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COUNCIL OF THE CITY OF PHILADELPHIA
COMMITTEE OF THE WHOLE

- - -

Room 400, City Hall
Philadelphia, Pennsylvania
Wednesday, April 19, 2006
2:30 p.m.

- - -

PRESENT:

COUNCIL PRESIDENT ANNA C. VERNA
COUNCILMAN W. WILSON GOODE, JR.
COUNCILWOMAN JOAN L. KRAJEWSKI
COUNCILWOMAN BLONDELL REYNOLDS BROWN
COUNCILWOMAN MARIAN B. TASCIO

BILLS 060001, 060002, 060003, 060004, 060006,
060007, 060008, 060014, 060089, 060090

RESOLUTIONS 060019, 060099, 060100, 060119,
060172

- - -

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COUNCIL PRESIDENT VERNA: Good

afternoon, everyone. Sorry for the delay. This is a continued public hearing of the Committee of the Whole, and I would ask Mr. McPherson to please read the number of the bills and/or resolutions before us today.

MR. MCPHERSON: Bill No.

060001, 060002, 060003, 060004, 060006, 060007, 060008, 060014, Resolution 060019, Bill 060089, 060090, Resolution 060099, Resolution 060100, 060119, 060172.

COUNCIL PRESIDENT VERNA: Does

anyone have any questions of the Treasurer's office?

(No response.)

COUNCIL PRESIDENT VERNA: I

know that a Councilmember had requested that the Treasurer's office be here. However, I understand that the issue has been resolved.

I kept your name on the list thinking that maybe there were other

1 4/19/06 - WHOLE - BILL 060001, ETC.
2 Councilmembers that might have questions.
3 Since there are none, you're certainly
4 welcome to leave.

5 MR. MCPHERSON: Finance
6 Department.

7 COUNCIL PRESIDENT VERNA: Good
8 afternoon.

9 MR. JANNETTI: Good afternoon,
10 Madam President. I'm Vince Jannetti,
11 Acting Director of Finance for the City.

12 COUNCIL PRESIDENT VERNA: And
13 who is with you?

14 MR. JANNETTI: With me is
15 Dianne Reed, the Budget Director for the
16 City.

17 COUNCIL PRESIDENT VERNA: One
18 of the informational items Council
19 requested was a response to the PICA
20 letter detailing their concerns of the
21 Five-Year Plan, which we expected to
22 receive, I think, weeks ago.

23 Can you explain why we have not
24 to date received your response and when
25 we can expect to receive it?

1 4/19/06 - WHOLE - BILL 060001, ETC.

2 MR. JANNETTI: The response,
3 Madam Chair, has not yet been completed.
4 We are working on that.

5 COUNCIL PRESIDENT VERNA: When
6 do you anticipate that it will be
7 completed and we'll have a copy of it?

8 MR. JANNETTI: I'm not exactly
9 sure when it will be completed, Madam
10 Chair, but as soon as it is, we will
11 forward it to you.

12 COUNCIL PRESIDENT VERNA: You
13 know, I think that Councilmembers would
14 like to know what we're doing as far as
15 PICA is concerned before we pass the
16 budget.

17 MR. JANNETTI: Absolutely.

18 COUNCIL PRESIDENT VERNA: So
19 can we anticipate receiving it in the
20 next week or so so that Councilmembers
21 could in good conscience --

22 MR. JANNETTI: I will see what
23 I can do about getting that for you.
24 Sure.

25 COUNCIL PRESIDENT VERNA: I

1 4/19/06 - WHOLE - BILL 060001, ETC.

2 would appreciate it. Thank you.

3 During the Finance Department's
4 hearing, it was put on the public record
5 that the Housing Trust Fund was not
6 included in the 2007 operating budget.
7 Members of City Council expressed their
8 concern as to why these funds were not
9 included in the operating budget and we
10 asked that you review this decision.

11 Can you tell us the
12 Administration opinion of how the Housing
13 Trust will be handled and will we be
14 amending the 2007 operating budget, and,
15 if so, how will it be amended?

16 MR. JANNETTI: Madam President,
17 we looked into that situation and we
18 agree that it will be an appropriated
19 fund. So we are preparing an amendment
20 to the budget to include the Housing
21 Trust Fund as an appropriated fund as any
22 other operating fund.

23 COUNCIL PRESIDENT VERNA:
24 Mr. Jannetti, during the testimony of the
25 Department of Human Services, the issue

1 4/19/06 - WHOLE - BILL 060001, ETC.

2 of the replacement -- and I'm going to
3 ask this question because my colleague,
4 Councilwoman Blackwell, is not here and
5 I'm sure she would want this question to
6 be asked.

7 The issue of the replacement of
8 the Youth Study Center came up, as I
9 said, when we did have her testimony from
10 the Department of Human Services. Can
11 you explain how the Administration
12 proposes to finance this project, where
13 the payments are budgeted and what
14 payments are included in the Five-Year
15 Plan?

16 MR. JANNETTI: Madam President,
17 the new Juvenile Justice Center would be
18 funded with a Philadelphia municipal
19 authority bond issue. We would lease
20 that facility from the municipal
21 authority when it's completed.

22 The funding for that facility
23 would be included -- the budget for that
24 facility would be included in the DHS
25 budget. Off the top of my head, I

1 4/19/06 - WHOLE - BILL 060001, ETC.
2 believe it's around \$5 million a year,
3 and I'm not sure what year they have it
4 starting in the Five-Year Plan. It is in
5 the out years, since construction hasn't
6 started yet. And DHS would be billing a
7 portion of that debt service -- it's
8 actually not debt service to them. It's
9 a lease payment -- to the state for -- a
10 portion of that would be reimbursed. And
11 I will get you details on what years in
12 the Plan it starts.

13 COUNCIL PRESIDENT VERNA: We
14 would appreciate that. Thank you.

15 Are there any questions from
16 members of the Committee of the Finance
17 Department?

18 (No response.)

19 COUNCIL PRESIDENT VERNA:
20 Seeing none, Mr. Jannetti, we'll be
21 expecting to hear from you, A, regarding
22 the letter to PICA and also you're going
23 to get us information regarding the Youth
24 Study Center and how that is being done.

25 MR. JANNETTI: Yes, ma'am.

1 4/19/06 - WHOLE - BILL 060001, ETC.

