

1
2 COUNCIL OF THE CITY OF PHILADELPHIA
3 COMMITTEE ON THE DISABLED AND
4 SPECIAL NEEDS
5
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7 Room 400, City Hall
Philadelphia, Pennsylvania
8 Monday, February 9, 2015
10:30 a.m.
9
10

PRESENT:

11 COUNCILMAN DENNIS O'BRIEN, CHAIR
COUNCIL PRESIDENT DARRELL L. CLARKE
12 COUNCILWOMAN JANNIE BLACKWELL
COUNCILMAN CURTIS JONES, JR.
13 COUNCILMAN DAVID OH
14

15 RESOLUTION 150028 - Resolution authorizing
Council's Committee on the Disabled and
16 Special Needs to hold public hearings
regarding the state of housing in Philadelphia
17 for people with physical, psychiatric,
sensory, intellectual and developmental
18 disabilities.
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2 COUNCILMAN O'BRIEN: Good
3 morning. I would like to call to order
4 the meeting of the Disabled and Special
5 Needs Committee. I would like to
6 recognize that we have a quorum:
7 President Darrell Clarke, Councilman
8 David Oh, Councilman Curtis Jones, and
9 Councilwoman Jannie Blackwell was here.
10 She went out in the hallway and she will
11 be back momentarily.

12 This hearing is called to order
13 of the public hearing of the City Council
14 Committee on the Disabled and Special
15 Needs. The purpose of the public hearing
16 is to hear testimony regarding housing
17 for individuals with disabilities in
18 Philadelphia authorized by Resolution
19 150028.

20 Could you read the resolution.

21 THE CLERK: Resolution No.
22 150028, authorizing Council's Committee
23 on the Disabled and Special Needs to hold
24 public hearings to examine the state of
25 housing in Philadelphia for people with

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2 physical, psychiatric, sensory,
3 intellectual and developmental
4 disabilities.

5 COUNCILMAN O'BRIEN: Thank you
6 to everyone for being here today as we
7 examine the state of housing for
8 individuals with physical, sensory,
9 psychiatric, intellectual, and
10 development disabilities.

11 A place to call home is the
12 cornerstone of independence.
13 Independence and integration are among
14 the most important values and goals
15 shared by people with disabilities, their
16 families, and advocates. A decent, safe,
17 affordable home is essential to being
18 part of the community, as it opens its
19 door to other life opportunities such as
20 education and employment.

21 The right to live in the
22 community for individuals with
23 disabilities is grounded legally in the
24 landmark 1999 Olmstead Supreme Court
25 decision often referred to as the Brown

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2 versus Board of Education for the
3 disability community. The Olmstead
4 decision found that medically unnecessary
5 segregation of individuals with
6 disabilities who desire to live in the
7 community was a violation of Title II of
8 the Americans with Disabilities Act.
9 Specifically, the court ruled,
10 "Unjustified isolation, we hold, is
11 properly regarded as discrimination based
12 on disability. First, institutional
13 placement of persons who can handle and
14 benefit from community settings
15 perpetuates unwarranted assumptions that
16 persons so isolated are incapable or
17 unworthy of participating in community
18 life.

19 "Second, confinement in an
20 institution severely diminishes the
21 everyday life activities of individuals,
22 including family relations, social
23 contracts, work options, economic
24 independence, educational advancement,
25 and cultural enrichment."

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While progress has been made, the promise of Olmstead is yet to be fully realized. One significant barrier has been the lack of appropriate housing for people with disabilities. Across the United States, millions of people with disabilities face a severe housing crisis due to such factors as affordability, accessibility, aging caregivers, housing discrimination, and availability. The supply of affordable, accessible housing remains far less than the need.

Waiting lists for housing in Philadelphia ranges from three years to ten years in duration. Under Olmstead, states can meet their obligation by developing a plan for community placements with a waiting list that moves at a reasonable pace. Waiting lists that exceed three years or more arguably are not moving at a reasonable pace. Therefore, it is crucial that we examine the current state of housing supports and housing development for people with

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2 disabilities.

3 The topic is of great interest
4 to me for two reasons. First, our work
5 on the Philadelphia Autism Project, which
6 was just released last week, has raised
7 many concerns. Of greatest concern and
8 relevance to the housing discussion is
9 the findings from the 2014 Pennsylvania
10 Autism Census Report, which signals a
11 looming crisis as the number of adults
12 with autism of Pennsylvania is projected
13 to be 20,000 individuals by the year
14 2020. That number is proportionately
15 relevant across the country and it's very
16 important, and I will overstate it, if
17 possible, every time I recite that
18 number, because once you know that number
19 as policymakers, you have a
20 responsibility to act.

21 Currently -- think of that
22 20,000 number, and the bus stops when
23 you're 21 -- Pennsylvania has 600 slots
24 for adults between the Autism Waiver and
25 the ACAP program. We also know that when

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2 compared to other adults with
3 disabilities, adults with autism are less
4 likely to have ever lived independently
5 and more likely to be living with a
6 parent or guardian. So we must plan for
7 the housing needs of this rapidly growing
8 population.

9 The second area of interest is
10 the Philadelphia Nursing Home. Many in
11 the disability community, including some
12 who are testifying today, have been
13 advocating for several years that
14 individuals with disabilities are
15 inappropriately placed there and can
16 linger institutionalized for years.
17 Olmstead is clear. Unnecessary
18 segregation due to the lack of
19 appropriate community-based placements
20 for individuals with disabilities is a
21 violation of the ADA. Therefore, we must
22 actively work to remedy this situation.

23 The experts testifying today
24 will highlight the impact of this housing
25 crisis on Philadelphians living with

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2 disabilities that outline how
3 Philadelphia has been a leader in
4 developing models that work and also how
5 we are continuing to come up short in
6 meeting the needs of Philadelphians
7 living with disabilities. They will
8 provide concrete strategies for moving
9 forward to ensure Philadelphia is in
10 compliance with the findings from the
11 Olmstead decision and, more importantly,
12 that Philadelphians living with
13 disabilities have the same opportunities
14 to live and be part of the community like
15 everyone else.

16 I'd like to recognize that
17 Councilwoman Jannie Blackwell has joined
18 us.

19 Are there any opening
20 statements from our members?

21 Councilwoman Blackwell.

22 COUNCILWOMAN BLACKWELL: Thank
23 you.

24 Good morning, all. This is a
25 very important morning. I thank the

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2 Chair for convening us and all of you.

3 There's so many important people who make
4 such a difference in our city and beyond
5 who are here.

6 I will have to step out during
7 part of it, Mr. Chairman, and ask that I
8 am able to leave my vote to go to a
9 funeral for the mother of a staff member.

10 So I will be out and be back in. But
11 there could be no more important panel
12 than you have here for people who are
13 involved in this issue and people who
14 deal with homelessness and people with
15 special needs. You know this is part of
16 my issue, and I am just grateful that at
17 this point in time and this early in the
18 year we get a chance to make this
19 discussion in case we want to advocate
20 for other needs before the budget.

21 So, again, let me thank you,
22 the panel, and certainly all of you who
23 have come here to testify on this very,
24 very important issue.

25 COUNCILMAN O'BRIEN: You have

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2 always, Councilwoman Blackwell, given a
3 voice to the most vulnerable in our
4 community. I thank you for being here.

5 COUNCILWOMAN BLACKWELL: Thank
6 you.

7 COUNCILMAN O'BRIEN: Councilman
8 Oh.

9 COUNCILMAN OH: Thank you very
10 much, Mr. Chairman. I'd like to also
11 echo what Councilwoman Blackwell has
12 said. First of all, congratulations on
13 putting this great panel together and
14 your hard work. I know it takes time and
15 effort, of course, with your staff, and
16 you have so many excellent witnesses
17 here. And I'm saying that because I have
18 to apologize. I mean no disrespect, but
19 I too have got a busy schedule that I
20 could not shift around today. So I will
21 be coming in and out. I hope you'll
22 understand that I am paying attention and
23 I do think this is important, but I will
24 try not to be disruptive as I move in and
25 out for my meetings.

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2 Thank you.

3 COUNCILMAN O'BRIEN: Thank you
4 so much, Councilman.

5 I would now like to call up the
6 first panel: Thomas Earle, who is the
7 President and CEO of Liberty Resources;
8 Laura Weinbaum, who is the Vice President
9 of Public Affairs and Strategic
10 Initiatives, Project HOME; Roy Diamond,
11 who is a parent and he's going to be --
12 he was to testify on affordable housing.
13 He's an affordable housing developer and
14 consultant. He's not able to be here.
15 So, Katy, would you please read
16 Mr. Diamond's testimony into the record.

17 THE CLERK: Good morning,
18 Chairman O'Brien, Vice Chairman Henon,
19 and members of the Committee. Thank you
20 for inviting me to testify.

21 My name is Roy Diamond. I am
22 62. I was born in Philadelphia and have
23 been a lifelong resident.

24 I have two jobs. First, I am
25 the father of my son Jacob, who is 24.

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He lives at home here in Philadelphia.

He was diagnosed at Children's Hospital
with autism when he was 18 months old.

He cannot speak. Growing up, despite the
wonderful care he received at CHOP, he
has intractable epilepsy and has frequent
seizures. He is a great young man.

However, since he turned 21 and was no
longer entitled to go to school, his
world has been very narrow. He watches
videos. He takes walks in the
Wissahickon Park and walks along City
streets. He likes the City, but he
cannot be left alone and needs an aide
24/7.

My wife Ella and I often have
this conversation. These are the best
times of Jacob's life. We are here to
care about him. But we are getting old.
In just a few years, we will be unable to
care for him any longer. There are no
good places for him to live, no one who
will care for him and seek to broaden his
world to help him be the best he can be

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2 and contribute to this city. In short,
3 nowhere to live, no services to help him
4 be safe, healthy, and fully alive in the
5 same sense we all wish for ourselves and
6 our children.

7 My second job is that I develop
8 and help others develop affordable
9 multi-family rental communities, as a
10 legal services attorney, then a partner
11 in Rouse and Associates, and then since
12 1990, 25 years ago, the owner of a
13 company based here in Philadelphia. In
14 one manner or another through all of
15 those roles, I have supported the
16 development and operation of almost 7,000
17 affordable apartments. I am also the
18 President of Autism Living and Working, a
19 not-for-profit that has developed and
20 operated five group homes for adults with
21 autism, including one with the amazing
22 help of Councilwoman Blackwell in West
23 Philadelphia and one in the Northeast.

24 In a few months, my company
25 will help two not-for-profit

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organizations in Pittsburgh break ground for the construction of a \$15 million, 42 new construction apartments, 21 of which will be reserved for adults with autism. Services will be provided by NHS, a national provider of services, headquartered in Pennsylvania. It will be the first affordable community in Pennsylvania in which adults with autism will live together with typical adults.

This building will be financed in the same manner as many projects in Philadelphia have once been built since the late 1980s, using funding from the county combined with private investment which purchases an award of Low Income Housing Tax Credits from Pennsylvania Housing Finance Agency.

This development will exist because the leadership of Allegheny County understands the needs of thousands of adults with autism like my son and the crisis that their adulthood creates for their families and the community as a

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whole. Those leaders made their priorities clear to the staff and to state officials charged with distributing these resources.

So here is what we should do now:

One, when the Office of Housing and Community Development issues a request for proposals for soft funding, which, if awarded, enables a project to compete for tax credits at PHFA, OHCD and the Mayor should prefer those applications that set aside apartments for adults with autism and advocate for those projects at the state level.

Two, families burdened by additional costs to care for their adults with autism should merit a credit when calculating City wage taxes. The public sector has simply shifted these costs to families, adding financial disaster to their lives.

Three, the state and federally funded waiver programs are insufficient

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2 to provide supports that enable every
3 Philadelphia adult with autism to have a
4 chance at a decent life. The City's
5 disability and health offices should
6 include a person who focuses every day
7 upon bringing more resources, private and
8 public, to the City. This is the era of
9 creative private and public partnerships.
10 Let's enter the 21st century and make
11 them happen here.

12 Four, finally, 4,600 persons
13 with autism in 2014 produce 25,000
14 families and friends. The number
15 increased by 116 percent in five years
16 and can be expected to continue to
17 increase. Statewide, the increase has
18 been 181 percent during the same period.
19 We don't want to be, but we are
20 increasingly understanding how to help
21 our families and we will actively support
22 those who help us.

23 COUNCILMAN O'BRIEN: Thank you,
24 Katy.

25 Now I would like to recognize

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2 Mr. Earle. Would you please identify
3 yourself for the record and then you can
4 begin your testimony.

5 MR. EARLE: Yes,
6 Mr. Chairperson. My name is Thomas
7 Earle. I'm the current President and CEO
8 of Liberty Resources, which is the
9 federally funded Center for Independent
10 Living that serves all of Philadelphia
11 County. I'm also the Chairperson of the
12 Philadelphia Commission on Human
13 Relations, and in both capacities the
14 development and preservation of housing
15 that is accessible and affordable to our
16 seniors, working families, and people
17 with disabilities, including low-income
18 households, are issues that are very
19 important to Liberty Resources, but also
20 the Community Relations Division of the
21 Commission on Human Relations.

22 The vast majority of consumers
23 that Liberty Resources serves are people
24 mostly with physical disabilities, but we
25 also serve several folks with cognitive

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2 disabilities, including autism and other
3 developmental disabilities, most of whom
4 are on low fixed monthly income such as
5 Social Security and Social Security
6 Disability Income. Through our supports
7 coordination or case management services,
8 we serve over 3,200 consumers throughout
9 the area, a wide range of disabilities,
10 some young, some middle aged, and some
11 old. Many of our consumers have been
12 with us so long that they started with
13 services in the under 60 model and now
14 are in their late 50's and are
15 approaching 60 and switching over to
16 aging services available through the
17 Department of Aging.

18 For all of our consumers, the
19 ability to live in the community
20 independently in an integrated setting,
21 in safe, affordable, and accessible
22 housing is paramount.

23 One of the biggest obstacles to
24 Liberty Resources' Independent Living
25 mission is the ability to obtain

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2 affordable, accessible housing for the
3 many consumers that we work with to move
4 out of the nursing home facilities and
5 other institutional settings like
6 Philadelphia Nursing Home that was
7 mentioned earlier. For this reason,
8 Liberty Resources and disability rights
9 organizations such as Disabled in Action
10 and the Campaign to Take Back Vacant Land
11 and the Philadelphia Coalition for
12 Affordable Communities have advocated for
13 the passage of important legislation such
14 as the Housing Trust Fund, inclusionary
15 zoning laws, and most recently the Land
16 Bank ordinance. Additionally, the
17 Housing Trust Fund requires that all
18 housing development funded through the
19 Housing Trust Fund must be visitable.

