half ago, I spoke to CPS workers in Niagara County, some from Erie County, and also in the Clinton-Washington area. And both of them suggested the same thing that you're saying; you know, that they are concerned about the decision-making about, which kids go to families without scrutiny, oversight, and benefits, and which -- which don't.

And, uhm, they worry about the intrusive parent. The relative's inability to control that parent.

We hear it all the time. It's one of the biggest complaints we have.

SENATOR SAVINO: They should worry about the dysfunctional grandmother too.

GERARD WALLACE: Yeah.

SENATOR SAVINO: Since so many of these cases that come to the attention of the Child Protective

Services Division, you have problems of abuse, and of -- you know, children are at risk for abuse and neglect, because, yes, they've come through the system themselves, but, you have a high degree of people who suffer from substance abuse.

There are: Alcoholism, substance abuse, mental illness, mentally ill, chemically addicted, people. And, unfortunately, these are family diseases.

You know?

So, we may -- you know, you run the risk that you're taking a child from --

GERARD WALLACE: And dumping them.

SENATOR SAVINO: -- a drug-addicted mother, and bringing to an alcoholic grandmother, and no services and no oversight and no continued visits.

GERARD WALLACE: I certainly agree that those cases do occur.

I would like to point out: In the materials is -- there's a reference to an archive -- a study done by -- published in the archives of "Pediatric and Adolescent Medicine," on the outcomes of children in kinship care versus the outcome of children in foster care.

And, in almost every category surveyed, the

outcomes were better.

We do, certainly, have dysfunctional grandparents. And I run from them like crazy, because I talk to a lot of them.

Okay?

But, in general, having interviewed seven, eight thousand, I may find poor folks, I may find folks who are not well educated, but a high degree of maturity, partially of which, is, the older you get, the more you have been through; the more you've had a chance to rectify your life, and know what's important.

So, I can't -- you can't say every family walks on water, but, the idea that dysfunctionality is perpetuated is true, but it is a small portion of the population that I have been able to work with.

You know?

SENATOR SAVINO: A little bigger than you probably think.

But, again, my concern is, the idea that we're -- you know, we're just leaving children --

GERARD WALLACE: I agree.

SENATOR SAVINO: -- essentially, in legal limbo, and not addressing their service needs, and

not addressing the potential needs of the kinship care providers.

That's something that we need to really take a look at.

And, again, foster care should not be the option -- the only option for families.

You know, being in the foster-care system is awful. You know, requiring grandparents to decide whether they want to adopt their grandchildren, in some ways, is, you know, just a very bizarre practice.

And, we need to have all the options, but we need to make sure that, at the end of the day, children who have been removed, because they're at risk, who've been living in -- you know, in a neglectful environment, get the services they need.

GERARD WALLACE: Uh-huh.

SENATOR SAVINO: And some of them have real services needs. Just leaving them with someone, and walking away, is not the way to deal with that.

GERARD WALLACE: I totally agree.

And I don't see, and I've never felt strongly, that foster care should be the, uhm -- the, kind of, hard route; the route that -- of choice, for all these families.

They do better off. They don't want to go in foster care, but, they are dealing with children who are -- oftentimes, have disabilities, parents that are really, really troubled, and they themselves need a parenting education frequently, and a range of services.

And, it's tough.

You know, from their perspective, it's very tough.

And I would like to say one last thing.

I did some filming last -- over Thanksgiving weekend, on Long Island; where, I went down and filmed some grandparents.

And, the idea, usually, is that they're poor.

But, the grandparents that I met that weekend, one of them owned a printing company. The other one was a nurse.

And, you know, I -- I'm working at the national committee with the retired BOCES executive who has an 8-year-old.

And these are functioning families that just wind up, for one reason or another, that the parents have gone south, and they wind up with the kids.

You know?

Thank you.

SENATOR SAVINO: Thank you.

That would be Marsha?

Marsha Basloe; she is with the Early Care and Learning Council.

Go ahead.

MARSHA BASLOE: Okay.

Good afternoon.

And, first, I want to thank you for the opportunity to provide testimony.

My name is Marsha Basloe, and I'm speaking today on behalf of the Early Care and Learning Council, where I am the executive director.

The Early Care and Learning Council is also a co-convener of Winning Beginning NY, the state's Early Care and Learning Coalition.

The Early Care and Learning Council is a statewide not-for-profit organization, whose mission is to promote excellence in early care and education, with equal access for all families.

We do this primarily through the support of, and in partnership with, a strong network of community-based organizations that provide child-care resource and referral services across the state.

We work in collaboration with other early care and education professionals and organizations, toward the establishment of a comprehensive system that responds to the needs of all families, regardless of income, cultural background, or family composition; adequately prepares, and compensates, the early childhood workforce, and involves all segments of the state and local community in the planning process.