2 Thank you very much.

3 COUNCIL PRESIDENT VERNA: Thank
4 you.

5 The next department?

6 MR. McPHERSON: Fire
7 Department.

8 COUNCIL PRESIDENT VERNA: Good
9 afternoon, Commissioner. Welcome.

10 COMMISSIONER AYERS: Good
11 afternoon.

12 COUNCIL PRESIDENT VERNA:
13 Gentlemen.

14 Commissioner, I have a couple
15 of questions I'd like to ask.

16 At the time of your hearing,
17 you could not identify which engine and
18 ladder companies you would be taking out
19 of service. Are you now able to share
20 with us what your redirection of service
21 plan is?

22 COMMISSIONER AYERS: We
23 actually are in the same position that we
24 were in before. We have not been asked
25 to do anything as related to the

1 4/19/06 - WHOLE - BILL 060001, ETC.
2 reorganization plan.

3 COUNCIL PRESIDENT VERNA: So
4 with that response, I assume that things
5 will stay as exactly as they are?

6 COMMISSIONER AYERS: I haven't
7 heard anything, Council President.

8 COUNCIL PRESIDENT VERNA: Who
9 are you to hear from?

10 COMMISSIONER AYERS: I'm to
11 hear from the Mayor and the Managing
12 Director. I have not been directed to
13 change anything.

14 COUNCIL PRESIDENT VERNA: I
15 would hope that you're the professional
16 in this field and you would certainly
17 have something to say about it.

18 COMMISSIONER AYERS: We --

19 COUNCIL PRESIDENT VERNA:
20 Commissioner, what are the locations --
21 don't respond. It's okay. I understand
22 your position.

23 But can you tell us the
24 locations of the EMS units that you have
25 downgraded from advanced life support to

1 4/19/06 - WHOLE - BILL 060001, ETC.
2 basic life support during the current
3 fiscal year?

4 COMMISSIONER AYERS: Yes. The
5 units that we have changed the resources
6 in, they changed from advanced life
7 support units to basic life support units
8 staffed by emergency medical technicians.
9 They are Medic 4 --

10 COUNCIL PRESIDENT VERNA: That
11 means nothing to me.

12 COMMISSIONER AYERS: I beg your
13 pardon?

14 COUNCIL PRESIDENT VERNA: I
15 said that means nothing to me. Medic 4
16 means nothing to me. If you could give
17 us locations.

18 COMMISSIONER AYERS: Well, I
19 hadn't finished.

20 COUNCIL PRESIDENT VERNA: Okay.

21 COMMISSIONER AYERS: I'm sorry.

22 Medic 4 located at 2207 Hunting
23 Park, Medic 8 located 2900 Boudinot
24 Street, Medic 9 located 47 South 56th
25 Street, Medic 14 located 20th and Federal

1 4/19/06 - WHOLE - BILL 060001, ETC.

2 Streets. And we have put two additional
3 basic life support units in as well,
4 increasing the fleet from 40 medic units
5 running to 42 medic units running, and
6 those additional medic units are located
7 Medic 41 at 1913 North 63rd Street and
8 Medic 42 located at 4800 Langdon Street.

9 COUNCIL PRESIDENT VERNA:

10 Commissioner, so that the record is clear
11 and we all fully understand, can you tell
12 us the difference between an ALS and a
13 BLS?

14 COMMISSIONER AYERS: Yes. The
15 advanced life support unit is staffed
16 with two paramedics from the City of
17 Philadelphia and the basic life support
18 units are staffed with two emergency
19 medical technicians from the City of
20 Philadelphia.

21 COUNCIL PRESIDENT VERNA: So
22 actually there are four locations that
23 we're changing?

24 COMMISSIONER AYERS: Four
25 locations that were changed as far as

1 4/19/06 - WHOLE - BILL 060001, ETC.
2 resources and two locations that had
3 additional units added.

4 COUNCIL PRESIDENT VERNA: Are
5 we changing them from ALS to BLS?

6 COMMISSIONER AYERS: Four were
7 changed from ALS to BLS. Two BLS were
8 added to the fleet.

9 COUNCIL PRESIDENT VERNA: If a
10 BLS unit responds to a call and it is
11 determined that an ALS unit is required,
12 what happens, and are we not endangering
13 a person's life by the delay in providing
14 services? Because I have always heard,
15 and you will probably agree with me, that
16 three minutes can mean life or death for,
17 say, a heart attack victim. Would you
18 agree?

19 COMMISSIONER AYERS: I do
20 understand what you're saying and I agree
21 that it's imperative that people receive
22 care immediately. When you state the
23 times, I think I'm going to defer to the
24 doctor, Dr. Mechem. He is the doctor
25 that has medical command over all of our

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2 paramedics, over all of our emergency
3 medical technicians, and he's going to be
4 able to explain it a little more. He's
5 the person who comes and is a part of our
6 team as we make operational decisions
7 based on life safety, based on service to
8 the citizens and what paramedic and basic
9 life support protocols are. So this is
10 Dr. Mechem.

11 COUNCIL PRESIDENT VERNA: We
12 welcome you, Doctor. Please identify
13 yourself for the record.

14 DR. MECHEM: My name is
15 Dr. Crawford Mechem. I'm the EMS Medical
16 Director for the Philadelphia Fire
17 Department. I'm also an Associate
18 Professor of Emergency Medicine at the
19 Hospital of the University of
20 Pennsylvania.

21 COUNCIL PRESIDENT VERNA: Do
22 you mind pulling the microphone closer to
23 you. Thank you.

24 DR. Mechem: Too tall.

25 COUNCIL PRESIDENT VERNA: I

1 4/19/06 - WHOLE - BILL 060001, ETC.

2 think you heard the question.

3 DR. MECHEM: To answer your
4 question, no, I don't agree with that.
5 We have to be very careful about --

6 COUNCIL PRESIDENT VERNA: I'm
7 sorry. You don't agree with what?

8 DR. MECHEM: Your comment that
9 three minutes makes a difference.

10 COUNCIL PRESIDENT VERNA:
11 Really?

12 DR. MECHEM: Yes. Let me try
13 to explain. When you use the term "heart
14 attack," you have to be very careful
15 about what you're talking about. Heart
16 attack from a medical perspective, from
17 my perspective, is someone who is having
18 an acute myocardial infarction, meaning
19 he or she is experiencing a blockage in
20 the arteries of the heart. So this is a
21 patient whose heart is still beating and
22 still pumping.

23 When we think about a person
24 who is actually in cardiac arrest,
25 meaning the heart has stopped beating,

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2 that's a much more time dependent issue,
3 and so in that case, in a patient who is
4 in cardiac arrest, three minutes does
5 make a difference.