20 While these legislative
21 efforts, along with the limited resources
22 of the Office of Housing and Community
23 Development and the Philadelphia Housing
24 Authority, do help, as the fifth largest
25 city of the United States, we have a very

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long way to still go to meet the housing needs of people with disabilities.

Recent census figures show a substantial increase in the number of residents in Philadelphia who have a disability, and over the last 30 years, Liberty has worked to transition many people with disabilities out of expensive, isolating nursing homes to integrated cost-saving apartments. Currently, Liberty Resources has a waiting list of over 110 individuals who are living in a nursing home setting who have expressed the strong desire to move out into the community.

The lack of accessible housing has escalated to such an unmanageable level that in 2007, Liberty Resources started its own community housing development organization, Liberty Housing Development Corporation, and with the City, OHCD, and PHA have tried to meet the needs of our many consumers. Since its inception, our housing work has

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successfully developed and managed over
40 units of accessible housing that is
integrated. Our most recent project
consisted of a 13 accessible unit
building built on a contaminated piece of
vacant land that was successfully
remediated at 55th and Vine, and for this
we thank Councilman Curtis Jones and his
support and leadership on bringing this
project to fruition.

In 2015, with the support of
Councilwoman Jannie Blackwell, we are
seeking to build 24 units of housing,
seven of which will be physically
accessible and the balance visitable, on
an abandoned property at 52nd and Poplar
Street with Low Income Tax Credit funding
from the Pennsylvania Housing Finance
Agency.

We find it somewhat ironic that
with the 25th anniversary of the
Americans with Disabilities Act
approaching in July of this year and, as
you mentioned, the 15th anniversary of

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2 the Olmstead decision that we are still
3 here in Pennsylvania having these
4 discussions about the lack of affordable
5 housing. The Olmstead decision is a
6 landmark civil rights decision from our
7 Supreme Court and, among other things,
8 holds that people with disabilities
9 really have a right under the Community
10 Integration mandate of the ADA to live in
11 the community. Living in the community
12 requires community capacity, accessible
13 public transportation, employment
14 opportunities, affordable, integrated
15 housing, and we recommend, in conclusion,
16 Chairperson O'Brien, that we have two
17 specific steps going forward, that with
18 current regulations under HUD, that both
19 OHCD and PHA assign the highest priority
20 to increasing the availability of
21 accessible, affordable, integrated
22 housing through their respective funding
23 sources and grants. We know recently
24 with the President Obama Administration
25 that HUD has authorized an 811 Project

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2 Rental Assistance voucher program.

3 Pennsylvania is receiving 200 of these
4 vouchers. We hope that some of those
5 vouchers will help organizations like
6 Liberty Resources to meet the needs of
7 the people that we hope will live in our
8 housing project at 52nd and Poplar.

9 The second step that we
10 recommend today is that City Council
11 promptly pass the legislative efforts
12 that will be led by Councilman Kenyatta
13 Johnson that will seek to increase the
14 funding of the Housing Trust Fund. These
15 are two things that could be done with
16 relative ease that would provide some
17 quick assistance over the coming year.

18 We thank you very much for this
19 hearing and your leadership.

20 COUNCILMAN O'BRIEN: Thank you,
21 Mr. Earle. I would just state for the
22 purposes of this hearing a little
23 housekeeping measure. It's my intention
24 to have all the panels testify and then
25 afford the opportunity for Councilpeople

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2 to ask questions. The Majority Leader is
3 here, so I'm going to go out of order and
4 allow the Majority Leader to ask a
5 question of you, Mr. Earle.

6 COUNCILMAN JONES: Thank you,
7 Mr. Chairman. I appreciate that. I have
8 to go to a press conference across the
9 hall, but I wanted to thank --

10 COUNCILMAN O'BRIEN: Say nice
11 things about me.

12 COUNCILMAN JONES: I am. I'm
13 about to.

14 I appreciate you holding these
15 hearings, because in the 4th Councilmanic
16 District, we have a large number of
17 assisted living facilities that have been
18 a critical part of making life a little
19 better for our constituents there.

20 You are also going to hear from
21 Mr. Kerr, who also has the Inglis House.
22 But I want to thank you for the units
23 that you put there and increasing my
24 knowledge base on issues like
25 visitability and in our design of new

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2 housing, being able to have a situation
3 where doors are wide enough,
4 accessibility to bathrooms are such. And
5 I've had an opportunity to see how it
6 improves the quality of life of folk who
7 steps become mountains, traffic signals
8 become rivers where they have to run
9 across and speed across, and to take that
10 into account when we plan livable,
11 walkable cities.

12 So I want to thank you for
13 bringing this up and encourage you. I'm
14 going to pop in and pop back out to be a
15 part of this. So thank you very much,
16 Mr. Chairman.

17 COUNCILMAN O'BRIEN: Thank you,
18 Mr. Leader.

19 Laura Weinbaum, do you want to
20 state your name for the record and
21 proceed with your testimony.

22 MS. WEINBAUM: Sure. Good
23 morning. My name is Laura Weinbaum and I
24 am the Vice President for Public Affairs
25 and Strategic Initiatives at Project

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2 HOME, a housing and services provider
3 striving to end and prevent homelessness
4 in Philadelphia. Thank you for the
5 opportunity to offer remarks here today
6 on behalf of the Project HOME community
7 to address the need for housing for
8 people with disabilities and the
9 strategies that might meet that need. We
10 have three basic recommendations for
11 further consideration.

12 First, we believe we can
13 maximize our impact through transparency
14 and continued collaboration among the
15 City, including OHCD, OSH, DBH, and DHS,
16 together with the PHA and providers.

17 Second, we need to not only use
18 existing resources better, but to explore
19 models from other places to bring new
20 resources to bear for people with special
21 needs.

22 Finally, we need to address the
23 problems of behavioral health, including
24 both mental illness and addiction, by
25 pairing creative use of Medicaid with

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2 housing, healthcare, education, and
3 employment.

4 As you know, Philadelphia
5 continues to struggle with the
6 convergence of three issues. More than
7 one out of every four residents lives in
8 poverty, one in four live with
9 disabilities, and there's only one
10 affordable home available for every three
11 extremely poor households. The need for
12 affordable and permanent supportive
13 housing for people living on extremely
14 low incomes, like the 721 monthly SSI, is
15 as great as ever. The PHA waiting list
16 is estimated at ten years. The
17 Department of Behavioral Health can't
18 even maintain a wait list for people who
19 don't meet certain criteria because the
20 demand is overwhelming.

21 But at the same time,
22 Philadelphia has made tremendous strides
23 in providing housing to many of our most
24 vulnerable citizens. We have the lowest
25 per capita rate of street homelessness

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2 among major cities reporting their data
3 in the Point in Time count to HUD despite
4 high poverty. As a city we've
5 prioritized providing permanent housing,
6 the most effective tool for both
7 addressing and preventing homelessness
8 throughout our communities. Our work at
9 Project HOME and at providers across the
10 City is focused on an overall strategy
11 consistent with the federal plan to end
12 homelessness, ending veterans and chronic
13 homelessness by 2016 and homelessness
14 among children, families, and youth by
15 2020.

16 Strategies such as
17 public-private collaboration, targeting
18 resources, including coordinated
19 assessment, and non-duplication of
20 efforts are enabling us to serve more
21 people. In 2012, Project HOME, Bethesda
22 Project, Horizon House, and Pathways to
23 Housing formed a collaborative to
24 permanently house roughly 1,000 of the
25 most vulnerable persons living on our

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streets. Working with the City and the other providers and PHA, at the end of the last fiscal year, 411 from this target group were permanently housed and 200 more were staying indoors in non-permanent housing. This year we'll apply these strategies to ending and preventing homelessness among young adults and people with a primary diagnosis of addiction, many of whom also struggle with underlying psychological or developmental disability. It's our hope that we'll be able to meet these needs by creatively pairing Medicaid and health resources with rent subsidies and housing resources.

But even creative use of existing resources is not enough. We need to explore additional models for state and city investment in housing. Both the research done in 2005 for the City's ten-year plan to end homelessness and a report done for us by Feather Houstoun described -- and that report is

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described below -- provide examples of best practices from other places and insight into the multiple city, county, and state funding streams that go into these deals in other places across the country.

There is an important distinction to make here. Not everyone with a disability needs permanent supportive housing, only people whose vulnerabilities mean that they would welcome and benefit from additional supports. But for the group who is chronically street homeless and living with a special need, we have created a collaborative forecast of the number of new units, 754, that we believe is needed to address the needs of this group. To address this goal in addition to our existing 621 units, Project HOME is currently developing 94 units at 810 Arch Street and gearing up for 88 additional units at 2415 North Broad with vacancies prioritized for people experiencing

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chronic homelessness. Our partners too are developing or master-leasing additional new housing possibilities. Many of the units are for people in our target populations - veterans, people with serious mental illness, people who have experienced or are at risk of homelessness, homeless and at-risk young adults, people in recovery who are connected to employment, other vulnerable groups and residents from the community at large.

I would like to briefly address why we believe that investing in new larger-scale permanent supportive or mixed housing development makes sense. As indicated in research conducted for us by former Pennsylvania Welfare Secretary Feather Houstoun on the best practices in financing and management of permanent supportive housing, larger-scale projects maximize the use of tax credits, allow for better on-site staffing, and save development time. Houstoun's research

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indicated that the development of larger-scale projects is well suited to dense urban environments. Further, the larger number of units made it financially feasible to support 24-hour staffing, which residents and neighbors alike agree promotes a better environment. This scale is also what allows a real and significant impact on local neighborhood and commercial zones.

Similarly, research conducted for us by Econsult in 2007 and updated in 2011 indicates that properties within a quarter mile radius of Project HOME experience a boost to their property values of approximately \$24,000 more than comparable properties outside Project HOME areas, resulting in 10.6 million in additional property taxes to the City and the School District. We believe this is in part due to the positive presence of Project HOME facilities. We believe that our community engagement process plays a role in building the social fabric in the

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2 neighborhood, and we're confident that
3 interactions with community members in
4 the vicinity of permanent housing
5 developments strengthens the foundation
6 there. A similar study in New York
7 conducted by NYU over 18 years and
8 including 100 programs corroborated the
9 findings that real estate near permanent
10 supportive housing increases in value
11 more rapidly than in surrounding areas.

12 Looking ahead, we believe there
13 are three areas for focus: continued
14 work on the vulnerable street homeless
15 population, homelessness among young
16 adults, and people who are homeless by
17 virtue of addiction. Expanding our
18 street outreach services to Kensington
19 has shown us how vast the problems of
20 homelessness caused by addiction are in
21 our city, and our work with the City's
22 Homeless Death Review Team has shown that
23 this is truly a matter of life or death.
24 We believe that our best bet for
25 addressing addiction is pairing creative

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2 use of Medicaid with resources for
3 housing, healthcare, education, and
4 employment.

5 We appreciate your review and
6 consideration of this vital issue and
7 we're happy to answer any questions at
8 this time or in the future. We hope to
9 help Philadelphia create neighborhood
10 amenities that not only house the most
11 vulnerable Philadelphians, but contribute
12 to the quality of life for our whole
13 community, because none of us are home
14 until all of us are home.

15 Thank you.

16 COUNCILMAN O'BRIEN: Thank you
17 so much.

18 I would like to recognize my
19 good friend Estelle Richman, who is with
20 us today, and as I've talked to many
21 people who are going to testify here
22 today, she has tutored and educated and
23 empowered many of us in policymaking
24 roles and she has always taught me -- one
25 of the things that she's taught me is

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2 that housing is the basis for which
3 success for all other social services are
4 built, and if you don't have the housing,
5 then the rest of it does not follow.

6 I want to thank you for your
7 compelling and comprehensive testimony
8 today. It is inspiring. The substantive
9 nature of your testimony invites us all
10 to build on the inclusive, transparent,
11 and collaborative models that you are
12 articulating and that we also have to
13 look, as you pointed out, to increasing
14 the dollars in the Trust Fund and other
15 instruments that will build success.

16 I just have a couple questions,
17 one following up on your testimony, and
18 I'm going to do a little ADHD thing and
19 go off on the side, because
20 parenthetically I will ask how
21 individuals move off the waiting list.
22 And over the years I suspected that
23 sometimes there wasn't even a waiting
24 list, and if you requested it, then the
25 individual that you were inquiring about

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2 might move up on the list.

3 Unfortunately, there are many families
4 who are here today who are supportive of
5 their family members who need this
6 supportive housing, and often they get no
7 peace throughout their life because it's
8 not until both parents have passed away
9 that a permanent placement is available.

10 And I put myself in those parents'
11 positions that they don't know what it
12 is, and even when they're gone, they
13 can't be sure that it is ever supportive
14 in the ways that enables them to enjoy a
15 quality of life.

16 Having said that, do you,
17 Mr. Earle, want to comment on your
18 knowledge of the prioritization of that
19 list? Is it most in need? Is it the
20 order of waiting, the right match? Would
21 you shed some light on that?

22 MR. EARLE: Certainly. We
23 know, for example, with the intellectual
24 disability waiting list in Pennsylvania,
25 which is around 13,000 to 14,000

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2 individuals, that there are tiers or
3 levels of priority that are assisted to
4 help with those individuals move up on
5 the waiting list. Aging parents and
6 other emergency circumstances are certain
7 factors, certainly factors in that
8 process.

9 For Liberty Resources, the
10 waiting list that I mentioned, it's a
11 pretty basic waiting list. It's
12 approximately 110 individuals, several of
13 whom live in -- currently live in
14 Philadelphia Nursing Home or other
15 nursing homes throughout Philadelphia
16 County. So that priority, the fact of
17 where they're currently living, they're
18 living in an expensive and unnecessary
19 institutional setting, a nursing home,
20 and that makes them a priority for us and
21 our team to move them out.