Quality child care is a necessity for both children and their parents.

New York State falls short in meeting the need for financial assistance with child care, with tens of thousands of income-eligible families on a formal, and an informal, waiting list for subsidies.

In the last year, local counties faced increasing demand for care. And with limited resources that they had, were forced to continue to further reduce eligibility and raise fees, placing even greater stress on working families across the state.

Child-care funding for the fiscal year 2012-13 budget will be affected by Congress's total elimination of the federal TANF Emergency Contingency Fund.

New York State has the capacity to provide child-care subsidies for 128,000 low-income children from working families and families receiving public assistance.

However, cuts to New York State Child-Care Block Grant have impacted the ability of these families to work and to provide high-quality care for their children.

Counties are continually being forced to lower income-eligibility levels and raise co-pays.

Winning Beginning NY has asked Governor Cuomo to, first, restore $37 million lost in child-care subsidy for our New York State children, and to commit to a New York State investment of 10 percent increase in total child-care funding.

This ask is important to our economy to keep people working.

I want to mention the need for reform.

And the need for reform is most evidenced in our county-administered child-care system.

Eligibility levels for a child to qualify for subsidy vary from county to county, as does the amount a parent must pay.

Consistency of care is affected.

Family share or parent fees determined by

the local service -- social-services districts result in an inequitable system, where a parent in one county may pay as much as five times more than a parent in a neighboring county, despite the fact that both parents have the same income, same child-care requirements, but simply based on the higher co-pay multiplier the county has chosen.

Numerous low-income families rely on subsidized child care to maintain employment and guarantee their financial security.

The State of New York has a goal of equal access to care for all children; thus, the subsidy-allocation formula needs to be examined.

It needs to be examined, with a focus on maintaining and enhancing services to those young children and their families that are most in need.

Until we have a statewide system that addresses eligibility, co-pays, and provider reimbursements, families and children will suffer from unfair and inequitable treatment.

The State should also explore setting consistent statewide standards for eligibility, co-pays, and provider-reimbursement rates. These statewide standards would provide equity for all New York State children and families.

New York's economy depends on quality child care.

In fact, the regulated child-care sector in New York State is a $4.7 billion industry. It provides nearly 120,000 jobs.

And the statistics tell us, that for every dollar spent on early care in education in New York State, it creates $1.86 return on investment that goes back into the local economies, creating jobs and supporting working parents.

The W.E. Upjohn Institute for Employment Research provides an overview of the economic development impact of early childhood programs.

There's an economist named Tim Bartik, who recently presented at the 19th Annual State Fiscal Policy Conference in D.C.

And I won't give you all of his report, but what I can tell you is, that there are two key pieces that he talks about:

Early childhood programs boost adult earnings, by getting children off to a good start, in terms of developing both academic skills and social skills.

And with this good start, former participants do better in kindergarten, which

further increases their skills. And then they do better in first grade. And then they do better in third grade. And then they do better in adulthood.

In other words: When we develop a broad enough set of skills at an early enough time, such skills do not depreciate over time, but, rather, appreciate;

And, secondly: Early childhood programs can boost local economic development, because two-thirds of all participants in early childhood programs will spend most of their working career in the state in which they spent their early childhood.

Therefore, a state or a local area's investment in early childhood programs will affect a local economy's long-run labor-force quality.

In today's global economy, higher local labor-force quality is, perhaps, the most important competitive factor affecting an area's attractiveness for location and growth.

At this time, in New York State, approximately 42 percent of all the children in New York State that receive subsidized child care are currently in a program that is unlicensed.

Family, friend, and neighbor care, known in New York State as "legally exempt care," now accounts for a large portion of the system; yet, it is not part of our regulations or efforts for quality care.

There is very little oversight in legally exempt care.

In particular: There are inconsistent standards for health and safety inspections. Background checks are not required.

And, furthermore, in a legally exempt program, a small amount, 10 hours, of training allows a provider to receive an enhanced rate of State dollars.

Ten hours can hardly provide what's necessary for quality.

Most importantly, by continuing to invest in unregulated care, we are undermining the entire system of regulated and licensed child care.

Efforts -- I would like to recommend that efforts be made to look at building our regulated system that supports quality, and slowly reducing the number of children that are in legally exempt care.

We must work across systems and agencies to

do what's best for our children in our state.

The Early Care and Learning Council will continue to work to assure that all families have access to information to make the best child-care choices to meet their family needs.

And, the Early Care and Learning Council looks forward to working with you to address them.

I would be happy to answer any questions that you have.

SENATOR SAVINO: I have a couple.