6 For a patient who is having a
7 heart attack, meaning a myocardial
8 infarction, three minutes is probably
9 less important. Getting them care sooner
10 is certainly good, but there's very
11 little, if any, evidence to prove or to
12 illustrate that three minutes makes a
13 difference in a patient who is having a
14 myocardial infarction, or a heart attack,
15 versus a patient who is having a cardiac
16 arrest.

17 COUNCIL PRESIDENT VERNA: So
18 cardiac arrest, you're telling me that
19 three minutes does make a difference?

20 DR. MECHEM: That's correct.

21 COUNCIL PRESIDENT VERNA: Okay.
22 Well, to me, as a layperson, that's still
23 a heart attack, but you're the doctor, so
24 you can label it any way you want. I'm
25 labeling it as a heart attack.

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2 I have asked and I still have
3 not received and I am interested in the
4 one location at 20th and Federal. I have
5 asked repeatedly where is the closest ALS
6 from 20th and Federal. I don't know the
7 other locations. I think Councilpeople
8 from those districts would certainly be
9 more familiar with them, but I don't know
10 them.

11 Where would the closest be?
12 Because I think our top priority has to
13 be public safety. I am really very
14 concerned about this, and I know,
15 Commissioner, you did indicate at one
16 point in time that there would be a
17 rover, whatever a rover is. I don't know
18 what happens if somebody, say, on my
19 block has heart failure or heart arrest
20 or a heart attack, or whatever label we
21 want to give it. Where is the closest
22 ALS? Because three minutes in some cases
23 can mean a difference.

24 COMMISSIONER AYERS: Council
25 President, the closest locations to Medic

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2 14-B, which is the medic unit that was in
3 question located at 20th and Federal
4 Streets, the closest medic units are
5 Medic 7 located at 2110 Market Street,
6 Medic 11 --

7 COUNCIL PRESIDENT VERNA: I'm
8 sorry. Did you say Market?

9 COMMISSIONER AYERS: That's
10 correct.

11 Medic 11 at --

12 COUNCIL PRESIDENT VERNA: It
13 will certainly take more than three
14 minutes for somebody at that unit to get
15 from 21st and Market to 2000 South Broad,
16 but that's okay. Continue, please.

17 COMMISSIONER AYERS: 1300 West
18 Shunk Street; that's Medic 11. 1341
19 South 12th Street; that's Medic 27. 711
20 South Broad Street; that's Medic 35.
21 2301 South 24th Street is Medic 37.

22 COUNCIL PRESIDENT VERNA: Is
23 that in Grays Ferry?

24 COMMISSIONER AYERS: Yes, it
25 is. That's correct.

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2 And 3031 Grays Ferry Avenue is
3 Medic 40. So that is a total of six
4 medic units that are perimetered medic
5 units. They surround Medic 14-B.

6 COUNCIL PRESIDENT VERNA: And
7 you feel very strongly that that is the
8 way to go and people in my community
9 should have no concern about a response
10 that would be in ample time for their
11 life to be saved?

12 COMMISSIONER AYERS: I believe
13 that our emergency medical technicians
14 are well equipped to respond to that
15 location; to initiate or to continue
16 based on who is there, to continue CPR;
17 to administer oxygen; to apply an
18 automatic external defibrillator to try
19 and save this person's life; and to get
20 them to a hospital. I believe that they
21 can do that.

22 COUNCIL PRESIDENT VERNA: What
23 is the difference between a paramedic and
24 an EMS technician?

25 DR. MECHEM: Actually, there's

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2 a paramedic and there's an emergency
3 medical technician. An emergency medical
4 technician has gone through a Department
5 of Transportation curriculum of roughly
6 110 hours. He or she are able to provide
7 some basic medical intervention, such as
8 apply oxygen, open an airway, immobilize
9 a cervical spine, apply and activate an
10 automatic external defibrillator, stop
11 bleeding or put pressure on bleeding and
12 some other skills as well.

13 A paramedic, on the other hand,
14 is a higher level emergency medical
15 technician who has gone through somewhere
16 between 1,000 and 1,500 hours of
17 training. In addition to building upon
18 the curriculum of an EMT, he or she has
19 in addition acquired the skills of
20 inserting intravenous lines, placing and
21 interpreting a cardiac monitor,
22 administering a variety of essentially
23 prescription medications.

24 COUNCIL PRESIDENT VERNA: I
25 know that the Commissioner had indicated

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2 at the last hearing that we were having
3 difficulty trying to get paramedics.
4 What are we doing to try to address that
5 issue?

6 COMMISSIONER AYERS: Well, we
7 currently have an open exam for
8 paramedics now. We have been recruiting
9 in all of the hospitals in the area, and
10 that will remain open until April 21st.
11 It's been open for a few weeks now.

12 So hopefully we're going to be
13 able to get paramedics into the Fire
14 Department and start to get a class and
15 put them into service. I'm not sure what
16 number we'll get, but we're going to
17 continue.

18 COUNCIL PRESIDENT VERNA: And
19 when do you anticipate or hope that will
20 happen?

21 COMMISSIONER AYERS: The
22 application period closes on the 21st.
23 Personnel will inform me of everyone who
24 has applied. As soon as the application
25 process that they have to do is

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2 completed, they'll create a list, an
3 eligibility list. And once that
4 eligibility list is in place, I'm going
5 to put a class in. That class is going
6 to be approximately six to seven weeks
7 they'll be in-serviced.

8 COUNCIL PRESIDENT VERNA: And
9 how many paramedics are we short?

10 COMMISSIONER AYERS: Currently,
11 we have 240 paramedics that's required.
12 We have five vacancies, and we have ten
13 paramedics that are detailed for training
14 and other reasons, which would mean 15
15 for the current level. However, with the
16 24-hour units and the added units, we
17 have approximately 48 that we would be
18 short right now. And if we wanted to
19 upgrade to all paramedics, it's like 63.

20 COUNCIL PRESIDENT VERNA: So if
21 you had your way, you would hire 63
22 paramedics from a list that may be
23 created after the test is given?

24 COMMISSIONER AYERS: If we have
25 a list of 63, Council President, I'll be

1 4/19/06 - WHOLE - BILL 060001, ETC.
2 a happy person and we would begin to
3 hire.

4 COUNCIL PRESIDENT VERNA: Okay.
5 And how much would that cost? Do you
6 have any indication?

7 COMMISSIONER AYERS: I can get
8 back to you with the exact cost on those
9 things.

10 COUNCIL PRESIDENT VERNA:
11 Commissioner, in the FY2007, you will be
12 adding eight ALS units. Will the units
13 you downgraded in 2006 be restored to ALS
14 in the 2007? If not, can you tell me why
15 not?