22 We would like to see that level
23 of priority also adopted by the
24 Philadelphia Housing Authority, the
25 Office of Housing and Community

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2 Development, and the Office of Supportive
3 Housing headed up by Dainette Mintz,
4 because we know that HUD allows entities,
5 housing authorities, and other housing
6 organizations to count a person who lives
7 in a nursing home as being equal in
8 priority to a person who is homeless,
9 because when you live in a nursing home
10 or a nursing facility, many of us would
11 not consider that a permanent home,
12 especially for younger adults with
13 disabilities. So that is a priority that
14 we give our highest attention to and hope
15 that as we move forward with these
16 discussions, that various agencies in the
17 City can also do that.

18 COUNCILMAN O'BRIEN: Thank you.

19 I have a second follow-up
20 question. There are issues with linking
21 individuals who need accessible,
22 affordable housing units as they become
23 available. This has improved, but I
24 understand that only 70 percent of the
25 affordable, accessible units developed in

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2 Philadelphia are being filled with people
3 who need accessible housing.

4 In another program called ACAP
5 we have what's called an interest list,
6 and people can apply for the interest
7 list, and as part of that process, they
8 are evaluated as to issues that would
9 include them or exclude them based on the
10 criteria. And is the percentage, the 70
11 percent -- and I'm not holding to that;
12 it could be below that or above that. Is
13 there an issue of individuals who need
14 accessible housing not being on a ready
15 list to move in so that they can move
16 that percentage up towards 100 percent?

17 MR. EARLE: I would say that
18 the population that we're talking about
19 is underestimated. The 110 people that I
20 referenced are people who we know
21 firsthand who have expressed a desire to
22 move out of a nursing facility. We know
23 that the minimal data set that is
24 required to be kept by the Centers for
25 Medicaid and Medicare Services requires

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2 nursing facilities to specifically ask
3 individuals upon entry when they're
4 admitted to a nursing home if they are
5 interested in moving to a community-based
6 setting, and we suspect that that number
7 of folks who answer yes to that is much
8 higher than the small subset that we're
9 currently working with.

10 COUNCILMAN O'BRIEN: Okay.

11 Laura, NIMBY, not in my
12 backyard, I understand that you have
13 research that has indicated properties
14 within a quarter mile radius of Project
15 HOME facilities experience a significant,
16 significant boost in their property
17 values. Could you please talk about what
18 Project HOME has done to strengthen the
19 fabric of these neighborhoods?

20 MS. WEINBAUM: Sure. I think
21 what we -- Kevin Gillen, who did the
22 research for us at Econsult, would
23 chastise me if I didn't indicate that
24 it's associated with a higher property
25 value than the average increase within

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2 that exact zip code, but there's nothing
3 that says that it's causation
4 necessarily, right? So it's up to us to
5 explain where we think that that actually
6 comes from.

7 What I would say is when we go
8 into a neighborhood, the very first thing
9 we do now, having learned our lesson in
10 many ways the hard way over many, many
11 years, is to go and meet with and talk to
12 as many of the stakeholders in that
13 community as we can, individual
14 homeowners, business people, the
15 neighborhood groups, obviously the
16 elected representatives, and other folks
17 who represent those communities, and
18 start to hear a little bit of what are
19 the concerns, what do they feel are the
20 needs of the community, how can we make
21 this something that integrates well with
22 whatever is planned or is already going
23 on in the community. And I think --
24 sometimes those dialogues are not pretty,
25 but I do think that they create an

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2 opportunity for people to get together in
3 ways that they maybe haven't gotten
4 together before and to express some of
5 their concerns in a hopefully fairly open
6 and candid way and for us to begin to
7 think about how we can implement a model
8 that works for those neighborhoods. And
9 really that's why a couple years ago we
10 asked Feather Houstoun to do a little bit
11 more research for us and think about how
12 we could create and manage the best not
13 only place for vulnerable folks to live,
14 but something that would be a really
15 powerful neighborhood amenity.

16 COUNCILMAN O'BRIEN: Thank you
17 very much for your testimony.

18 MS. WEINBAUM: Thank you for
19 having us.

20 MR. EARLE: Thank you.

21 COUNCILMAN O'BRIEN: I would
22 like now to call up the second panel,
23 housing developers: Kelvin Jeremiah, who
24 is the President and CEO of the
25 Philadelphia Housing Authority; Gavin

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2 Kerr, the President and CEO of Inglis
3 House; and Mark Deitcher, who is the
4 Director of Business Development,
5 Commission First Housing.

6 (Witnesses approached witness
7 table.)

8 COUNCILMAN O'BRIEN:

9 Mr. Jeremiah, would you please identify
10 yourself for the record and proceed with
11 your testimony.

12 MR. JEREMIAH: Good morning,
13 Chairman O'Brien, Councilman Oh, and
14 members of the Committee on the Disabled
15 and Special Needs. I am Kelvin Jeremiah,
16 the President and CEO of the Philadelphia
17 Housing Authority, the fourth largest
18 housing authority in the United States,
19 serving over 80,000 low-income
20 Philadelphians. PHA owns and manages
21 over 14,000 housing units throughout the
22 City. We also administer the Section 8
23 Voucher Program, which serves an
24 additional 17,000 low-income households.

25 PHA is committed to providing

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2 affordable housing opportunities to the
3 City's most vulnerable populations,
4 including persons with disabilities.

5 There are nearly 2,500 occupied units
6 with reasonable accommodation features
7 within PHA's assisted housing portfolio.
8 The more than 100 wheelchair users on our
9 waiting list are being prioritized for
10 units.

11 As you know, Mr. Chairman,
12 Councilman Oh, there is an incredible and
13 increasing demand for affordable housing
14 in Philadelphia. With a low unit
15 turnaround rate that averages just over
16 400 units per year, applicants can expect
17 to be on the wait list for years, some as
18 much as a decade. However, PHA maintains
19 a separate wait list for wheelchair users
20 and persons requesting reasonable
21 accommodations, which tends to be
22 shorter. Only wheelchair users can
23 occupy PHA's wheelchair-accessible units.
24 PHA is also committed to offering
25 residents with disabilities reasonable

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accommodations, which includes making modifications to units to meet the specific medical or disability needs of the resident. Examples of such modifications may include stair lifts, strobe lights, automatic doors, ramps, and elevators.

Given the high demand for affordable housing, PHA has undertaken an incredibly ambitious development agenda to increase the number of affordable housing units in the City, including housing for persons with disabilities. As part of this effort, PHA currently has several new developments in the pipeline or under construction, including Oakdale and Gordon Streets in Strawberry Mansion and Queen's Row and Queen Lane in Germantown. When these developments are complete, PHA will have an additional 11 units that would meet the Uniform Federal Accessibility Standards and 504 requirements.

Consistent with federal

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2 regulations, new PHA developments will
3 contain, at a minimum, 5 to 10 percent
4 fully accessible units to give persons
5 with disabilities greater freedom to
6 choose where they live and to enjoy their
7 homes and the amenities PHA provides.

8 We currently run about a 10
9 percent rate for the developments that I
10 just mentioned.

11 Additionally, PHA has been a
12 part of the Nursing Home Transition
13 Initiative since 2006, receiving
14 referrals from a number of service
15 partners, some of whom are here today.
16 Since the initiative's inception, PHA has
17 successfully transitioned over 150
18 residents out of nursing homes back into
19 communities and homes of their choice,
20 which helps the state save money while
21 also affording residents with long-term
22 disabilities the opportunity to live
23 independently.

24 In order to increase the number
25 of affordable housing units for persons

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2 with disabilities, PHA has also awarded
3 project-based vouchers and operating
4 subsidies to organizations and developers
5 who share our mission, like Liberty
6 Resources, 1260 Housing, and Inglis
7 House. To date, PHA has designated over
8 245 project-based vouchers for persons
9 with disabilities, which we expect to
10 increase in the near future based on
11 funding availability. Our partners have
12 also been instrumental in assisting the
13 authority as we continue to outreach to
14 persons with disabilities.

15 Mr. Chairman, make no mistake
16 about it, PHA cannot address the
17 affordable housing crisis and the housing
18 needs of persons with disabilities alone.
19 That is why I believe that partnerships,
20 the partnerships we have established and
21 continue to build upon, are so crucial.
22 Indeed, the issue of affordable,
23 accessible housing requires coordination
24 across agencies and disciplines. It does
25 not stop at housing. Oftentimes persons

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2 with disabilities require services, case
3 management, and accommodations so they
4 can live independently.

5 We must work collaboratively
6 with advocacy groups and community
7 organizations to affirmatively further
8 the U.S. Department of Housing and Urban
9 Development's Fair Housing Initiative.

10 It is not enough just to provide housing
11 or identify impediments. We need to take
12 affirmative steps to eradicate those
13 barriers, increase housing opportunities,
14 and to be more proactive in housing
15 persons with disabilities.

16 Certainly one area of concern
17 is the availability of safe, decent, and
18 affordable, accessible housing in the
19 City. PHA knows from experience that it
20 is particularly difficult for voucher
21 holders to find wheelchair-accessible
22 housing that meets their needs in the
23 private market. That is why PHA gives
24 private landlords an increased payment
25 standard for accessible units up to 110

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2 percent of the fair market rent if the
3 unit's calculated rent comes in higher
4 than the regular fair market rent. This
5 allows PHA to pay a larger portion of the
6 tenant's rent while ensuring that the
7 unit remains affordable to the tenant,
8 many of whom are on fixed incomes.

9 Before we can offer the
10 increase in payment standard, the unit
11 must be inspected by a 504 inspector and
12 verified that it meets the qualifications
13 of an accessible unit. The higher rent
14 incentive is provided only if the tenant
15 requires an accessible unit. We need
16 more incentives to include accommodations
17 and other features that persons with
18 disabilities need. We would also benefit
19 from regulations that include a
20 philanthropic requirement for developers
21 to provide more affordable and accessible
22 housing opportunities in the City.

23 We need, Mr. Chairman, more
24 incentives and more funding right here in
25 the City for affordable housing,

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2 especially, as I said, for those who are
3 disabled.

4 I want to thank you for giving
5 me the opportunity to speak on this
6 important topic, and I look forward to
7 working with you to address this
8 important issue. I'm happy to answer any
9 questions the members might have.

10 COUNCILMAN O'BRIEN: Thank you,
11 Mr. Jeremiah.

12 Mr. Kerr, would you please
13 identify yourself for the record and
14 proceed with your testimony.

15 MR. KERR: Hi. I'm Gavin Kerr.
16 I'm the President and CEO of the Inglis
17 Foundation. I appreciate you having this
18 hearing and want to just reinforce what a
19 lot of people have said, which is this is
20 more than an Olmstead issue. This is a
21 very human issue.

22 Inglis serves about 1,000
23 people who are significantly physically
24 disabled and are wheelchair users.
25 They're people who are just like you and

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2 me, but because of bad genes, bad luck, a
3 bad accident or a difficult birth wind up
4 facing challenges that we can only begin
5 to imagine.

6 Our commitment as an
7 organization is to really enabling them
8 to achieve their goals and live life to
9 the fullest. A key part of that is to
10 have a home of your own.

11 Inglis Housing has worked since
12 1976 to develop housing for people who
13 are disabled and use wheelchairs. We
14 currently offer 292 people home in 259
15 apartments throughout the region. We
16 provide also competent housing management
17 and supports to enable them to live
18 effectively in the community, and with
19 additional resources then, most
20 developers would provide to allow that to
21 occur.

22 Unfortunately, safe,
23 accessible, and affordable housing is
24 very difficult to find. Our housing
25 organization has 192 people on our wait

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2 list. That translates into over five
3 years of time for people to wait. So we
4 can't just sit and wait for people to
5 move into apartments that rarely turn
6 over. We've invested about \$9.1 million
7 of Inglis resources in developing 142
8 additional homes, of which 52 are set
9 aside for people living with physical
10 disabilities.

11 In September, we opened Mission
12 Green, which was a partnership with the
13 Medical Mission Sisters and Roy Diamond's
14 organization to provide 62 absolutely
15 gorgeous, tax credit, affordable 55 and
16 older apartments in Fox Chase -- in
17 Abington on the Fox Chase border. We
18 thank you for your support in doing that.
19 This is just an amazing place for people
20 to live, of which 15 of the residents are
21 young people who are physically disabled
22 who are wheelchair users.

23 Last month, with the
24 partnership with PHFA and PHA, we were
25 able to break ground on our Inglis

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Gardens at Belmont. It will be an 80-unit, fully integrated community, 40 units for people who need our accessibility-plus apartments and our wheelchair users and 40 people from the community who are low-income earners.

We're deeply thankful to Councilman Curtis Jones and the encouragement of really all of Council in helping get this project off the ground. Without the support of really the whole community, these projects never ever come to life.

We need, as we look to the future, to create even more homes to allow people to live independently. There are five key trends that have driven this direction, many of which have been talked about already:

Twenty-five years ago, the accessible -- or the Americans with Disabilities Act, which then was advanced further through the Olmstead Supreme Court case;

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The ability of our society to help people with traumatic injuries and significant disabilities to live longer and to live better is driving up the need for affordable, accessible homes. In the period between 2000 and 2010, the population of people with disabilities grew by 8 percent as a result of the capabilities of the healthcare system to allow that to occur;

Fourth, the support for wounded veterans from Iraq and Afghanistan conflicts has brought new resources and new innovations to being able to help people live at home;

And then, finally, policy and funding changes that are really encouraging integrated communities is transforming the way that we're developing our housing in many, many great ways, but unfortunately it also means that you need far more capital. To build an apartment complex to serve 25 people with disabilities requires a

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2 community of 100. And so that requires a
3 huge amount of capital that we can't do
4 alone. So we know we need to be partners
5 and find great partners to do that.

6 To build a community for the
7 people that we serve, we believe there
8 are five absolutely critical criteria.
9 First, the neighborhood has to be safe
10 with fully accessible infrastructures,
11 transportation, and welcoming
12 communities. Our neighborhood in the
13 Inglis House community has been
14 phenomenal in welcoming our people, but
15 there are many other neighborhoods in the
16 community that can meet those criteria.

17 We need to have low-cost land
18 acquisition, because the resources for
19 building homes is -- the capital
20 resources are limited.

21 We need low-cost capital for
22 property development, which comes
23 primarily through tax credits and
24 contributions of our donors; rental
25 vouchers to assist with the subsidy of

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2 rents. Our average tenant pays about
3 \$150 per month for an average rent of
4 about \$1,000. And then, finally,
5 disability-competent supportive services
6 and housing management that really
7 understands the special needs of this
8 community and can really encourage them
9 in maintaining their independence.