MARSHA BASLOE: Okay.

SENATOR SAVINO: On Monday, I held a hearing down in New York City, on the challenges for child care.

And, a lot of the issues you addressed did come up; one of them, of course, being, the inconsistency in funding, and eligibility, and what parents are required to pay.

But one of the other big concerns that I have, and I share with you, is this move towards the exempt child care; or, with the old family providers.

Towards that end, I was a sponsor of the bill that allowed -- that gave collective bargaining rights to those workers, for the express purpose

of them being -- you know, where the unions --

In the City of New York, it's the United Federation of Teachers; outside the city, it's CSEA.

-- that they could reach out to them, and, not just organize them for purposes of improving their standards and their working conditions, but, also, to improve the likelihood that they will become part of the supervised care system, and that they will get the training that they need.

In New York City, what I've been told, is that, their -- ACS, which oversees them down there, they notify the United Federation of Teachers when someone becomes a -- a --

MARSHA BASLOE: Legalized.

SENATOR SAVINO: Right.

-- legal provider.

I don't know whether they do that outside the city.

And to -- do you have any independent knowledge, are the counties doing that? Are they notifying CSEA?

And, later, I'll ask CSEA myself. They're not testifying today, but they are here in the room.

Are they being given that information, so that they can reach out to those home-care

providers, so that they can speak to them; find out:

Are they licensed?

Can they be licensed?

Are they, you know, appropriate settings?

Are we putting children, you know, in an appropriate place?

MARSHA BASLOE: First, thank you for having the hearing on Monday.

We did submit testimony, as well, on Monday.

Our child-care system is very complicated.

And, so, what I can tell you is, that we have licensed child-care centers; we have regulated family child-care homes; and then we have the registered license-exempt.

I know that it takes all of us to build a child-care system.

And you were part of helping the union to be able to provide those services for the legally exempt, with the goal that they would be able to raise their quality, and become part of the regulated system.

I think that that goes along with what I'm saying as well; is that, our efforts and our focus needs to be on the regulated system, because that's the system that has regulations, and is

dealing with quality, as well as health and safety.

The Early Learning Challenge Grant that was just submitted by the State of New York, and we will hear shortly whether we have received those funds, focused almost exclusively on the regulated system, because, the statistics and the research shows us, that, in order to have high-quality foundation for children, it must be in a high-quality setting.

The problem with a legally exempt family -- family, friend, and neighbor care, is that we don't have any regulations for them, and we don't know what the quality is.

So, I think it will take all of us working together.

Ideally, what other states have done when they have pushed for quality, is that they have said, that: With our State dollars, we are going to use these State dollars in our regulated system. If there is not a slot available in our regulated system, then we will move to the legally exempt. But, that there's a return on investment and an accountability piece to using our State dollars.

SENATOR SAVINO: The only other thing is, I'm happy to hear you say, and I've heard this from

several other people, and I've been singing this song for a while now: We have to begin to look at child care and early childhood education as part of our economic development policies; because, you cannot -- you can't talk about job creation on the one hand, and then pull out the supports underneath that makes work pay.

You know, many of these jobs are going to be targeted at low-wage earners, particularly women.

And, the existence of quality, subsidized, affordable child care is going to be the difference between success or failure for many of these programs.

So, I know all of you will be submitting your own requests to the Governor when he puts his budget out.

Advocate strongly for child care; restoring the $37 million.

And, in addition, I'm going to put a plug for my own legislation: The exemption for women on public assistance with children under the age of 1, so we can preserve the available slots for working women.

So, that's my little plug for my own bill.

I'm still working on him. He's close. He's

really close.

SENATOR GALLIVAN: I'm still learning.

SENATOR SAVINO: Yes.

Thank you.

SENATOR GALLIVAN: Thank you.

SENATOR SAVINO: We have one more --

One more?

-- one more person that's going be presenting.

Sheila Harrigan, the executive director of the New York Public Welfare Association.

Come on down.

SHEILA HARRIGAN: Thank you very much.

I think you know the New York Public Welfare Association represents the 59 local Departments of Social Services around the state.

There's a lot of issues on their minds, and, I've just picked two to focus on today.

These are two areas where there's been a great deal of success; and, we have some cautions for where we go forward.

The first is, welfare reform.

And, as you know, there's much lower caseloads today than in the past.

And, we really seek your continued support,

as you review budget proposals and legislation, to keep the focus on employment goals, and the type of services that support employment.

Since TANF is a block grant, we've been able to use additional funding when the caseload is down, to support these services. But, we do expect a TANF shortfall, going into next year's budget, so there will be a lot of competition for those dollars.

Today, most assistance is actually going to working families, in the form of, food stamps, Medicaid, HEAP, and, transportation, child care, other services.