16 COMMISSIONER AYERS: Well, if
17 they weren't, it would be because of the
18 same position that we're in now, that the
19 paramedics would not be available. The
20 units that we plan on upgrading, we do
21 plan to upgrade to ALS based on the
22 arbitration and everything that we went
23 through, and we would configure them as
24 an ALS with a different staffing. We
25 would have a limited, what is called, a

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2 dual-staffed unit, a dual-staffed unit,
3 where you have a paramedic and an
4 emergency medical technician.

5 So that is my intention on the
6 eight units. And when we have enough
7 paramedics and we've hired enough, we
8 will upgrade.

9 COUNCIL PRESIDENT VERNA: Well,
10 I get extremely concerned, because, as I
11 said, I consider public safety to be our
12 top priority, and I have to -- the doctor
13 may disagree with me. I may disagree
14 with him. But there are cases and, as I
15 said, whether it be heart arrest or
16 whatever, three minutes I am told by some
17 very good people could mean a matter of
18 life and death. And I am telling you, I
19 don't think that we should ever, ever be
20 in a position where we cannot respond to
21 an emergency call like that.

22 Councilwoman Krajewski.

23 COUNCILWOMAN KRAJEWSKI: Thank
24 you.

25 Good afternoon, Commissioner.

1 4/19/06 - WHOLE - BILL 060001, ETC.

2 COMMISSIONER AYERS: Good
3 afternoon.

4 COUNCILWOMAN KRAJEWSKI: If the
5 Department intends to close less than
6 eight of the companies, what is the new
7 number and how many do you wish to
8 spare -- wish to close anyway?

9 COMMISSIONER AYERS: The
10 company closing -- the budget that came
11 in, the proposed budget, was for three
12 engines and two ladders.

13 COUNCILWOMAN KRAJEWSKI: Which
14 are the targeted companies that will be
15 spared?

16 COMMISSIONER AYERS: With that
17 configuration, we don't know. The only
18 thing I can say is that we would look at
19 that, we would examine it, and it would
20 be of the eight that was designated
21 originally.

22 COUNCILWOMAN KRAJEWSKI: By
23 your response, you're telling me that you
24 really haven't done the review yet about
25 what companies will be spared or closed?

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2 COMMISSIONER AYERS: We've
3 looked at a myriad of scenarios, a myriad
4 of scenarios. We don't know exactly
5 which companies at this point.

6 COUNCILWOMAN KRAJEWSKI: So our
7 constituents really don't know what
8 companies they're going to lose; is that
9 right? Don't you think that they have a
10 right to know?

11 COMMISSIONER AYERS: Well, what
12 we do know is that it was -- of the eight
13 companies that were put out there, it
14 will be of those eight companies. It was
15 four engines and four ladders in the
16 initial presentation. It would be from
17 that grouping.

18 COUNCILWOMAN KRAJEWSKI: But
19 you can't tell me which ones will be
20 spared; is that right?

21 COMMISSIONER AYERS: No, I
22 can't say that right now.

23 COUNCILWOMAN KRAJEWSKI: So you
24 haven't really completed the review; is
25 that what we're saying here?

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2 COMMISSIONER AYERS: No. What
3 I'm saying is that those combinations are
4 numerous, and for us to actually look at
5 that and say what happens after we're
6 told to implement this budget, then
7 that's when we'll actually go in and
8 we'll look at the data again. We'll look
9 at what we have in front of us and we'll
10 make those decisions.

11 COUNCILWOMAN KRAJEWSKI: I'm a
12 little thick.

13 COUNCIL PRESIDENT VERNA:
14 You're not alone. I mean, we are in the
15 process of a budget hearing.

16 COUNCILWOMAN KRAJEWSKI: But we
17 still don't know which ones are going to
18 close.

19 COUNCIL PRESIDENT VERNA: The
20 Commissioner can't answer your question.
21 The Finance Director can't tell us when
22 we're going to receive a letter regarding
23 the PICA issue. I don't know what we're
24 doing sitting here. But we're supposed
25 to pass a budget.

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2 COUNCILWOMAN KRAJEWSKI: Well,
3 that's one of the reasons I've been
4 absent for a while, because you don't get
5 any answers. You're only told what they
6 have to.

7 COUNCIL PRESIDENT VERNA: What
8 they think they want you to know. That's
9 what it is.

10 COUNCILWOMAN KRAJEWSKI: I
11 agree. It's a waste. Only what we're
12 being told.

13 COUNCIL PRESIDENT VERNA:
14 Commissioner, when do you think you will
15 have the information that Councilwoman
16 Krajewski is asking for? Will it be
17 before we consider this budget? And we
18 would have to vote on this by the end of
19 May.

20 COMMISSIONER AYERS: Well, I
21 believe that once we find out exactly
22 what the budget is going to be and we get
23 information to take those companies and
24 close those companies, realign that, I'll
25 be able to give it to you.

1 4/19/06 - WHOLE - BILL 060001, ETC.

2 COUNCIL PRESIDENT VERNA:

3 Commissioner, we're talking about the
4 budget that's in front of us. I don't
5 mean to be short. I really don't. But I
6 find this extremely frustrating. We have
7 a budget in front of us. You have your
8 budget.

9 COUNCILWOMAN KRAJEWSKI: Also,
10 public safety are the effects of closing,
11 what effect will they have on it.

12 COUNCIL PRESIDENT VERNA: So as
13 I said, it's your budget that we're
14 considering and you can't answer the
15 Councilwoman's question. I don't know
16 how we are supposed to in good conscience
17 vote on a budget that we can't get
18 answers to.

19 So will you in fact have the
20 information that Councilwoman Krajewski
21 is asking for by the end of May?

22 COMMISSIONER AYERS: I will
23 work on the --

24 COUNCIL PRESIDENT VERNA: Or
25 before the end of May, because we vote on

1 4/19/06 - WHOLE - BILL 060001, ETC.

2 it at the end of May.