10 We're currently partnering with
11 Conifer Development to redevelop the
12 convent at Nazareth Hospital in Northeast
13 Philadelphia. That property will have 12
14 units that are set aside with our
15 accessibility-plus criteria out of 44
16 total units.

17 We found that in order to
18 develop housing even with the tax credits
19 and other funding resources, it requires
20 an additional investment of Inglis
21 capital in developing those properties.
22 We are blessed that the people who came
23 before us created an endowment and that
24 we have many donors who support our work,
25 but we can't continue to invest \$9

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2 million in 62 units for people with
3 disabilities. So we've got to find new
4 capital sources and new vehicles.

5 We're currently working with
6 Pennsylvania -- with the Commonwealth as
7 well as with others in the development
8 community to look at social impact bonds
9 as one additional resource for developing
10 creative pay-for-performance capital
11 sources so that we can expand our
12 development activities.

13 Finally, housing is the most
14 important, most fundamental, but only one
15 criteria for living successfully in the
16 community. As we look to move people
17 from nursing homes like the Philadelphia
18 Nursing Home into the community, first
19 they need a home, but then they need a
20 support system. And to live
21 independently in the community, you need
22 to get access to integrated, affordable,
23 accessible care that's disability
24 competent so that your healthcare needs
25 are met and that you're kept well and out

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2 of the hospital and out of nursing homes.

3 Secondly, you need to have
4 dependable, consistent, consumer-driven
5 attendant care services, which are
6 difficult and far and few between. The
7 resources for those benefits are very
8 limited by the state, and the people who
9 are doing them are paid relatively low
10 amounts of income and need to be able to
11 provide the best, most safest care in the
12 most private and vulnerable situations.

13 Third, you need to be able to
14 be engaged in the community. Living in a
15 house by yourself, but not being a part
16 of the community is a disability in its
17 own right. And we think that technology
18 is another resource that can really drive
19 that book into terms of environmental
20 controls, adaptive computing and other
21 ways to connect people into the broader
22 world even if they can't get there in
23 their wheelchair.

24 So we are very, very
25 appreciative of the opportunity to be

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2 here and to share our absolute commitment
3 to the people we serve and many of you
4 all in this room serve and to do
5 everything we can to help the City and
6 the state to develop more housing to meet
7 those needs. We see ourselves as a
8 partner. We're not a sole developer.
9 And so whatever we can bring to the
10 table, just call us.

11 COUNCILMAN O'BRIEN: Thank you
12 so much.

13 Mr. Deitcher. Did I say
14 that --

15 MR. DEITCHER: Deitcher.

16 COUNCILMAN O'BRIEN: Thank you.
17 Could you then please identify yourself
18 for the record and proceed with your
19 testimony.

20 MR. DEITCHER: Good morning,
21 Chairman O'Brien, Councilman Oh, and
22 members of the Disabled and Special Needs
23 Committee. My name is Mark Deitcher and
24 I'm the Director of Business Development
25 for Mission First Housing Group, a

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2 non-profit organization whose mission is
3 to develop and manage affordable, safe,
4 and sustainable homes for people in need,
5 with a focus on the vulnerable. We
6 ensure our residents have access to
7 resources to help them live
8 independently. We deliver housing that
9 provides long-term benefits to residents
10 and neighborhoods alike.

11 Mission First Housing Group was
12 founded in Philadelphia in 1988 as a
13 joint venture between the City of
14 Philadelphia, the U.S. Department of
15 Housing and Urban Development, and the
16 Robert Wood Johnson Foundation. Known at
17 the time as 1260 Housing Development
18 Corporation, our original mission was to
19 meet the housing needs of adults living
20 with serious mental illness. This
21 population was slipping through the
22 cracks and the need was large and complex
23 enough that it required a comprehensive,
24 coordinated response.

25 Mission First's story begins

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with our first resident, Mary, a woman who came to us after living in the shelter system and then unsuccessfully moving from one affordable apartment to another. In 1989, Mary moved into a Mission First property, a South Philadelphia duplex where she lived as one of our residents for the next 22 years.

In our first year of operation, Mission First provided housing for 32 consumers of the behavioral health system. Today in Philadelphia more than 1,100 of our 1,900 residents are adults living with serious mental illness.

Here are some of the factors that contribute to our ability to successfully house this vulnerable population:

From the beginning, Mission First approached the issue as an affordable housing problem. It just happened that the population we were serving was one that was living with

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2 serious mental illness. Our goal was to
3 find safe, affordable housing for these
4 individuals throughout the City. It was
5 critical that they not be warehoused in
6 the City's poorest and most
7 underresourced neighborhoods. Today you
8 will find our residents living in
9 neighborhoods throughout Philadelphia,
10 including University City, in Center City
11 just off Broad Street, near Rittenhouse
12 Square, and Northeast Philadelphia.

13 Leveraging Mission First's
14 start-up funding was critical. Rather
15 than be limited by the number of units we
16 could purchase with our start-up funding,
17 Mission First used this initial
18 investment to leverage additional
19 dollars, more than \$191 million on behalf
20 of behavioral health consumers in
21 Philadelphia. This includes 112 million
22 for development, almost \$23 million in
23 services, and nearly \$56 million in
24 rental subsidies. The Low Income Housing
25 Tax Credit was a key tool that we used to

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finance development. Our sources also included Federal Home Loan Bank Affordable Housing Program funds, HUD funding including Supportive Housing Program, Shelter Plus Care, Section 811 program, Energy Innovation funds, and Philadelphia Housing Authority project-based vouchers, among others.

We take a flexibility approach to development and management so that we can prioritize the needs of our residents. For example, in addition to new construction or acquiring and rehabilitating properties, Mission First also master-leases units, a process wherein we rent units from landlords in the community, then sublease them to our residents while serving as the management agent for these properties. This model gives us the flexibility to quickly provide housing to individuals in need in the communities where they want to live. Today we provide housing for adults living with serious mental illness in 721

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2 units that Mission First owns and 420
3 additional units that we master-lease in
4 the City.

5 And as everyone has said
6 before, collaboration is essential, and
7 Mission First has a great partner in the
8 City's Department of Behavioral Health.
9 In our early years, we worked very
10 closely with Estelle Richman, whose
11 leadership led Philadelphia to become an
12 early innovator in the provision of
13 supportive housing for individuals living
14 with mental illness. The City's decision
15 to separate housing and services allowed
16 organizations like Mission First to focus
17 on what we did best, develop and manage
18 housing, while partnering with other
19 organizations that had the service
20 expertise.

21 We have also drawn upon our
22 successes at providing housing for a
23 particularly vulnerable population to
24 serve others in need, including veterans,
25 survivors of domestic violence, seniors,

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and families. Today across our Mid-Atlantic footprint, Mission First provides safe, affordable, sustainable homes to almost 4,000 people in nearly 3,100 units. At the same time, we maintain our commitment to the individuals we were founded to serve and we work diligently with Philadelphia's Department of Behavioral Health to provide permanent supportive housing for more than 1,100 individuals.

We will continue to develop and refine our model to meet the needs of those we serve in an ever-changing political and financial environment. This includes advocating for the critical resources that fund our work. When we developed our first tax credit property in Philadelphia in 1997, there was not as much competition for affordable housing dollars. Today, as I'm sure PHA will testify, the 9 percent Low Income Housing Tax Credit, a subsidy that covers 70 to 90 percent of development costs, is an

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2 extremely competitive funding source, and
3 relying on these dollars means that
4 important projects take much longer to
5 fund.

6 Alternative resources like the
7 4 percent tax credit could play a much
8 greater role in helping to fund
9 affordable housing in Philadelphia. Yet
10 the 4 percent credit covers only about
11 one-third of the development costs of a
12 typical affordable housing project. In
13 order to bring this and other important
14 resources to spur the development of
15 affordable housing, the City of
16 Philadelphia will need to think
17 differently about how to help fund these
18 important projects. This is especially
19 important as we know that permanent
20 supportive housing is a cost-effective
21 intervention for supporting the most
22 vulnerable in our community. Moreover,
23 it's an intervention that promotes
24 increased quality of life for those in
25 need. We hope that Mission First can be

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2 an ongoing resource to the City as it
3 tackles this important issue.

4 Councilman O'Brien, thank you
5 for inviting Mission First to provide
6 this testimony today and for the work
7 you're doing on behalf of individuals and
8 families with special needs. I am happy
9 to answer any questions you may have
10 about Mission First's statement.

11 COUNCILMAN O'BRIEN: Thank you,
12 Mr. Deitcher.

13 Kelvin, thank you for
14 testifying today and your efforts at PHA
15 to serve Philadelphians in need of
16 affordable, accessible housing. It's
17 clear that you have a difficult task
18 given the demand far outweighs the
19 supply.

20 You mentioned that PHA
21 maintains a waiting list for wheelchair
22 users. Do you have data on the number of
23 individuals with disabilities on your
24 waiting list and what disabilities these
25 individuals have?

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2 MR. JEREMIAH: Yes, Councilman
3 O'Brien. There are just over 100 people
4 on the wait list waiting for
5 wheelchair-accessible units. All told,
6 there is 177 people who have requested
7 reasonable accommodation in one form or
8 another, and that ranged the gamut. It
9 could be for grab bars, for ramps, for
10 elevator lifts, et cetera.

11 COUNCILMAN O'BRIEN: Thank you.

12 What do you think an ideal PHA
13 partnership to house people homeless and
14 not with disabilities would look like,
15 and are there models out there that you
16 think Philadelphia should be utilizing?

17 MR. JEREMIAH: Great question.
18 First, I think the City Council has taken
19 a good first step late last year when the
20 Council President announced the City's
21 Affordable Housing Initiative that is to
22 bring some 2,000 or so homes, affordable
23 homes, to the City and a commitment --
24 that would require a commitment on the
25 part of the City of actual dollars.

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2 Unlike most cities, we haven't
3 yet seen the kind of investment by the
4 municipality, by the City, in affordable
5 housing. As you know, 93 percent of our
6 budget comes from the federal government.
7 It would be nice if the City were to
8 contribute some portion of dollars to
9 expand and increase affordable housing
10 opportunities more broadly for
11 Philadelphians.

12 You know as well as I do that
13 we are one of the poorest cities in the
14 country. We have at PHA over 100,000,
15 100,000 families currently waiting on our
16 combined waiting lists for housing, for
17 affordable housing. Mr. Chairman, it
18 takes those families -- it could take
19 those families up to ten years, because
20 we only have 432 units that become
21 available annually. We will never be
22 able to meet that demand. And so despite
23 our best efforts, I think one of the
24 things that we're doing is partnering
25 with folks like Mission First and Inglis

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2 House to provide housing for what we're
3 calling special populations because of
4 the incredible need that they have, the
5 incredible demand for housing that
6 exists, and I think the City and,
7 frankly, the state should play a more
8 active role in funding those types of
9 programs.

10 COUNCILMAN O'BRIEN: Those
11 numbers are staggering.

12 We've heard terms like federal
13 Section 504, ADA, FHA. Is PHA in
14 compliance with the requirements for
15 accessible housing for individuals with
16 disabilities?

17 MR. JEREMIAH: Yes, I would
18 like to think so.

19 COUNCILMAN O'BRIEN: Okay.
20 There might be some --

21 MR. JEREMIAH: That's a trick
22 question.

23 COUNCILMAN O'BRIEN: -- people
24 that view that differently.

25 MR. JEREMIAH: I believe that

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2 we are in fact in compliance. We have a
3 number of families who have made requests
4 for reasonable accommodation that we are
5 working with, but as you can imagine,
6 while we have identified the need,
7 identifying the housing is next, and
8 without available vacant units to house
9 families, we find that sometimes it takes
10 a little bit longer than we would like to
11 house families with disabilities.

12 COUNCILMAN O'BRIEN: Thank you,
13 Kelvin.

14 Gavin, it's wonderful to see
15 Inglis, which has historically served as
16 a nursing facility, diversify its
17 programs to include expanded
18 community-based housing options for
19 individuals with disabilities. All the
20 housing developments you've discussed
21 have included mixed use, units for people
22 with and without disabilities. Will this
23 be your approach as you undertake new
24 development projects for individuals with
25 disabilities?

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2 MR. KERR: Yeah, absolutely.

3 COUNCILMAN O'BRIEN: And do you
4 think Inglis Community LIFE could serve
5 as a model for other disability
6 populations?

7 MR. KERR: We do. I think our
8 goal with our housing is to create
9 opportunity for people to live in the
10 community and then with Inglis Community
11 LIFE to create the integrated delivery
12 system to support them in the community
13 and is very adaptable to all sorts of
14 disabilities. We just happened to be
15 competent in working with people with
16 significant physical disabilities and are
17 happy to share everything we're doing in
18 the pilots with other people throughout
19 the area.

20 COUNCILMAN O'BRIEN: We'd love
21 to explore those opportunities, and I'm
22 very impressed with what you're doing at
23 the Medical Mission Sisters and I'm
24 looking forward to the Nazareth Convent
25 development as it moves forward.

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2 Mark, I think Mission First
3 Housing serves as a model in several
4 ways, your ability to successfully
5 leverage private dollars, develop
6 strategic partnerships and ensure
7 individuals with disabilities are not
8 isolated into forced pockets of
9 Philadelphia. Given we're clearly
10 underresourced to meet the needs of
11 Philadelphians living with disabilities,
12 do you have any thoughts as to how we may
13 once again leverage private dollars,
14 similar to how you did with Robert Wood
15 Johnson funding?

16 MR. DEITCHER: Sure. I think
17 that's a great question. I think that
18 one of the things that Kelvin brought up
19 is I think that in general, I think if
20 the City speaks with a collective voice
21 in terms of funding and in terms of
22 capital operating resources, I think we
23 have a much greater case to leverage
24 other dollars in terms of philanthropic
25 dollars and the like.

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2 The one thing that is very
3 clear to me, though, is in just talking
4 to people in the philanthropic community,
5 housing is not generally a hot topic in
6 the foundation world today. I think that
7 the special needs housing could be, and I
8 think that angle could be a way to go
9 after other dollars. And I think that
10 putting together a few pieces I've heard
11 today, having priorities in funding
12 rounds for different disabilities in
13 terms of -- and then maybe bringing
14 private resources to the table I think
15 would encourage developers to work to try
16 to solve this problem, you know. But
17 it's a three-legged stool. It's
18 development, it's operating dollars, and
19 it's services, and you really need all
20 three, and there's just not enough
21 affordable housing in the City right now.