So, welfare reform has been a success. We don't want to lose ground with that, and we're really counting on the Senate, once again, to help with that.

During a weak economy, there's always pressure to back away from some of those principles, because we know it's harder for people to find jobs, but, we want to keep the focus on employment.

There will be funding in the coming year, such as the Flexible Fund, which is, primarily, a child-welfare funding source. And it's become very difficult to keep any employment dollars as part

of that.

The other area where we feel there's been success, is mandate relief.

Starting on a local level, one of the things our association does, is work with the Departments of Social Services. They share all their ideas for efficiencies and effectiveness, and are constantly looking at ways to organize, and change processes, to be more efficient.

And, we've worked with OTDA and OCFS, and with the Legislature, on ideas for mandate relief, that have really helped on the administrative side.

But, the big cost of mandates is the benefits. It's public assistance, it's food stamps, on a federal level, but, mainly, it's Medicaid.

So, really, if the State is going to embrace mandate relief for counties, it is, some plan, to take over the cost of Medicaid benefits.

And, as you know, under the property tax cap, that's become very important to counties.

So, I think we've had a lot of success in mandate relief on an administrative end, but, New York State has a very strong commitment.

We have the constitutional commitment, we

have the commitment of the Legislature to provide care for the vulnerable and needy.

And, that's costly. And a lot of that is the cost of medical insurance.

So, those two areas -- your continued support for welfare reform, and, a look at Medicaid and mandate relief -- are the issues that I wanted to bring to you today on behalf of the Departments of Social Services.

SENATOR SAVINO: Thank you.

SENATOR GALLIVAN: Thanks.

Just a comment.

Now it's time to plug my bill.

[Laughter.]

SENATOR SAVINO: Which one?

SENATOR GALLIVAN: We actually have a mandate relief bill, that we have 64 legislators on board.

SHEILA HARRIGAN: That's wonderful.

SENATOR GALLIVAN: And, it deals specifically with -- with freezing; and, then, the State taking back over, a period of years -- eight years -- the local share of Medicaid, to try to address that, and take some of that off of the counties. And not just in a pure cost shift, but relying on some of the things that will result --

the additional revenues that will be realized from the federal -- from the federal health-care legislation, some efficiencies with the State takeover of the administration of Medicaid, some medi -- and some of the savings and efficiencies realized from the Medicaid Redesign Team.

So, we have our sight set on that.

We have a number of people on board. We have 20 in the Senate, so far.

Hopefully, 21 by the end of today.

But, we do have a lot of momentum with that, so we're trying to address that one specific area.

SHEILA HARRIGAN: They're very enthusiastic about that, and they support that bill.

SENATOR GALLIVAN: And doing it at the same time, to make sure that the services continue to be provided, and not cuts to services.

SHEILA HARRIGAN: Absolutely.

SENATOR SAVINO: The only question that I have: Are we going to start printing money here in Albany?

How we going to make up, that -- that, you know, Medicaid takeover?

That's the real big question, because it's not like the cost is going to go down.

So, the State's going to have make it up, which means, it's going come out of somewhere else.

And in my experience -- I totally agree with you, Pat, we have to find a way to do it.

But in my experience, when the cuts have to be made, they wind up falling on the very programs that you're concerned about.

They're going to come out of child welfare, they're going to come out of preventive services, they're going to come out of child care, because, that's where they always come out of.

So, I don't know -- I don't know how we do it. I agree that it's something we should look at.

Certainly, the cost of -- the counties, or the local portion, of Medicaid that New York City has to pick up is strangling them.

But, I'm not sure what it is.

And, then, we also have to be concerned that we don't fall for, you know, the demand that we have to reduce benefits for the workers, we have to, you know, do pension reform; because, none of that's -- none of those savings that could be realized, we'll see in our lifetime. They're way off in the future.

So, we should have this conversation, and figure out how to do it. Just make sure that we don't, you know, cut all the other programs.

SHEILA HARRIGAN: And that's all we're looking for.

We fully appreciate that, because it's the same on a county level. They're cutting other services to the same vulnerable populations.

And, it's -- it's -- it's a problem, because we do have that strong commitment to be helpful to people, and make this happen.

So, thank you.

SENATOR SAVINO: Thank you.

SENATOR GALLIVAN: Thank you.

SENATOR SAVINO: Is there anybody else?

Anybody have any opinions?

Anybody want to testify about anything else?

No? Okay.

SENATOR GALLIVAN: All right, thanks, everybody.

SENATOR SAVINO: Thank you.

(Whereupon, at 12:13 p.m., the joint committee hearing, held before the New York State Senate Standing Committees on Social Services, and, Children and Families, concluded.)