3 COMMISSIONER AYERS: I will
4 work on the different configurations so
5 that you can look at that, Councilwoman.

6 COUNCILWOMAN KRAJEWSKI: I'm
7 not blaming you.

8 COMMISSIONER AYERS: No. I
9 understand.

10 COUNCIL PRESIDENT VERNA:
11 Nobody is blaming anybody, but here we're
12 going to be blamed in the end.

13 COUNCILWOMAN KRAJEWSKI: Our
14 constituents want to know. They want to
15 know.

16 COUNCIL PRESIDENT VERNA:
17 Precisely.

18 COUNCILWOMAN KRAJEWSKI: They
19 don't want to wake up one morning and see
20 the firehouse isn't there.

21 COUNCIL PRESIDENT VERNA: And
22 it will be your fault.

23 COUNCILWOMAN KRAJEWSKI: Yes.

24 Thank you, Commissioner.

25 COUNCIL PRESIDENT VERNA: Any

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2 other questions or comments from members
3 of the Committee?

4 (No response.)

5 COUNCIL PRESIDENT VERNA:

6 Commissioner, I would really appreciate
7 it if we could get any and all
8 information that we have asked for in the
9 last hearing which we are asking for
10 today. We have to put this budget to
11 bed. We will be voting on it, and we
12 want to know that whatever we're voting
13 on is something that we could live with.
14 So please get back to us.

15 COMMISSIONER AYERS: Okay.

16 Thank you.

17 COUNCIL PRESIDENT VERNA: Thank
18 you.

19 MR. MCPHERSON: The Department
20 of Public Health.

21 COUNCIL PRESIDENT VERNA:

22 Commissioner.

23 COMMISSIONER AYERS: There is a
24 handout for you that you had asked for
25 that explained a lot better the chain of

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2 life we talked about. You said you'd
3 like to have it. I have one for each and
4 every Councilperson.

5 COUNCIL PRESIDENT VERNA: Thank
6 you.

7 Commissioner, good afternoon
8 and welcome.

9 COMMISSIONER PARIS: Good
10 afternoon, President Verna. Thank you.

11 COUNCIL PRESIDENT VERNA:
12 Commissioner, during the public
13 testimony, we heard a very different
14 story than you presented with regards to
15 waiting times for appointments at the
16 various district health centers, as well
17 as the shortages for drugs in filling
18 prescriptions.

19 Again, I'm going to ask you to
20 please tell us what the waiting period is
21 for appointments at the various health
22 centers.

23 COMMISSIONER PARIS: The
24 waiting time for an appointment in the
25 health centers depends upon what kind of

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2 appointment it is that the patient needs
3 and which of the health centers that
4 person is interested in getting an
5 appointment from.

6 The average wait for the health
7 centers right now for an initial
8 appointment, which is the first
9 appointment that the person receives when
10 they first call in for medical attention,
11 is anywhere between four weeks to about
12 12 weeks or more. That's the average.

13 What happened is, in many
14 instances when the -- the reason why it
15 varies is because when the person first
16 calls in, they ask for a particular
17 health center, which is the health center
18 in many instances the one in their
19 neighborhood, and they are told what the
20 waiting period is, but they are also
21 offered the option of going to another
22 health center where there might be an
23 initial visit that it's much sooner. But
24 the fact is that people want to be seen
25 in the health centers that is within

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2 their proximity, in their communities.

3 COUNCIL PRESIDENT VERNA:

4 Commissioner, I don't think I was the
5 only one that heard your testimony and I
6 believe that there were people in other
7 sections of the City that in fact were
8 here, may have seen you on TV, may have
9 heard you on radio talking about the
10 period of time that one had to wait, and
11 I think at that hearing you indicated
12 that, for instance, if someone lived in
13 South Philadelphia and had to wait 12
14 weeks for an initial visit, they could
15 certainly go to a clinic in the Northeast
16 which was not as busy and they could
17 probably just walk in.

18 Somebody from the Northeast
19 clinic or who lives in that community
20 said that that was so far from the truth.
21 Their waiting period was as long as, if
22 not longer, than people in South
23 Philadelphia, for instance. So I would
24 like you to clarify the record, please.

25 COMMISSIONER PARIS:

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2 Absolutely. What I referred to was not
3 exactly -- it was not talking about a
4 person wanting an appointment and being
5 able to get it in another health center.
6 What I was talking about was the fact
7 that even a person that wants and calls
8 for an initial appointment has access to
9 seeing a physician through the walk-in
10 clinic and they don't need an
11 appointment. When a person calls and
12 says, I need to see a doctor, we will
13 give them, according to whichever health
14 center they want to visit, we will let
15 them know when the next available initial
16 visit is.

17 COUNCIL PRESIDENT VERNA: Which
18 would be 12 weeks hence.

19 COMMISSIONER PARIS: It depends
20 on the health center, ma'am, and it
21 depends on the time of the day that they
22 call. And I'm not being facetious at
23 all. What happens is, it depends. If
24 you call in after somebody has just
25 cancelled an appointment, then that

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2 appointment becomes available. But that
3 is why when I talk about the waiting time
4 for an appointment, I talk in terms of
5 average, average time.

6 Regardless of the waiting time
7 for an appointment, anyone that needs
8 care can go into the health center the
9 day after they call and they will be seen
10 by either a physician if it's available
11 or definitely by a nurse.

12 COUNCIL PRESIDENT VERNA: I
13 guess I'm not really seeing this picture
14 as it's being painted. Do any of my
15 colleagues understand it?

16 Councilwoman Tasco.

17 COUNCILWOMAN TASCO: Thank you,
18 Madam President.

19 I think a number of us were
20 concerned, Commissioner, when you
21 testified before that we were left with
22 the impression that it took less time to
23 get an appointment, say, in the Northeast
24 than it would be in South Philadelphia.
25 We had a number of members of the Health

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2 Advisory Board to come in and they were
3 very concerned about the information that
4 we were given, because they shared with
5 us information about the length of time
6 it takes to get an appointment at
7 practically all of the health centers.

8 COMMISSIONER PARIS:

9 Councilwoman Tasco, if I mentioned that
10 Health Center 10 was easier to get in, I
11 was probably talking in general terms,
12 because actually Health Center 10 is the
13 one health center that has the longest
14 period of time to wait for an initial
15 visit. Not to be seen by a physician,
16 which is a different thing, but for an
17 initial visit, because recently we had
18 two physicians that resigned from that
19 health center. We are in the process of
20 identifying two physicians right now that
21 will be hired to replace those two
22 physicians that left, but because of
23 that, it is hard right this moment to get
24 an appointment at Health Center 10.

25 But overall what I was talking

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2 about was a person calling in, how long
3 do they have to wait if they say, I am
4 sick. If they say, I am sick, we will
5 tell them to come in the next day early
6 in the morning, because we have a walk-in
7 clinic where they will be seen by a
8 nurse, and if the nurse determines that
9 the person is very sick and needs to be
10 seen by a physician, the patient will be
11 seen by a physician.