22 COUNCILMAN O'BRIEN: I was
23 fixated on Kelvin's statement on
24 philanthropic incentives, and perhaps we
25 could put a work group together around

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2 the criteria that you have testified here
3 today and perhaps how we can build a
4 better collaborative, and I would like
5 Katy to reach out to you so that we can
6 move this conversation informally
7 forward. So thank you for your
8 testimony.

9 Councilman Oh, do you have any
10 questions?

11 COUNCILMAN OH: I do. Thank
12 you very much.

13 So I had a meeting at Drexel
14 University about a month ago with
15 officials from Seoul, the city of Seoul,
16 and they were there meeting with IBM
17 around smart aging, smart cities, smart
18 housing. And so they are proceeding
19 forward with smart housing, smart aging,
20 which is pretty much I think a high-tech
21 model of independent living. So people
22 are shaking their heads, so they know
23 what I'm talking about. And so the city
24 of Seoul has a \$200 million investment
25 fund on that project alone. So you could

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2 imagine our city with its paltry \$3
3 million to a tech startup versus a city
4 with \$200 million in that singular
5 project.

6 Now, I've been to Songdo City
7 in Incheon, which is a \$52 billion
8 development of high-tech, green, top of
9 the line, everything. So when they're
10 building the houses, they're integrating
11 into the construction of the building all
12 the technology, all the sensors that
13 turns off -- for people with Alzheimer's,
14 it will turn off the heat if someone left
15 a pot boiling and all that. So all the
16 technology is built into it, adjust the
17 temperatures, whatnot. And as far as I
18 know, it also includes like the solar and
19 all the things to put the energy back on
20 the grid, composting, things like that.

21 So a portion of how the funding
22 of that is being done it appears is that
23 a portion of the expense of the high-tech
24 building of these things and the sensors
25 are offset by the technology that is

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2 brought into it, because I guess it's
3 much like my phone, I get it for a cheap
4 cost or free, but I got to pay for the
5 service depending on how much I use. And
6 the thing that we lack in Philadelphia,
7 by the way, is, we don't have an overseas
8 investment fund for folks that are
9 comfortable with this type of investment.
10 We are trying to develop that currently
11 with an international trading investment
12 authority or commission, that that is
13 going to probably be a Charter change
14 issue that we bring forward for the
15 purposes of trying to get this money in
16 that will more readily then here locally
17 fund housing, which is not really
18 identified as housing for independent
19 living, persons with disabilities, but is
20 just housing, smart housing. And I
21 wonder your thoughts on that, as you're
22 probably just a lot more familiar with
23 this whole thing than I am, is what the
24 future trend and what are the
25 possibilities here in Philadelphia to

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2 actually see a model project of some sort
3 to move forward?

4 MR. KERR: So we are very
5 committed to leveraging technology for a
6 lot of people to live independently and
7 more cost effectively. There are sort
8 four key technologies. First is mobility
9 technologies, which are incredible in
10 terms of opening people's lives for them.
11 The second is home environmental controls
12 and using a variety of door openers,
13 window openers, a variety of things like
14 you can get in your own home now. And
15 some of that is -- there is funding for
16 some of that on an individual basis.

17 The third is Internet or
18 communication technologies that allow
19 people to engage in the world, which are
20 really, really important, as well as the
21 fourth, opportunities for telehealth and
22 other health monitoring technologies.

23 We're partnering with Comcast
24 currently to develop a lab within our
25 adaptive computing center to really test

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2 some technologies with people who have
3 various needs. So much of their
4 technology is currently built around
5 voice response technology, and so we're
6 trying to figure out how do we leverage
7 that technology to then control all the
8 home modifications and the Internet
9 capabilities.

10 The other piece of it is, as we
11 build Belmont, we're building Belmont to
12 be completely wired. So whatever your
13 particular needs are, you have the feed
14 into your apartment so that you can then
15 tap into the Internet capabilities,
16 whether it's for the Internet of things
17 or the human Internet. We're also
18 building that as a solar building, so
19 that we're substituting solar power in
20 order to fund and support some of those
21 activities.

22 The big challenge is, first,
23 there's no capital resources for doing
24 that or reimbursement for any of that.
25 So we're in the process of fundraising to

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2 try to enable that. We do have a
3 generous grant from the Hess Foundation
4 that's helping us with that.

5 Secondly, the operating costs,
6 because they're independent living
7 apartments, are covered by the individual
8 living in that apartment. Most of the
9 people that we serve are receiving Social
10 Security Income because they have to, and
11 people who become physically disabled,
12 their income drops by 79 percent within
13 ten years of their disabling event. So
14 when it comes to paying the Comcast bill,
15 that becomes a huge barrier, because at
16 19.95 per month when you're living on
17 \$800 per month, it's a big undertaking.

18 So part of this is figuring out
19 what vehicles can we get to subsidize
20 some of those access fees for Internet,
21 whether it's Verizon or Comcast or some
22 other vehicle, so that people with
23 disabilities can take advantage of those
24 technologies.

25 COUNCILMAN OH: So I understood

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2 from my discussions with them and with
3 some folks in Singapore and some other
4 places around smart cities that with the
5 use of sensors and with the medical data
6 and all that information, they can pretty
7 much follow, for example, the eating
8 habits, the sleeping habits, and they're
9 saying like you're at risk of having a
10 heart attack, you're at risk of having a
11 medical emergency, and they do earlier
12 intervention, such that what they're
13 really saying is we're saving money. All
14 of this smart aging, smart technology,
15 smart health is that the information is
16 fed back whereby it is actually reducing
17 the cost of medical services and other
18 things.

19 Is that -- they have some
20 pretty elaborate information to deal
21 with. Do we have anything like that?

22 MR. KERR: It's real. Yeah.
23 It's definitely real, but it's still
24 relatively untested. But part of the
25 model we're trying to develop with the

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2 Community LIFE program is to enable those
3 kinds of technologies to be used. And it
4 doesn't have to be fancy. Wounds are a
5 huge issue for people who use
6 wheelchairs. Being able to take a photo
7 with a smartphone and send it
8 automatically to your caregiver can allow
9 early intervention that can avoid
10 hospitalization and horrible trauma for
11 an individual. So it doesn't have to be
12 extraordinarily high tech, but it just
13 needs to be smart application.

14 The other part of the
15 conversation, though, is also
16 independence and privacy. And so if I'm
17 a 43-year-old person with MS, I may not
18 want to have the kinds of technologies
19 that they're talking about in Korea
20 monitoring me to that extent and still
21 maintain my independence as an adult.

22 COUNCILMAN OH: Yes. That is
23 one of the issues that arises, a cultural
24 issue, and they have gotten past that in
25 Singapore and in Korea and maybe not here

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2 in the U.S.

3 MR. KERR: Very difficult.

4 COUNCILMAN OH: But pretty much

5 like the HIPAA laws and other things.

6 But anyway, thank you very much. I'm

7 quite interested to see where we are, but

8 if there was some legislation that the

9 City could do, there was some talk about

10 tax credits or incentives, but ultimately

11 it just seems like a much bigger

12 governmental policy issue, state and

13 federal government. But certainly what

14 the City could do -- our financial state

15 is not a big secret. It's a big problem

16 in the City. But bringing in new dollars

17 to direct towards investment in

18 technology around housing or new types of

19 housing might be something that is

20 promising in the future.

21 MR. KERR: I'd love to have a

22 chance to sit and talk that through with

23 you and explore ways that we can do that.

24 I think there are sources of technology

25 and resources to support it, but we just

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2 have to work together. And I think the
3 City is a huge voice. Even though you
4 don't have a lot of resources, having you
5 be a voice in advocating for that really
6 gives credibility when you're talking to
7 investors.

8 COUNCILMAN OH: Thank you very
9 much.

10 COUNCILMAN O'BRIEN: Thank you
11 for your testimony.

12 (Thank you.)

13 COUNCILMAN O'BRIEN: I'd like
14 to invite Panel 3: Deborah McColloch,
15 the Director of the Office of Housing and
16 Community Development; Holly Glauser,
17 Director of Development, Pennsylvania
18 Housing Finance Agency; and Jane Vincent,
19 Mid-Atlantic Regional Administrator,
20 United States Department of Housing and
21 Urban Development, come forward.

22 (Witnesses approached witness
23 table.)

24 COUNCILMAN O'BRIEN:
25 Ms. McColloch, you can state your name

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2 for the record and begin your testimony
3 when you're ready.

4 MS. MCCOLLOCH: Sure. Good
5 morning, Councilman O'Brien and members
6 of the Disabled and Special Needs
7 Committee and members of Council. I am
8 Deborah McColloch, the Director of
9 Housing, and I'm here today to present
10 testimony on behalf of the Office of
11 Housing and Community Development.

12 OHCD is the City's housing
13 policy agency and is responsible for
14 funding housing and community development
15 programs that benefit low- and
16 moderate-income residents and revitalize
17 the City's neighborhoods. OHCD
18 administers the City's housing budget,
19 which is funded primarily from the U.S.
20 Department of Housing and Urban
21 Development, HUD, of approximately \$61
22 million, with additional resources from
23 the Commonwealth of Pennsylvania,
24 approximately \$3 million, the Housing
25 Trust Fund that was mentioned earlier

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today, this year that's about \$13 million, and the City's General Fund, about \$3 million. The funds that OHCD receives expand Philadelphia's ability to have stable, quality, affordable, and accessible housing.

OHCD has a longstanding commitment to support housing and housing services for Philadelphians with disabilities or special needs. OHCD's development policies reflect this over 20-year commitment.

Each and every new construction development, either rental or homeownership, that OHCD funds is required to make 10 percent of the units accessible to people with physical disabilities and 4 percent of the units accessible to those with hearing and vision needs. This requirement also applies to developers that receive the Low Income Housing Tax Credits from the Commonwealth.

Each of the developments that

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OHCD funds must market the accessible units to people with disabilities for 30 days via the News on Tap website prior to marketing to the general public.

OHCD requires all new construction developments to include visitability design features to the extent they are feasible. Visitability features include at least one no-step entrance, all doors at least 32 inches wide, and hallways and other room entrances at least 36 inches wide. These features enable people with physical disabilities to visit friends and family who live in these homes.

In addition to these policies, I would also like to highlight some of OHCD's key programs and partnerships and developments that specifically address the housing needs of the disabled and special needs citizens.

OHCD funds the Philadelphia Housing Development Corporation's Adaptive Modifications Program, known as

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2 AMP. This year the funding amount is
3 \$1.65 million, funded primarily with
4 Housing Trust Fund earnings. AMP is
5 designed to help individuals with
6 permanent physical disabilities live more
7 independently in their homes. It
8 provides free adaptations to a home or an
9 apartment, allowing easier access to and
10 mobility within the home. A homeowner or
11 renter can receive kitchen and bathroom
12 modifications, stairways, elevators,
13 barrier-free showers, widened doorways,
14 and other services. Since 2007, AMP has
15 provided increased accessibility and
16 mobility for more than 1,900 Philadelphia
17 households.

18 Philadelphia is fortunate to
19 have many dedicated organizations that
20 develop housing for people with
21 disabilities and special needs. OHCD has
22 supported Liberty Resources to develop
23 accessible housing across the City,
24 including the Northeast, West
25 Philadelphia, and Center City. OHCD has

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2 worked with Autism Living and Working to
3 produce quality, safe, and affordable
4 units for those living with autism. OHCD
5 has worked with Mission First, as Mark
6 testified, to develop supportive
7 independent living units throughout the
8 City.

9 Since 2007, OHCD has supported
10 more than 2,500 units of housing for
11 those with special needs, and of that,
12 more than 500 units addressed mobility
13 needs and 106 units were accessible for
14 those with hearing and vision
15 impairments.

16 The need to produce quality,
17 affordable, and accessible housing is
18 great, but it far outstrips the resources
19 available. For example, the Adaptive
20 Modifications Program has a waiting list
21 of over 500 applicants. Since 2007,
22 OHCD's federal and state funding has been
23 reduced by 30 percent or nearly \$35
24 million annually. Because of this
25 reduction in funding, the ability to

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2 produce more housing and expand programs
3 that address the needs of the disabled
4 and special needs residents is severely
5 limited.

6 Thank you for the opportunity
7 to present this testimony. I'm happy to
8 answer any questions.

9 COUNCILMAN O'BRIEN: Holly,
10 would you like to state your name for the
11 record and begin your testimony when
12 you're ready.

13 MS. GLAUSER: Absolutely. Good
14 morning, Chairman O'Brien and members of
15 the Committee on Disabled and Special
16 Needs, and thank you for the invitation
17 as well to meet with you this morning and
18 provide a brief overview of Pennsylvania
19 Housing Finance Agency's programs and
20 initiatives.

21 I'm Holly Glauser, Director of
22 Development of PHFA. In my remarks today
23 I'll be highlighting PHFA's programs that
24 focus on rental housing opportunities for
25 persons with disabilities and special

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2 needs through the federal Low Income
3 Housing Tax Credit program, and I believe
4 it was mentioned numerous times already
5 this morning, as well as other agency
6 financing products and special
7 initiatives.

8 As background, I want to
9 provide a bit of context for these
10 comments. The Pennsylvania Housing
11 Finance Agency works to provide
12 affordable homeownership and rental
13 housing options for older adults, low-
14 and moderate-income families, and people
15 with special needs. PHFA helps promote
16 community and economic development across
17 the state and, since its creation in
18 1972, has generated nearly \$12 billion of
19 funding for more than 157,000
20 single-family mortgage loans, helped fund
21 the construction of 123,000 rental units,
22 and saved homes for more than 48,000
23 families from foreclosure.

24 Today, the primary vehicle for
25 funding affordable rental housing for

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2 low-income individuals and families in
3 the country and the Commonwealth is the
4 Low Income Housing Tax Credit program.
5 Part of the success of the program is its
6 ability to leverage other federal, state,
7 and local resources, again mentioned a
8 number of times this morning, for the new
9 construction and preservation of vital
10 housing stock for low-income individuals
11 and families, with obviously a number of
12 them targeting formerly homeless or
13 persons with special needs. Since
14 program inception, over 85,000 units in
15 Pennsylvania have been developed with
16 over 29,000 of them in Philadelphia.

17 So look at those numbers,
18 29,000 over 85,000 in Philadelphia.

19 Tax credits are awarded each
20 year on a competitive basis. This pool
21 of funds is also known as the 9 percent
22 tax credit program, following a statewide
23 allocation plan, which sets forth
24 priorities and preferences for funding.
25 Each year we receive over three

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2 applications for each one we can award.

3 Obviously a very competitive program. A

4 number of years ago we identified one of

5 the challenges in meeting the needs of

6 persons with disabilities was access to

7 affordability of quality housing stock.

8 In 2005, and actually at the behest of

9 then-Secretary Estelle Richman, the

10 agency encouraged tax credit developers

11 to increase the number of accessible

12 units in properties to those individuals

13 at or below 20 percent of area median

14 income, extremely low-income individuals.

15 As a result, over 700 accessible units

16 have been built or are under development

17 in 96 properties throughout Philadelphia.

18 Building on this initiative and

19 to further meet the housing needs of this

20 vulnerable population, a permanent

21 supportive housing preference was created

22 in 2008 whereby tax credits are awarded

23 to properties which set aside a number of

24 units that facilitate the case management

25 needs of residents through referrals with

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2 local service providers. Through this
3 preference, tax credits have been awarded
4 to seven projects in Philadelphia,
5 resulting in the creation of 93 dedicated
6 units for permanent supportive housing,
7 and we are working -- that are currently
8 working with the City of Philadelphia on
9 coordinated referrals to these
10 properties.

11 In addition to the 9 percent
12 tax credit program, there has been an
13 increase in the number of developments
14 built or preserved using tax-exempt bond
15 financing financed through the agency or
16 the local issuing authority. Tax-exempt
17 financing is often directly placed with
18 investors and lenders to finance projects
19 and receive an allocation of private
20 activity volume caps as long as 50
21 percent of the cost of the properties are
22 funded through tax-exempt bonds. These
23 properties receive what's known as 4
24 percent tax credits, and I believe that
25 was mentioned earlier, and they do not

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have to compete for the very competitive
9 percent tax credit program. This is
making tax-exempt financing a very
popular tool. Approximately 3,000 units
a year are financed in this manner. PHFA
has been encouraging this financing as a
means for additional funding resources
and looks favorably on those developers
who are able to leverage both the 9
percent and 4 percent for their
financing. And both Inglis and Mission
First have been able to do this in recent
years, and we're very supportive of their
efforts to do so.

To further support housing
opportunities in tax credit units for
persons with disabilities, PHFA applied
for and was awarded \$5.7 million of
what's known as Section 811 Project-Based
Rental Assistance Demonstration -- a
mouthful -- from HUD. Through this
program, PHFA will provide rental
assistance for approximately 200 units
statewide. This initiative is a

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2 cooperative effort with Pennsylvania's
3 Department of Human Services, formerly
4 DPW, and will build on existing
5 partnerships to coordinate referrals to
6 available tax credit units and provide
7 the desperately needed housing subsidy to
8 enable individuals to live independently
9 in a community setting. We are thankful
10 to the Philadelphia Housing Authority for
11 their commitment of 50 Housing Choice
12 Vouchers we used in order to leverage and
13 secure the HUD award. In January 2015,
14 just a few weeks ago, the agency issued a
15 notice of initial funding availability,
16 setting aside 50 of our initial 200
17 units, to a limited number of counties
18 throughout the state that have the
19 capacity to place residents quickly. We
20 anticipate significant program activity
21 in Philadelphia with those 200 units and
22 are pleased to announce that the City of
23 Philadelphia was one of the initial
24 counties in our initial offering. We
25 again anticipate a very strong rollout of

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2 this program in the next couple weeks.

3 The Section 811 Demonstration
4 program funds will enhance established
5 housing partnerships between PHFA and the
6 City of Philadelphia. Since 2007, we
7 have been working together through the
8 Department of Behavioral Health and the
9 Commonwealth's Office of Mental Health
10 and Substance Abuse Services to provide
11 rental subsidies to eligible consumers.
12 Through this effort, approximately 76
13 individuals are able to live in tax
14 credit and private market units in
15 Philadelphia supported by all of the
16 agencies. Additionally, through this
17 great groundwork done so far by this
18 group, another goal we hope to achieve is
19 to fill the accessible units being
20 developed in Philadelphia through the Tax
21 Credit program by an individual needing
22 the unit features.

23 Additionally, developments
24 participating in the agency's affordable
25 housing programs must provide supportive

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2 services to enhance the quality of life
3 for all residents and improve the
4 financial viability of the housing
5 development. PHFA has dedicated staff in
6 its Housing Services Department that
7 provides technical assistance on program
8 design and facilitates strong
9 information-sharing networks between
10 developers, owners, management agents to
11 ensure the appropriate level of services
12 for the residents. PHFA staff regularly
13 participate in many disability-related
14 boards and work groups throughout the
15 Commonwealth and on a local level to
16 remain informed on opportunities and
17 current issues.

18 In 2005, PHFA supported the
19 creation and implementation of a
20 web-based housing search tool -- it's
21 known as pahousingsearch.com -- in
22 partnership with the Pennsylvania
23 Emergency Management Agency and the
24 Department of Community and Economic
25 Development and DHS. Currently there are

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2 100,000 units listed on this site, with
3 2,500 available at any given time for
4 rent.

5 More than 500,000 searches have
6 been completed through this tool in the
7 past 12 months. Pahousingsearch.com has
8 played a significant role in assisting
9 referrals to quickly move people into
10 permanent housing.

11 Again, I want to thank you for
12 this opportunity to appear before you
13 this morning and discuss the initiatives
14 of PHFA, and we believe that through
15 these strong partnerships, it is a means
16 to ensure success in linking quality,
17 affordable housing opportunities for
18 persons with disabilities and special
19 needs.

20 Thank you.

21 COUNCILMAN O'BRIEN: Thank you
22 so much.

23 Jane, would you like to
24 identify yourself and proceed with your
25 testimony.

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2 MS. VINCENT: Thank you,
3 Chairman O'Brien, and thank you for the
4 opportunity to participate in today's
5 hearing. My name is Jane Vincent. I am
6 the Regional Administrator for the U.S.
7 Department of Housing and Urban
8 Development, our Mid-Atlantic region,
9 which covers Pennsylvania, West Virginia,
10 Virginia, the District of Columbia,
11 Maryland, and Delaware. In my role as
12 Regional Administrator, I try to work
13 closely with local, state, and federal
14 partners to create strong, sustainable,
15 and inclusive communities and to provide
16 quality affordable homes for all.

17 HUD celebrates a very special
18 anniversary this year. It's the creation
19 of our agency and of 50 years of making a
20 difference in people's lives.

21 COUNCILMAN O'BRIEN: Happy
22 anniversary.

23 MS. VINCENT: Thank you.
24 You'll be hearing more about it as the
25 year continues.

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2 And Secretary Julian Castro is
3 focused on one key priority. That's
4 creating opportunity for all Americans by
5 increasing access to affordable housing.

6 For generations, individuals
7 with disabilities have been denied access
8 to places and opportunities that the rest
9 of society takes for granted - schools,
10 markets, theatres, courts, the workplace
11 and, of course, housing.

12 Routinely placed in
13 institutional and other segregated
14 settings, many have been denied the right
15 to participate in and fully benefit from
16 all our society has to offer. Thanks to
17 the Americans with Disabilities Act and
18 the Supreme Court's Olmstead decision, we
19 have reaffirmed principles of fairness
20 and inclusion essential to our society
21 that individuals with disabilities have
22 the right to live in healthy, integrated
23 communities of opportunity and choice
24 like all Americans.

25 Integrated communities enable

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2 individuals with disabilities to live
3 independently, work, and receive services
4 in the greater community, just like
5 individuals without disabilities.

6 Integrated communities allow individuals
7 with disabilities to choose how they
8 spend their time and who they spend their
9 time with, as well as the opportunity to
10 participate in all aspects of community
11 life. Most importantly, they are places
12 where individuals with disabilities live
13 and interact with individuals without
14 disabilities to the fullest extent
15 possible.

16 As more states facilitate the
17 transition of individuals with
18 disabilities from institutional or other
19 segregated settings like group homes and
20 transitional housing for individuals who
21 experience homelessness into their
22 communities, the need for meaningful
23 choice among housing is critical.

24 HUD may provide the funding and
25 framework, but it is up to the states,

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2 units of local government, public housing
3 agencies, and developers to implement and
4 operate these much-needed opportunities.

5 So I'd like to discuss federal
6 funding options with you, and you've
7 already heard about many of them from my
8 counterparts at PHFA and the City of
9 Philadelphia and others about how they
10 use federal funding to make this work.

11 In June 2013, HUD issued guidance to
12 public housing agencies and other HUD
13 assistance housing providers on how they
14 can best support state and local Olmstead
15 efforts. The guidance affirmed HUD's
16 commitment that individuals with
17 disabilities, like all persons, should
18 have meaningful choice and
19 self-determination in housing and in the
20 healthcare and related support services
21 they receive.

22 This included an exploration of
23 how our agency could do more to fund
24 additional integrated housing units
25 scattered throughout communities and

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2 provide a greater range of meaningful
3 housing choices for individuals with
4 disabilities.

5 We continue to explore how
6 existing HUD-assisted housing can provide
7 individuals with disabilities increased
8 opportunities to exercise autonomy,
9 independence, and self-determination in
10 living arrangements that have the
11 comforts and quality of home.

12 Today there are two HUD Section
13 811 programs that support housing for
14 individuals with disabilities. The first
15 is the long-established Supportive
16 Housing for Persons with Disabilities
17 program and the second, the 811 Project
18 Rental Assistance Demonstration. The 811
19 Supportive Housing program provides
20 funding for non-profit organizations to
21 develop permanent, affordable, integrated
22 housing options for extremely low-income
23 individuals with disabilities who earn
24 less than 30 percent of the area median
25 income.

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The 811 Project Rental

Assistance Demonstration program awards rental assistance funds to state housing agencies like PHFA, which was just mentioned, that have formed partnerships with state Medicaid and health and human services agencies that develop methods for identifying, referring, and conducting outreach to extremely low-income individuals while offering the availability of services and supports.

The assistance to the state housing agencies can be applied to new or existing multi-family housing complexes funded through different sources, like Low Income Housing Tax Credits and other programs.

But 811 is not the only HUD program that supports affordable housing for individuals living with disabilities. HUD's Section 202 program provides new operating assistance to units set aside for low-income elderly persons with impairments, and these are the seniors

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2 who are most likely to end up in
3 institutional care.

4 More than 750,000 elderly
5 persons, including nearly 200,000 living
6 with disabilities, live in units
7 supported by the Project-Based Rental
8 Assistance vouchers that are awarded to
9 public housing authorities for affordable
10 housing rentals.

11 Nearly 125,000 units of
12 permanent supportive housing for
13 individuals with disabilities
14 experiencing homelessness are supported
15 by HUD grants. We've also provided
16 guidance -- and you heard this mentioned
17 earlier -- on how Community Development
18 Block Grant, CDBG, HOME, and Housing
19 Opportunities for People with AIDS, known
20 as HOPWA, can be used to help provide
21 affordable housing to individuals with
22 disabilities.

23 For Fiscal Year 2016, HUD has
24 continued to demonstrate our commitment
25 to housing with individuals with

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2 disabilities by proposing \$150 million
3 for project rental assistance contract
4 renewals that will fully fund the current
5 1,800 properties and more than 21,000
6 units. The budget proposal also adds an
7 additional \$35 million for new Section
8 811 Project Rental Assistance awards.
9 That will support about 700 new units.

10 And as has been stated, much of
11 this good work at HUD has been championed
12 by our own Estelle Richman, and it is
13 really a pleasure that she has
14 continued --

15 (Applause.)

16 MS. VINCENT: -- her role both
17 federally and locally.

18 And with that, I really want to
19 thank you for the opportunity to address
20 you, Mr. Chairman.

21 COUNCILMAN O'BRIEN: Thank you
22 so much.

23 Deborah, I recognize there is a
24 great deal of work to do to meet the
25 housing needs of those with disabilities

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2 in Philadelphia. We're a leader in this
3 area, and I'm sure that is in part due to
4 the collaborative nature of the City
5 departments like OHCD, OSH, DBH, and CBH.
6 So thank you for the important work that
7 you do.

8 In your testimony you noted
9 OHCD funds development where 10 percent
10 of the units must be accessible to people
11 with physical disabilities and 4 percent
12 of the units accessible to those with
13 sensory disabilities. Of the recent
14 funding awards of OHCD, can you tell us
15 how many funding awards went to providers
16 that were focused on housing needs for
17 individuals with disabilities and what
18 the allocations were by disability
19 groups, intellectual, developmental,
20 psychiatric, physical or sensory, or
21 could you get that information?

22 MS. MCCOLLOCH: I could give
23 you that information. I don't want to
24 just speak off the top of my head, but I
25 can provide that for you, yes.

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2 COUNCILMAN O'BRIEN: And you
3 mentioned that OHCD funds must market the
4 accessible units to people with
5 disabilities for 30 days. Do you think
6 this is enough time given that we know
7 there are issues with linking folks or
8 individuals in need to accessible
9 housing, and how do you think we can
10 improve this so that the affordable
11 accessible units are matched to those
12 waiting in institutions?

13 MS. MCCOLLOCH: I think the
14 biggest problem we have in that case is
15 the affordability issue, that in some
16 cases even the units that we're providing
17 using Low Income Housing Tax Credits, for
18 example, the affordability still -- the
19 cost of the unit is still greater than
20 the lowest income people can afford. And
21 so sometimes the match is -- the
22 difficulty is not the accessibility part
23 of it. It's the affordability part of
24 it. So the real challenge is to have a
25 unit that is affordable to the very

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2 lowest income family or individual and
3 also has the accessibility needs that
4 that family or that individual need.

5 So perhaps marketing longer
6 could be helpful, but in general the
7 problem is the affordability piece, not
8 the accessibility piece.

9 COUNCILMAN O'BRIEN: Thank you
10 for that clarification.

11 What does the City see as the
12 role of the Office of Supportive Housing
13 in addressing this issue, and what about
14 DBH and CBH?

15 MS. MCCOLLOCH: Well, the
16 Office of Supportive Housing is the
17 office -- it was earlier stated that
18 Dainette Mintz is the head of that.
19 Dainette has retired, God bless her, and
20 the Director of that is now Marina
21 Hickian (ph). And OSH supports the --
22 provides the shelters -- runs the
23 shelters and has other programs. So we
24 coordinate with OSH, but it is a separate
25 department. It is funded primarily with

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2 General Fund. We're funded primarily
3 with federal funds. So we coordinate,
4 but it's two different departments with
5 two different primary goals.