12 COUNCILWOMAN TASCO: Well, I
13 guess you can understand our concern
14 when, our reaction, I imagine, when the
15 district representatives came in to say
16 that they heard your comments and they
17 did not agree.

18 Let me ask you a question. How
19 many doctors do you have at each health
20 center assigned?

21 COMMISSIONER PARIS: It depends
22 on the health centers and it depends, of
23 course, if we're talking about adult
24 medicine or pediatrics.

25 We have an average of five

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2 physicians per health center. Our
3 physicians, most of them, work an average
4 of 20 hours a week. So if you think of
5 them as part-times, then we will have
6 about ten physicians. If you think of
7 them in terms of the equivalent of a
8 full-time physician, then that will be
9 about an average of five.

10 In terms of pediatricians, we
11 have in each health center again about
12 four part-time physicians. If you think
13 of them in terms of full time, there will
14 be an average of two physicians.

15 COUNCILWOMAN TASC0: So you
16 have five part time working 20 hours a
17 week?

18 COMMISSIONER PARIS: Each one
19 of them, yes.

20 COUNCILWOMAN TASC0: Each one
21 of them. So there are five physicians at
22 Health Center 10?

23 COMMISSIONER PARIS: Well,
24 right now Health Center 10 is a different
25 story because, like I said, there were

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2 two physicians there that just resigned.

3 COUNCILWOMAN TASC0: If they
4 were all on board, how many would you
5 have?

6 COMMISSIONER PARIS: Yes,
7 ma'am. That will be the average, yes.

8 COUNCILWOMAN TASC0: But each
9 of them work 20 hours a week?

10 COMMISSIONER PARIS: Yes.

11 COUNCILWOMAN TASC0: At five?

12 COMMISSIONER PARIS: Yes.

13 COUNCILWOMAN TASC0: So it's
14 about 100 hours?

15 COMMISSIONER PARIS: That will
16 be about 100 hours a week?

17 COUNCILWOMAN TASC0: You can
18 bring your technicians up.

19 COUNCIL PRESIDENT VERNA: So,
20 Councilwoman, as I understand it, we only
21 have three physicians presently at
22 District 10?

23 COUNCILWOMAN TASC0: Three
24 working 20 hours each per week.

25 COMMISSIONER PARIS: Yes. That

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2 is correct. I just double-checked, and,
3 yes, we have -- it's an average of
4 anywhere between five FTEs and four.

5 COUNCILWOMAN TASC0: The
6 doctors that are hired by the health
7 centers, are they hired through the City
8 Civil Service Department or do they
9 contract directly with the Health
10 Department?

11 COMMISSIONER PARIS: Most of
12 them are hired through a contract
13 agreement with the hospitals that provide
14 back-up services to the health centers.

15 COUNCILWOMAN TASC0: So you
16 don't hire them directly?

17 COMMISSIONER PARIS: We hire
18 them directly. We hire them directly,
19 but they're not Civil Service employees.
20 Some of them are, but very few. And some
21 of them are, again, through a contract
22 with the different hospitals.

23 COUNCILWOMAN TASC0: That
24 doesn't make sense to me. Do you
25 contract with the hospitals?

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2 COMMISSIONER PARIS: Yes. We
3 contract with the hospital for specialty
4 services. We don't provide specialty
5 services in any of the health centers.

6 COUNCILWOMAN TASC0: So the
7 five physicians at Health Center 10, they
8 have a direct contract with the Health
9 Department or --

10 COMMISSIONER PARIS: Yes.

11 COUNCILWOMAN TASC0: So you
12 contract with them directly for services?

13 COMMISSIONER PARIS: We hire
14 the physicians, yes.

15 COUNCILWOMAN TASC0: You hire
16 the physicians.

17 COMMISSIONER PARIS: Yes.

18 COUNCILWOMAN TASC0: How does
19 the hospital come in?

20 COMMISSIONER PARIS: Well, some
21 physicians are hired directly through the
22 Health Department and some physicians are
23 paid through contracts from the different
24 hospitals that we contract with.

25 COUNCILWOMAN TASC0: And they

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2 provide the doctors to the health
3 centers?

4 COMMISSIONER PARIS: And they
5 provide the services to us.

6 COUNCILWOMAN TASC0: Do you
7 have people on your staff here with you
8 today who could answer these questions a
9 little better than you?

10 COMMISSIONER PARIS: Sure.

11 COUNCILWOMAN TASC0: Why don't
12 you bring them up.

13 MR. STOREY: Hi. Would you
14 like me to identify myself?

15 COUNCILWOMAN TASC0: Sure.

16 MR. STOREY: Tom Storey,
17 Medical Services Director, Ambulatory
18 Health Services, Health Department.

19 COUNCILWOMAN TASC0: Thank you.

20 MR. STOREY: The way that we
21 hire physicians is, as Carmen said, it's
22 a combination. We have some that are on
23 contract that we pay through direct
24 hospital contracts that we have, and then
25 we have some that are Civil Service. And

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2 what we like to do is start folks on
3 contract, and if we're happy with their
4 medical performance and they're happy
5 working with us, as Civil Service
6 positions become available, we will move
7 them to Civil Service.

8 COUNCILWOMAN TASC0: Now,
9 during the course of the discussion, I'm
10 not sure, maybe it was the Civil Service
11 Department, are these doctors residents
12 of the City of Philadelphia?

13 MR. STOREY: It's a
14 combination. There is a residency --

15 COUNCILWOMAN TASC0: Those who
16 are Civil Service.

17 MR. STOREY: Right. No. I
18 understand. There is in fact a residency
19 waiver for the medical job classes. So
20 if we looked at the folks that work with
21 us, I honestly don't know what the split
22 is. Some do live in the City; some do
23 not.

24 COMMISSIONER PARIS: Actually,
25 we have about 23 physicians on board

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2 right now that do not live in the City of
3 Philadelphia, which we have approved City
4 waivers, City residency waivers.

5 COUNCILWOMAN TASC0: Forever?

6 COMMISSIONER PARIS: Pardon me?

7 COUNCILWOMAN TASC0: Forever?

8 The waivers are forever?

9 COMMISSIONER PARIS: The
10 waivers are based on the job
11 classification.

12 COUNCILWOMAN TASC0: So you can
13 be a doctor working at a health center,
14 be Civil Service and not have to live in
15 the City?