6 COUNCILMAN O'BRIEN: Perhaps we
7 could have a follow-up conversation with
8 your new Director. That would be
9 helpful. Katy can contact you.

10 Another issue that I'm very
11 interested in, are there any individuals
12 with disabilities involved with the
13 selection process for the awarding of
14 OHCD funding awards?

15 MS. MCCOLLOCH: For specific
16 developments or in general -- let me take
17 a step back. In general, we have a
18 variety of ways to receive input from
19 citizens that include people with
20 disabilities and anyone that wants to
21 testify and give us input. We have a
22 needs hearing every year in December and
23 then we have a hearing on the preliminary
24 plan when that's issued, and then City
25 Council has its hearing on the proposed

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2 plan. That's later in the spring. So at
3 each of those occasions, there's
4 opportunity for people to give us input
5 on our proposed budget and plan for the
6 year.

7 On specific developments,
8 there's a set of recommendations that is
9 made of City and Redevelopment Authority
10 and this year we coordinated also with
11 PHA, representatives of the Planning
12 Commission, representatives of OHCD. So
13 there's a variety of people that sit and
14 review very specific proposals, if that's
15 what you mean. So that doesn't have
16 citizen input. That's an internal
17 process.

18 COUNCILMAN O'BRIEN: No, but
19 what I'm saying is, when I go to a
20 meeting, I'm often very much aware of who
21 is in the room, but I'm also very much
22 aware of who is not in the room. So when
23 you're mentioning all these agencies that
24 are participatory in these important
25 decisions, don't you think it's

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2 impossible that -- or don't you think
3 it's very important that individuals with
4 disabilities be at that table so that
5 everyone is reminded of the importance of
6 these decisions?

7 (Applause.)

8 COUNCILMAN O'BRIEN: We have
9 Planning. Do we have somebody with a
10 disability that's integrated into these,
11 not just for testimony, because we can
12 hold testimony here all the time, but
13 when you walk in that room, that you're
14 reminded of those priorities constantly
15 while the other process moves forward.

16 MS. MCCOLLOCH: We do not at
17 this time have a specific role for
18 someone representing people with
19 disabilities, but we could expand the
20 proposal review committee if that was
21 what you're talking about.

22 COUNCILMAN O'BRIEN: I'd like
23 to ask you to have a specific response to
24 that.

25 MS. MCCOLLOCH: Okay.

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2 COUNCILMAN O'BRIEN: So that as
3 we move forward in this budget process,
4 we know that that's being attended to.
5 And, of course --

6 MS. MCCOLLOCH: Sure.

7 COUNCILMAN O'BRIEN: -- I will
8 anticipate that you support the expansion
9 of the City's Housing Trust Fund?

10 MS. MCCOLLOCH: Yes, of course.

11 COUNCILMAN O'BRIEN: Very good.

12 And Jane and Holly, I want to
13 thank you for the time that you gave us
14 to testify today. We can identify some
15 concrete strategies that Philadelphia can
16 move forward in in a positive way.

17 You talked about the Section
18 811 authority and how the City can expand
19 the supply of special needs and
20 disability units within the City. You
21 talked about specific projects that were
22 successful, and can you please inform us
23 so that we're aware of your processes.
24 What barriers specifically did you remove
25 so that the City could bring the

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2 resources of PHFA and HUD to the City and
3 how can we get better at that? I'm sure
4 that your experience was --

5 MS. GLAUSER: What's
6 interesting is you say removing barriers.
7 I think one of the biggest things that --

8 COUNCILMAN O'BRIEN: I'm sorry?

9 MS. GLAUSER: You said one of
10 the things, what are the barriers.

11 COUNCILMAN O'BRIEN: What I'm
12 interested in is, what was your
13 experience in dealing with those
14 barriers? How did you overcome them, and
15 what barriers continue to stand in the
16 way of our success?

17 MS. GLAUSER: I think as
18 Deborah mentioned earlier, it's really
19 finding some of those financial supports
20 that 811 will give to a development to be
21 able to do it. One of the things PHFA
22 did a number of years ago is allowed a
23 developer to get an additional developer
24 fee if that was pledged back in to
25 support the operations of a project. So

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2 we're setting up what's called a Rental
3 Subsidy Fund, and that's targeted for
4 individuals at or below 20 percent area
5 median income, below the typical 30
6 percent level, so that there will be
7 ongoing supports for 15 years to fill the
8 gaps of some of those issues in placing.
9 So I think that's one of the things, is
10 finding the operating support that 811
11 will bring to the table, also building an
12 incentive in the allocation plan.

13 I'm not sure that there's
14 barriers necessarily. I think by us
15 creating incentives in our allocation
16 plan which gives points -- and it's a
17 competitive process -- that that really
18 encourages developers to meet the needs
19 of persons with special needs. So I
20 think it's that incentive and encouraging
21 through points and competitiveness that
22 we actually are able to increase those
23 opportunities.

24 COUNCILMAN O'BRIEN: Let me ask
25 you a hypothetical. Let's say Tom Wolf,

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2 hopefully our new best friend, is sitting
3 at the table here with me. How would you
4 suggest that we as a city become a better
5 partner with the Wolf Administration and
6 your agency and what types of
7 interdepartmental holistic initiatives do
8 you see the state taking on, both now and
9 under the new administration, that could
10 impact us here?

11 MS. GLAUSER: I think that one
12 of the opportunities is really through
13 the Department of Human Services and
14 understanding at the Department of Human
15 Services the role of housing and
16 supportive service linkages. I think
17 that's a great opportunity. Under the
18 previous administration, there were some
19 more partnerships between the two, and I
20 think to the extent that you can create,
21 there is a role --

22 COUNCILMAN O'BRIEN: There was
23 better partnerships?

24 MS. GLAUSER: I wouldn't say
25 that there was. I think there was a

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2 different opportunity for long-term
3 living, had more communications with PHFA
4 to sort of bridge the gap of nursing home
5 transition and some of these issues. I'm
6 not sure that -- there was a focus in the
7 last administration, but I think that
8 that's the opportunity to build on some
9 of the existing partnerships that was
10 previously in play to continue that
11 conversation between DHS and the housing
12 advocates so that we can bridge the gap
13 in permanent supportive housing.

14 COUNCILMAN O'BRIEN: Could you
15 perhaps think in terms of creating an
16 e-mail or a framework on how we can best
17 approach that conversation.

18 MS. GLAUSER: I will do that.

19 COUNCILMAN O'BRIEN: Thank you.

20 And, Jane, I have a couple
21 questions for you as well. And I guess
22 it will be a general question, because
23 you identify all these funding sources
24 and we're going to have the cleanup that
25 are coming up in a few minutes. So not

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2 to put too much of a burden on her, but
3 I'm sure she's been auditing all the
4 testimony that has taken place so far,
5 and I'm anxiously awaiting her insight
6 and her constructive ideas going forward.

7 But do you have any
8 recommendations on how we in Philadelphia
9 can do better at leveraging programs
10 offered by HUD? If you could suggest how
11 we could build a better framework to
12 better engage formally and informally
13 with your agency.

14 MS. VINCENT: I would say that
15 in my tenure at HUD the last actually
16 four and a half years, I have been very
17 pleased at my engagement with the
18 partners here at the table. I would be
19 happy to continue to have the
20 conversation and to open a conversation
21 specifically around the needs for --
22 around the needs with individuals with
23 disabilities, but I can tell you I think
24 we have regular conversations about how
25 we can better provide housing and better

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2 make use of the resources that we do
3 have. This is a very open group.

4 COUNCILMAN O'BRIEN: I am just
5 interested in being included in those
6 discussions so that some of the people
7 that provide the support services can
8 participate in your planning strategies,
9 because it is the three-legged stool.

10 So, again, I think, Holly, you
11 were talking about all kinds of tax
12 credits, and that really just goes a
13 little over my head because it's all
14 rushing past me very quickly, but can you
15 suggest how we can maximize the value of
16 those tax credits by minimizing the cost
17 of development to serve more people while
18 maintaining independence? Is that too
19 loaded?

20 MS. GLAUSER: That's too
21 loaded, and that's really a challenge. I
22 think as many of us practitioners are in
23 the room, it really does create -- it
24 takes a village and takes a lot of
25 leveraging from a number of resources. I

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2 think to the extent that there are more
3 partners and partnerships with a broad
4 base group, which is happening in
5 Philadelphia, I think if you look at who
6 is at the table, whether it's the
7 foundations with the City support and
8 also the agencies, a lot of it is just
9 still driven by the tax incentive, which
10 also is counterintuitive, quite frankly,
11 to some of those things. So, again, I
12 think the more collaborative the
13 development is and the more partners, I
14 think each one of us can just give a
15 little piece that will then leverage
16 more.

17 It is still a challenge to get
18 developments, and many of them are, I
19 think, as you mentioned earlier, some of
20 the NIMBY challenges that also create
21 some cost or timing issues in getting a
22 development coming from start to
23 fruition. So it is just not
24 unfortunately a one-size-fits-all.
25 Believe me, I spent many days looking at

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2 budgets and figuring out which line you
3 can eliminate to figure out how to cost
4 constrain, and it is a holistic, very
5 challenging approach.

6 COUNCILMAN O'BRIEN: Thank you.

7 Councilman Oh, do you have any
8 questions?

9 COUNCILMAN OH: I do not.

10 COUNCILMAN O'BRIEN: Well,
11 thank you very much for your testimony.

12 And now we have a vision for
13 the future, and I hope she's feeling well
14 today because I would like to welcome the
15 esteemed Estelle Richman, the former COO,
16 United States Department of Housing and
17 Urban Development and the Secretary of
18 the Pennsylvania Department of Welfare,
19 now the Department of Health and Human
20 Services. But I have, Madam Secretary --
21 I guess I could call you that, because
22 that's the role that I'm most familiar
23 with and your previous expertise in the
24 City, which you will articulate in a few
25 moments. But it was your management

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2 style that I think initially attracted me
3 to your vision, and that was no matter
4 where you are, you bring a number of
5 agencies that report to you and you force
6 that collaboration and that inclusiveness
7 and that transparency and you encourage
8 the sharing of wonderful creative ideas.

9 So we're very pleased to have
10 you here, and if you could identify
11 yourself for the record and proceed with
12 your testimony, we would appreciate it.

13 (Witness approached witness
14 table.)

15 MS. RICHMAN: Good morning,
16 Councilman O'Brien and Speaker O'Brien,
17 since that's how we worked, and members
18 of the Committee. I am Estelle Richman.
19 I'm happily retired from the workforce,
20 and I'm honored to be here with you
21 today.

22 In the past 48 years, I have
23 held the following positions in two
24 states: In Cleveland, Ohio, I worked as
25 a social worker for child welfare;

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Program Director and Administrator for the Positive Education program, a day treatment program for children with behavioral problems; and the Executive Director of a community social services agency which provided community mental health services and health clinic services.

In the Commonwealth of Pennsylvania, I worked in the following positions: Southeast Regional Administrator in the Office of Mental Health and Substance Abuse Services in the Department of Public Welfare, and Secretary of the Department of Public Welfare, now the Department of Human Services.

In Philadelphia, I served as Mental Health Director, MH/MR Administrator, MH/MR CODAAP Administrator, the Commissioner of Health, Deputy Managing Director for Social Services, and City Managing Director.

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2 At the federal level, I was the
3 Chief Operating Officer for Housing and
4 Urban Development and Special Advisor to
5 the HUD Secretary on Health and Human
6 Services issues.

7 I list this variety of
8 positions to state that regardless of the
9 position, the title, the responsibilities
10 or the location, the primary barrier to
11 long-term stability for people with
12 disabilities has been housing. With
13 safe, affordable, supported, permanent,
14 integrated, accessible housing, people
15 are less likely to become homeless, less
16 likely to be incarcerated or to be
17 institutionalized in intermediate care
18 facilities for mental retardation, state
19 mental hospitals or nursing facilities.
20 With safe, affordable, supported,
21 permanent, integrated, accessible
22 housing, people are likely to decrease
23 the time of relapse, increase the
24 probability of employment, comradeship,
25 and self-sufficiency.

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Housing is the basis of stability in the community. However, it represents the highest cost item in bringing people out of institutions or avoiding institutions. In addition, housing must be linked to services of the person's choice. Services are more than medical treatment and should include social supports, vocational supports, religious supports, and family supports.

The purpose of this hearing is to highlight the importance of housing resources for all types of disabilities.

Today we have heard from three panels. The first talked about the people, people with physical disabilities, people with mental disabilities or addictions, people who are homeless, and young people with autism. Without appropriate housing, each of these populations risk homelessness, incarceration, hospitalization or nursing facility care. With appropriate housing and supports,

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these are our neighbors, our friends, and our co-workers. With appropriate housing and supports, they can contribute to society, communities, and neighborhoods. Over the next several years, we can expect many of these populations to grow substantially, particularly aging and youth with autism.

The second panel spoke to the development of affordable housing. We know the need is great. We also know that funding is insufficient to the need. However, our developers fight to make every dollar count and to ensure that people with disabilities are not forgotten. Kelvin Jeremiah, Mark Deitcher, and Gavin Kerr represent only three of the many developers in the City. They are partners with many other agencies. They have learned to leverage funds and to stretch them as far as possible. However, we are still far from reaching a goal of having appropriate housing for all. To quote Sister Mary,

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2 "None of us are home until all of us are
3 home."

4 The third panel represents the
5 funders. This is somewhat of a misnomer
6 because these groups actually distribute
7 funds as opposed to create the funds.

8 The real funders are us, the taxpayers.

9 All of the funds that are distributed by
10 these agencies - HUD, PHFA, OHCD - come
11 from taxpayers. They all follow laws,
12 regulations, and policies. Their

13 missions commit them to work in
14 partnerships with developers to create
15 housing opportunities for people with
16 disabilities, to promote homeownership,
17 and to collaborate with other levels of
18 government to keep people out of
19 institutions. The developers must work
20 in partnership with social service
21 agencies and Medicaid managed care
22 entities, both behavioral and physical,
23 to ensure supports for special needs
24 populations. But, again, we, the
25 taxpayers, determine how much money is

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2 going to be available. If we can state
3 that in lots of different ways, but it
4 still comes down to people needing to
5 generate funds, develop funds, and match
6 funds.