16 COMMISSIONER PARIS: That's
17 correct.

18 COUNCILWOMAN TASC0: What
19 effort is made to recruit doctors who do
20 live in the City?

21 COMMISSIONER PARIS: I'm sorry?

22 COUNCILWOMAN TASC0: What
23 effort is made to recruit doctors who do
24 live in the City?

25 COMMISSIONER PARIS: Well, we

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2 announce -- we advertise in all media.
3 We use all written media, such as the
4 Inquirer, the Daily News. We also use
5 the medical journals, because that's
6 really where physicians look for
7 employment. We also use the Internet,
8 and we do a lot of recruitment in the
9 different schools of medicine.

10 COUNCILWOMAN TASC0: So if we
11 did not provide the waiver, would you
12 believe we would not get doctors who do
13 live in the City to work for the Health
14 Department?

15 COMMISSIONER PARIS: I agree
16 with that, yes. I think that we will not
17 have enough physicians to cover for the
18 vacancies. And I can just give an
19 example. Just recently, the Medical
20 Evaluation Unit had vacancies, had a
21 vacancy for a physician, and we
22 advertised, and we did not get not one
23 resume from a City resident, from a
24 physician that lives in Philadelphia, not
25 one.

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2 COUNCILWOMAN TASC0: Okay. How
3 many slots do you have for physicians and
4 how many are vacant?

5 COMMISSIONER PARIS: We have
6 about 100 physicians on board.

7 COUNCILWOMAN TASC0: How many
8 slots are you budgeted for?

9 COMMISSIONER PARIS: The
10 problem, Councilwoman Tasco, is that we
11 hire the physicians on a part-time basis.
12 In other words, they work 20 hours. So
13 we are trying to -- we have 100
14 physicians on an average on board. If
15 we're looking at -- if you're asking us
16 in terms of in full-time equivalencies,
17 then we'll talk probably about three
18 physicians.

19 COUNCILWOMAN TASC0: Let's go
20 to your part time.

21 COMMISSIONER PARIS: Then we
22 will have five.

23 COUNCILWOMAN TASC0: If you
24 have part time and you have a budgeted
25 amount of dollars for so many part time,

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2 are all those part-time slots filled?

3 COMMISSIONER PARIS: No, ma'am.

4 We will say we have about five of those
5 20-hour slots that are vacant.

6 COUNCILWOMAN TASC0: Five that
7 are vacant?

8 COMMISSIONER PARIS: Yes,
9 ma'am.

10 COUNCILWOMAN TASC0: Are they
11 all over or in one health center?

12 COMMISSIONER PARIS: They are
13 in different health centers.

14 COUNCILWOMAN TASC0: Now, one
15 of the other issues that was raised with
16 us was the number of staff positions in
17 the Health Department and that there has
18 been a decline in a number of positions
19 not filled.

20 Could you give us how that
21 impacts on your ability to deliver
22 service? First, is that statement true,
23 that there are vacancies that have not
24 been filled, and do you intend to fill
25 them or have you been requested to fill

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2 them, or what?

3 COMMISSIONER PARIS: We have a
4 number of vacancies, and if we're talking
5 about specifically about ambulatory
6 health services, the health centers --

7 COUNCILWOMAN TASC0: Now we can
8 go across the board now.

9 COMMISSIONER PARIS: Across the
10 board. Yes, we have a number of
11 vacancies in the Health Department right
12 now. And what we have done is, we have
13 requested authorization to fill those
14 positions.

15 COUNCILWOMAN TASC0: How many
16 do you have vacant that are critical to
17 providing services across the board?

18 COMMISSIONER PARIS: We have
19 close to 40 positions that are vacant
20 right now.

21 COUNCILWOMAN TASC0: How long
22 have they been vacant?

23 COMMISSIONER PARIS: They are
24 in different stages. Some of them have
25 been vacant for months; some of them have

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2 been vacant for a couple of weeks. And
3 it depends on the vacancies. For
4 example, we have some vacancies for
5 nurses that have been vacant for a very
6 long time, and the reason is not lack of
7 authorization for us to fill those
8 positions. It's just the national
9 shortage of nurses that we are suffering
10 from here in Philadelphia as well.

11 So there are other positions;
12 for example, engineers for the air
13 management program, another very, very
14 skilled position, that there is a
15 shortage on that particular profession.
16 So those positions are hard to fill.

17 The clerk typist is a position
18 where it's a lot easier to fill, but the
19 problem is that it is hard to keep an
20 ongoing active list. By the time a list
21 is created and you go back to the list to
22 draw, many of the people that are left on
23 the list already have another job or do
24 not want to come to the Health Department
25 because they know that the demand in

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2 terms of how busy and hectic it is in the
3 Health Department is much greater than in
4 other departments.

5 COUNCILWOMAN TASC0: So of
6 those 40, you have a number that you
7 can't fill for various reasons or
8 another, and the other percentage, are
9 they not going to be filled at all?

10 COMMISSIONER PARIS: I have put
11 in a request to the Administration,
12 ma'am, to have all those positions
13 filled, and I am waiting for the
14 Administration to authorize for me to
15 follow up and contact Central Personnel
16 to do the hiring -- I mean the
17 interviewing and the hiring.

18 COUNCILWOMAN TASC0: Okay. How
19 about your prescriptions in terms of the
20 time it takes for a patient to have a
21 prescription filled? Is there a delay
22 time there?

23 COMMISSIONER PARIS: Yes, there
24 is a delay. We are very proud that the
25 waiting time has certainly improved in

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2 the past years, where a couple of years
3 ago it was weeks, two weeks an average
4 for a health center. Today the average
5 per health center is two days. And we
6 actually have two health centers, Health
7 Center 5 and Strawberry Mansion Health
8 Center, where the person can come in
9 today and tomorrow they can pick up their
10 prescription. But an average is two
11 days.

12 COUNCILWOMAN TASC0: Average
13 two days?

14 COMMISSIONER PARIS: Yes,
15 ma'am.

16 COUNCILWOMAN TASC0: Is there a
17 notice or warning or some reminder sent
18 to patients that their prescription might
19 be due in a week and they might want to
20 put their prescription in now?

21 COMMISSIONER PARIS: Yes, and
22 that is part of the physician education
23 component. Each physician, they always
24 are very good at reminding their patients
25 not to wait until they run out of

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2 medicine to bring in their prescriptions.
3 It's what we call the five-day grace
4 period. They can bring their
5 prescriptions in five days before the
6 date for the new prescription arrives and
7 we will fill the prescription.

8 So if the patients are doing
9 that, if they bring in the prescription
10 within five days, then the waiting period
11 of two days or even three days, let's say
12 in case of there's a weekend in between,
13 will not affect them in any way.

14 Now, that is with the
15 understanding that we have the medication
16 in stock. Our pharmacies, just like any
17 other pharmacy in the industry, sometimes
18 we have problems because there are no --
19 different medications are not in stock,
20 whether it's because the pharmaceuticals
21 are not producing them fast enough or
22 because the demand in the health center
23 is greater for whatever reason. That's
24 also something that we are always aware
25 of. And in a case, for example, where

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2 somebody comes to us and gives us a
3 prescription and we don't have that
4 medicine available, they can take the
5 medication to any facility, to any other
6 pharmacy, because our prescription
7 entitles them to get the medication.

8 Many of the patients do have
9 insurance, and we understand that some of
10 them don't. In many occasions we have
11 that they will go back to their
12 physicians and explain the situation.
13 Many times the physicians, if they have
14 any kind of samples, they will share them
15 with the patients. But that is the
16 reality of the industry today. Sometimes
17 we just don't have them.

18 COUNCILWOMAN TASCO: Thank you,
19 Madam President.

20 COUNCIL PRESIDENT Verna: Thank
21 you, Councilwoman.

22 I just have a question.

23 I was just looking,
24 Councilwoman, at -- Councilwoman Tasco, I
25 wanted to thank you, but I was just

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2 looking at the information that was
3 provided to us by the Fire Department,
4 and, again, it's contradictory. So I'll
5 tell you, this could be a never-ending
6 process.

7 Commissioner, as I said, I was
8 sidetracked. I was looking at what was
9 provided to us by the Fire Department,
10 and I don't know if Councilwoman Tasco
11 did in fact question you about how long
12 it takes for a prescription to be filled.
13 She did?

14 COMMISSIONER PARIS: Yes,
15 ma'am.

16 COUNCIL PRESIDENT VERNA: Do
17 you mind repeating that, please?

18 COMMISSIONER PARIS: Not a
19 problem. It takes anywhere between two
20 to three days. The majority of the
21 health centers, of course, are on a
22 two-day turnaround. In addition to that,
23 we have two health centers in which the
24 prescriptions are ready the very next
25 day.

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2 COUNCIL PRESIDENT VERNA:

3 During the public testimony, we were
4 informed that there is a great need for
5 additional dental services. Can you
6 explain what dental services are provided
7 and what is the waiting period for an
8 appointment?

9 MR. STOREY: We provide what we
10 call general dental care or routine
11 dental care. I think the best way to
12 think about it is to realize it was
13 originally set up as a children's
14 program, although we provide care to both
15 children and adults. So we do basic
16 dental work. We do routine cavity
17 repair, but we don't do extractions and
18 the like.

19 COUNCIL PRESIDENT VERNA: Is
20 there a dentist assigned to each clinic?

21 MR. STOREY: There are dental
22 clinics at seven of the eight sites.
23 There is no dental clinic at Strawberry
24 Mansion. And there are dentists assigned
25 to each site, yes.

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2 COUNCIL PRESIDENT VERNA:

3 Please, please tell me that the dentist
4 is not included in the five doctors.

5 MR. STOREY: The dentist is not
6 included in the five.

7 COMMISSIONER PARIS: No, ma'am,
8 it's not.

9 COUNCIL PRESIDENT VERNA:
10 Thanks.

11 In your opinion, Commissioner,
12 what additional funding is required in
13 order for the health centers to be able
14 to provide services at an acceptable
15 level, and what do you consider
16 acceptable?

17 COMMISSIONER PARIS: That is a
18 very hard question to answer, because if
19 we talk about what are the demands right
20 now in the health centers, it's a demand
21 that goes beyond not only staffing
22 capacity but also infrastructure,
23 building capacity. So it's not only the
24 fact that, yes, ideally we would like to
25 have more physicians and more nurses and

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2 more clerks, but in the City of
3 Philadelphia where we have such a big
4 demand for services from the uninsured,
5 it's not only that, it's also the fact
6 that we have overgrown all the buildings
7 and there's not enough space. For
8 example, we don't have enough exam rooms.

9 COUNCIL PRESIDENT VERNA: So in
10 the center where you presently have only
11 three doctors, when do you anticipate the
12 other two vacancies will be filled?

13 COMMISSIONER PARIS: Actually,
14 we hired the clinical director already
15 for that facility. That was a promotion.
16 She was a physician. Now she's
17 transitioning out of her practice in the
18 health center where she was working and
19 she is transitioning into the new health
20 center. The other position that we have
21 vacant, we are, as we speak, advertising
22 for that particular position.

23 COUNCIL PRESIDENT VERNA: Are
24 you advertising for one or two positions?

25 COMMISSIONER PARIS: We

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2 actually have five 20-hour slots
3 available right now for physicians, and
4 we are advertising for all of them,
5 ma'am.

6 COUNCIL PRESIDENT VERNA: How
7 are you advertising?

8 COMMISSIONER PARIS: Well, we
9 use media. We use the written media. We
10 use the Inquirer. We use the Daily News.
11 But, most importantly, we use the medical
12 journals, because that is really how
13 physicians look for positions for jobs.
14 We also have developed relationships with
15 the different medical schools in the area
16 and we are always constantly in
17 communication with them when we have any
18 kind of vacancies.

19 COUNCIL PRESIDENT VERNA: Okay.
20 Thank you.

21 Are there any other questions?

22 (No response.)

23 COUNCIL PRESIDENT VERNA:

24 Seeing none, I thank you, and I offer you
25 my congratulations again. I know it's

1 4/19/06 - WHOLE - BILL 060001, ETC.

2 quite a challenge that you're facing, and
3 I do wish you luck.

4 COMMISSIONER PARIS: Thank you
5 very much, ma'am.

6 COUNCIL PRESIDENT VERNA: Thank
7 you.

8 The Committee will stand in
9 recess until Thursday, April 27th at
10 9:30. Thank you very much.

11 (Committee of the Whole
12 adjourned at 3:35 p.m.)

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CERTIFICATE

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I HEREBY CERTIFY that the

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proceedings, evidence and objections are

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contained fully and accurately in the

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stenographic notes taken by me upon the

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foregoing matter on April 19, 2006, and that

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this is a true and correct transcript of same.

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MICHELE L. MURPHY

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RPR-Notary Public

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