7 As the clean-up batter, I want
8 to reemphasize three points. First,
9 permanent, supported, integrated
10 community living is cost effective. Two,
11 the Supreme Court Olmstead decision
12 mandates that people with disabilities
13 have a right to live in permanent
14 community-based housing. And, three, it
15 is all about appropriate supports.

16 These are simple concepts. For
17 each person in an institution, whether it
18 be a state mental facility, a nursing
19 facility or ICF-MR, more than two people
20 can be supported in the community. We
21 have long known that supporting people in
22 integrated community-based housing is
23 more cost effective than having people in
24 institutions. Whether an individual is
25 in a state mental institution, an

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institution for people with mental retardation, a nursing facility, a jail or a detention center, it is more cost effective to provide services in the community. Supports in the community mean treatment supports, housing supports, employment supports, and case management. Some individuals will require some of these, others only one. But as a group, people living in safe, affordable, permanent, supported housing have less use of emergency room, lower rehospitalization rates, and more positive interactions with peers.

As we think again of the providers, often in the health and human services field, and the housing developers, often focused on bricks, mortar, and banking leverage, we need to think of a system that understands both. The developers here today understand their role in assuring that housing for people with disabilities must include supports. However, it is not the intent

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2 that housers fund the supports, but they
3 partner with those who can. It is also
4 not the intent that human services
5 agencies become real estate brokers, but
6 instead partner with housing developers.
7 If we do this work in -- if we don't do
8 this work in silos -- if we do do this
9 work in silos, we will never have enough
10 housing or supports. If we can work in
11 partnerships, we can envision going to
12 scale.

13 I want to spend my final
14 minutes on the Olmstead decree. Olmstead
15 is a clarification of the Fair Housing
16 Act of 1968 and the ADA. It prohibits
17 discrimination in rental, sale, and
18 financing of housing based on race,
19 color, national origin, religion, sex,
20 presence of children or disability.

21 Section 504 of the Fair Housing
22 Act states that persons with
23 disabilities, including those individuals
24 transitioning from institutions to
25 community-based settings, are entitled to

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2 equal opportunity in housing.

3 Fair Housing meet Americans
4 with Disabilities Act. Title II of the
5 ADA requires public entities to
6 administer services, programs, and
7 activities in the most integrated setting
8 appropriate to the needs of the qualified
9 individuals with disabilities. The "most
10 integrated setting" is defined as a
11 setting that enables individuals with
12 disabilities to interact with
13 non-disabled persons to the fullest
14 extent possible.

15 In 1999, the Supreme Court
16 ruled in Olmstead versus LC that people
17 with disabilities had the right to live
18 in integrated communities with supports.

19 Permanent supported housing
20 provides permanent housing with the
21 necessary social, employment, and medical
22 supports.

23 Slowly we are working towards
24 an integrated society. We are not there
25 yet, but if those in this room work in

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2 partnership, understand their roles, and
3 vow that we will keep people with
4 physical disabilities, people with mental
5 illness and addictions, people with
6 intellectual disabilities, and people
7 with autism out of institutions, we will
8 make progress. All of us deserve a home.

9 What are the next steps that we
10 all can do? First, support funding of
11 the Housing Trust Fund. Contact your
12 elected state officials. Support the
13 Community First Option, a new state plan
14 option. And, third, support increasing
15 the set-aside for housing for people with
16 special needs and those with very low
17 incomes to 10 percent from 5 percent.

18 Again, from Project HOME, none
19 of us are home until all of us are home.

20 Thank you for the opportunity
21 to speak.

22 (Applause.)

23 COUNCILMAN O'BRIEN: Thank you
24 so much. Again, it's your leadership
25 that focused us all on bringing people

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2 out of institutions into the community,
3 and I think your testimony here today
4 also reemphasizes that unless we have the
5 supports, we can't avoid those
6 individuals being reinstitutionalized.
7 And, again, I thank you for particularly
8 focusing on the aging and youth with
9 autism, again 20,000 adults by the year
10 2020. I'd like to start a process where
11 instead of having a waiting list or an
12 interest list, that we look at the year
13 2020 and have a strategic plan on how we
14 can best build capacity and not wait
15 until 2020 and say all the sudden we have
16 a tsunami or we have an emergency.

17 And, again, you talk about the
18 developers working in partnership with
19 community social service agencies like
20 Medicaid managed care entities,
21 behavioral and physical health to ensure
22 supports for special needs populations.
23 It is all about the supports, and those
24 supports are treatment, housing,
25 employment, case management. And I'm

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2 glad that you defined the roles as these
3 new partnerships come together, and that
4 specifically is that we're not asking
5 housers to fund the supports, but partner
6 with those that can. And your
7 initiatives are, again, well within our
8 grasp as City Council to support
9 increased funding for the Housing Fund.
10 If you can, maybe you can expand and
11 further explain the Community First
12 Option, the new state option. And I'm on
13 it. I would love to introduce
14 legislation increasing the state or the
15 set-aside for housing for people with
16 special needs from 5 percent to 10
17 percent. And thank you for your
18 testimony.

19 I do have a couple questions.
20 I want to thank you for coming out of
21 retirement. I don't think you'll ever
22 retire. No one ever believes that you
23 ever really did retire, as evidenced by
24 your testimony here today. But based on
25 your experience at HUD, DPW, DHS, and our

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2 own City, what steps can be taken to
3 reduce or eliminate the need for
4 expensive and segregated nursing
5 facilities and other institutional
6 settings like the Philadelphia Nursing
7 Home?

8 MS. RICHMAN: All nursing
9 facilities, it's where DPW, or DHS now,
10 spent the majority of their finding. And
11 we know that, one, it's the hardest
12 decision for people to make. We know
13 that people don't want to be in nursing
14 homes and we know we spend more money on
15 nursing homes than any other factor in
16 the DHS budget.

17 The object now -- and there are
18 many waivers -- is to begin to reduce
19 that number substantially, and there are
20 lots of ways I believe the state is
21 beginning to look at it. We're going to
22 probably -- I would hope that within the
23 next 12 months we will see long-term
24 managed care focused on getting more
25 people out of nursing homes faster. I

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2 think the dollars saved could be both
3 those dollars that could help develop
4 more housing for people with disabilities
5 to make sure people coming out of nursing
6 homes have places to live and for youth
7 with autism. This will free up a great
8 deal of money as we begin to downsize.

9 I will have to tell you, I've
10 probably been advocating for significant
11 downsizing of the Philadelphia Nursing
12 Home --

13 COUNCILMAN O'BRIEN: I'm aware
14 of that.

15 MS. RICHMAN: -- for a long
16 time. And I think that one of the things
17 about the Philadelphia Nursing Home,
18 which I sort of look at Tom Earle to see
19 if it's still true, it had one of the
20 highest percentages of people under 50,
21 and the people under 50 in a nursing home
22 means we have a housing problem. It is
23 not a service issue; it's housing issue,
24 because most of those folks can live
25 comfortably independently and accessibly

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2 in the community if housing was there for
3 them to do, plus saving money. Because
4 as I think I mentioned, there's more --
5 it's more cost effective to be able to be
6 supported in the community. The last
7 number I saw was still over two people
8 can live in the community for every
9 person in a nursing facility.

10 The last part of this is that
11 the Department of Human Services at the
12 state level is one at the largest housing
13 developers, yet it's not a coordinated
14 effort. And I think the new Secretary
15 will be looking at creating a housing
16 office within DHS to help create and make
17 use of all of the appropriate housing
18 there so money is wisely spent, it's
19 communicated back down to the counties on
20 how that collaboration will work, and
21 consequently I hope more housing can be
22 developed.

23 COUNCILMAN O'BRIEN: So given
24 that statement, I think it would probably
25 be -- or maybe it's not -- premature to

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2 ask you to make suggestions to our
3 largest housing agencies, PHA and OHCD,
4 as to what they can do to move forward,
5 or perhaps you can give them some ideas
6 on how they can fit into this new
7 framework that's going to be created.

8 MS. RICHMAN: I would be very
9 glad to. I do believe that PHFA has
10 always been a great partner with both DHS
11 and with the City, and I think as Holly
12 mentioned, they were very amenable to
13 looking at very low-income people and
14 looking at how we make sure that we are
15 not leaving anyone behind as we develop
16 housing. It was a great deal of pleasure
17 also to work with HUD as we developed the
18 new 811 program, which focused on
19 integration, not segregating people with
20 disabilities, and making sure there were
21 a source of funds flowing into states
22 that help people get out of nursing
23 facilities and out of all institutions.

24 Now we need to build on those.
25 Now we need to be able to look at how

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2 counties and how other -- and communities
3 in general take advantage of targeting
4 populations most at risk. As you said, a
5 number of youth with autism will grow
6 substantially by 2020. We've known about
7 the baby boomers for the last 25 years
8 and knowing they're going to hit our
9 housing market and our care market
10 significantly. We also know most of the
11 baby boomers don't want to live in
12 nursing facilities. We want to age in
13 place. We want to be able to be with
14 friends and family and not put away. We
15 have moved way too slowly for this
16 initiative, although I think we will
17 probably be pretty strong in insisting
18 that more housing be developed. But
19 that's for aging, and while I'm part of
20 that group now, I have just as much
21 interest in making sure people with
22 disabilities, youth, youth with autism,
23 youth aging out of the child welfare
24 system all need housing. We should not
25 be playing one group against another, but

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2 trying to make sure that all of us have
3 housing as appropriate to our needs, not
4 in institutions.

5 COUNCILMAN O'BRIEN: I think
6 when I first met you, you were creating
7 what is now known as CBH, and a lot of
8 people said that can't work, it will be
9 political, they won't have the reserves.
10 It became a reality and it's working very
11 well.

12 MS. RICHMAN: Incidentally,
13 just the first of the month, it
14 celebrated its 18th anniversary.

15 COUNCILMAN O'BRIEN: That's
16 wonderful. Now let me ask you, what do
17 you think the future of CBH will look
18 like given the changes on a national
19 level to healthcare and the new
20 administration in Harrisburg? I read
21 that you have more than a passing
22 interest in this.

23 MS. RICHMAN: I think that one
24 of the things we will hear over the next
25 weeks will be the reintegration of health

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2 choices to one plan, not three. I think
3 as our new Governor has said, he's
4 interested in the broadest level of
5 Medicaid expansion, and I think we will
6 hear the plans for that over the next few
7 weeks. I think that means that CBH will
8 continue to function and be a strong,
9 vibrant organization. I think that it
10 will also mean they hopefully will have
11 more reinvestment funds to continue to
12 invest in housing for people with mental
13 illness, addictions, and homelessness.

14 So I think that hopefully the
15 Americans for Affordable Care will
16 continue to exist and to make sure that
17 all Americans have healthcare and that
18 healthcare isn't just a privilege for
19 some, but for all.

20 When all those things come
21 together with housing, because I really
22 don't believe you can have strong, good
23 healthcare if people don't have a stable
24 place to be home.

25 COUNCILMAN O'BRIEN: I'm going

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2 to ask you a question. As I approach my
3 advanced years and all that you have just
4 said, what is the definition of
5 retirement in Estelle Richman's terms?

6 MS. RICHMAN: My definition of
7 retirement, it's a little unique. I have
8 two things that I do. I travel. So I do
9 a trip a month. So as long as I can do a
10 trip a month, I consider myself retired.
11 And the work I do, I do for free.

12 COUNCILMAN O'BRIEN: Well, it's
13 inspiring, as you always have been on a
14 city level, on a state level, and on a
15 federal level. Your accomplishments are
16 too numerous and profound to talk about
17 today, but we just thank you for gifting
18 us part of that free advice that you are
19 so willing to share with so many other
20 people.

21 MS. RICHMAN: And I'm willing
22 to do whatever support and work I can do,
23 given my caveats.

24 COUNCILMAN O'BRIEN: Thank you.

25 Councilwoman Blackwell.

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2 COUNCILWOMAN BLACKWELL: Thank
3 you very much.

4 For next steps, obviously we
5 understand what you mean by contacting
6 our state officials on the Housing Trust
7 Fund. The Community First Option, so we
8 contact our elected officials, our
9 Governor and such, Community First?

10 MS. RICHMAN: It would be
11 making sure the Governor knows -- and I
12 will make sure that the DHS Secretary is
13 aware of the Community First Option.
14 It's not a Medicaid waiver; it's an
15 option. So it's a little bit broader and
16 will give us more flexibility of making
17 sure we can, one, keep people out of
18 nursing facilities and, secondly, be able
19 to support them in the community.

20 COUNCILWOMAN BLACKWELL: And,
21 thirdly -- thank you -- for increasing
22 the set-aside, I assume is that federal?

23 MS. RICHMAN: No. Both the
24 federal, the state, and local can make
25 decisions on what that set-aside can be.

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2 The issue for the set-aside, though, it
3 has to be able to actually look at the
4 number of people who qualify for it. In
5 other words, if you say 5 percent but
6 it's reaching the lowest 5 percent,
7 that's good. But if you're saying 5
8 percent but you have to have an income
9 above the poverty level, then it's not
10 going to work for our folks who need it
11 the most, because they don't have that
12 income. One of the things I know that
13 the Philadelphia Housing Authority, when
14 many people lost GA, their GA payments,
15 which they used to pay their rent, they
16 were able to call them zero income and
17 still kept them in their housing.

18 So the goal is to make sure
19 some of our most vulnerable people have
20 housing regardless of their income, come
21 up with ways for subsidy or come up with
22 ways to be able to reach them.

23 COUNCILWOMAN BLACKWELL: So we
24 can work on that on all three levels?

25 MS. RICHMAN: Yes.

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2 COUNCILWOMAN BLACKWELL: Thank
3 you. Thank you very much for all your
4 work. Thank you.

5 COUNCILMAN O'BRIEN: Thank you
6 very much, Estelle.

7 Is there anyone else here to
8 testify today?

9 (No response.)

10 COUNCILMAN O'BRIEN: Seeing no
11 one is here to testify regarding
12 Resolution 150028 and there being no
13 further business before the Committee on
14 the Disabled and Special Needs today, the
15 public hearing on Resolution 150028 is
16 recessed until the call of the Chair.

17 Thank you all for coming.

18 (Committee on the Disabled and
19 Special Needs concluded at 12:50 p.m.)

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